

SHM Minnesota Chapter Scientific Abstract Competition Research/Quality Improvement and Clinical Vignettes Submission Guidelines

Official Rules

Eligibility: The MN Chapter of SHM is accepting abstract submissions in two categories: Research/Quality Improvement, and Clinical Vignettes. Abstracts are eligible for submission if they have not been published in a peer-reviewed journal prior to 11/04/2021. Submissions presented at SHM regional meetings or other organizations' meetings (e.g., SGIM, ACP) within the past year are eligible for submission unless they have been published in a peer-reviewed journal or journal supplement. Abstracts published in meeting proceedings or other materials that are not copyrighted are eligible for submission. It is the responsibility of the submitter to check whether the material is copyrighted. SHM does not prohibit authors from submitting their abstracts to other meetings following acceptance.

Author/Submitter Responsibility: Posters are to be uploaded and will be presented in a virtual meeting on November 18th from 6:30-8:30 pm and a presenting author must be able to attend. The first author is also responsible for adhering to the Conflict of Interest Policy, obtaining disclosure information from all coauthors, and ensuring that all coauthors meet the definition of authorship as stated by the International Committee of Medical Journal Editors. ***Only the first author will receive email communications regarding the abstract, and it is his/her responsibility to communicate any notifications with co-authors, to accept or decline the invitation to present the abstract, if applicable, and to withdraw the abstract, if applicable.***

Statements of Disclosure:

Conflict of Interest Policy

The MN Chapter of SHM promotes improved inpatient care, teaching, and research in the field of hospital medicine. MN Chapter of SHM strives to ensure that these goals are met throughout its educational activities and academic competitions. All authors submitting abstracts to the Competition are required to disclose any relationships with pharmaceutical companies, biomedical device manufacturers, or other organizations that could represent potential conflicts in their presentation. The submitting author is responsible for providing disclosure information for all co-authors. This requirement applies to currently existing relationships or relationships within the past year that relate to the abstract entry. The principal intent of this disclosure is not to prevent authors with a potential conflict from submitting an abstract or presenting their work. Rather, disclosure information will assist the chapter leadership in the review process.

Permissions

The author submitting this abstract acknowledges that he/she and all coauthors have seen and agree with the following: the contents of the abstract; responsibility for clinical trial data (if applicable); that

the abstract has not been published in a peer-reviewed journal prior to 11/04/2021 (prior presentation of the abstract at other meetings is allowed); disclosures of financial interest in or support from, or equity positions in, manufacturers of drugs, services, or products mentioned in the abstract; trial registry information. Finally, all authors and coauthors acknowledge understanding that plagiarism will not be tolerated and result in withdraw of the abstract and a thorough investigation that could result in prohibition from participation.

Type of Submissions

Research/Quality Improvement

Both adult and pediatric submissions can report clinical research, innovation, QI, basic science research, or a systematic review of a clinical problem. Research abstracts concerned with the highlighted topic areas above, as well as efficiency, cost, or method of health care delivery methods and medical decision-making are also encouraged.

Abstracts submitted for the research category should adhere to the following headings:

- Background
- Methods
- Results
- Conclusions (Do not use phrases such as “The results will be discussed.”)

Clinical Vignettes

An adult or pediatric clinical vignette is a report of one or more cases that illustrates a new disease entity or a prominent or unusual clinical feature of an established disease, highlights an area of clinical controversy in hospital medicine, or illustrates a unique patient safety issue. It may include a summary of pertinent patient history, physical findings, laboratory data, or management description. It should be clear from the discussion portion of the abstract why the vignette is most appropriate for a hospital medicine (versus general internal medicine) competition. Clinical vignettes will be judged on originality, organization, writing ability, and relevance to hospital medicine.

Abstracts submitted for the clinical vignette category should adhere to these headings:

- Case presentation
- Discussion
- Conclusions

MN Chapter Scientific Abstract Competition

Research/Quality Improvement and Clinical Vignettes Submission Form

Abstract Submission Deadline – 11/4/2021

Please send abstract to: shm.minnesota@gmail.com

Submitting/Presenting Author		First Author	
Degree		Additional Author	
Institution		Additional Author	
Department/section		Additional Author	
Adult or Pediatric		Additional Author	
Training Level		Additional Author	
Email		Additional Author	
Phone Number		Additional Author	
SHM Member? Y/N		Additional Author	

Type of Submission: Research/Quality Improvement Clinical Vignette

Abstract Title:

Structured Abstract: Please use the following headings:

- 1) Research/QI: Background, Methods, Results, Conclusions
- 2) Clinical Vignette: Case Presentation, Discussion, Conclusions

Instructions: Abstracts are limited to 3,000 characters including spaces.

Tables and graphics: Please keep in mind that each table and graph will count as 200 characters and will contribute to the total character count. **No more than 3 tables or graphics will be accepted.** A graphic should have good quality and be submitted using either .jpg, .jpeg, or .gif format.

Style: Write for clarity and directness. It is NOT acceptable to state that “the results will be discussed.” Avoid the use of medical jargon or stock empty phrases.

Abbreviations, Symbols, and Nomenclature: Usage should conform as closely as possible to that recommended in the CBE Style Manual (6th edition, 1994), published by the Council of Biology Editors and available from CBE Secretariat, 9650 Rockville Pike, Bethesda, MD, 20814. Nonstandard abbreviations must be kept to a minimum and must be explained when used. Generic names of drugs are preferred: a propriety name may be given only with the first use of the generic name.

Units of Measurement: Metric (SI), including those for height, length, mass (weight), and body temperature should be used. Measurements for substances of known, pure composition should be in millimoles/milliliter or millimoles/liter. For mixtures of substances where exact composition is not known, use grams/liter.

IRB or other research approval: If human or animal species were exposed to risks not required by their medical needs during the study included in the abstract, the author affirms that the study was approved by an appropriate committee. If no such committee was available and informed consent was needed, the author affirms that approval was obtained in accordance with the principles set forth in “The Institutional Guide to DHEW Policy on Protection of Human Subjects” and the “Guide for the Care and Use of Laboratory Animals,” published by the NIH.

Proofread abstracts carefully to avoid errors before they are submitted. Submit high resolution tables and graphics since poor quality images will be difficult to read in print and electronic versions. Images and graphics that are not of a suitable quality for publication will be removed from the online supplement.

Abstract Selection

Abstracts will be blinded and scored by a panel of reviewers assigned to each category. The reviewers may decide to reassign your abstract to another category, and ultimately, they will decide whether your abstract is selected to present at the local chapter meeting. Invitation and instructions will be provided upon notification of selection.

Notification of Results: All first authors will be notified if abstracts are accepted via e-mail within a week after the submission deadline.

Award

The top scoring abstract overall will receive automatic acceptance into the National Scientific Abstract Competition taking place during SHM’s annual Conference, [Converge](#), April 7-10, 2022 in Nashville, TN. Please note that the winner is required to submit their abstract to the [national submission site](#) by the November 29, 2021 deadline in order to be accepted. This person must also be able to attend Converge 2022 and be present.

The MN Chapter of SHM will award the first place winner free registration to SHM’s Annual Meeting.

While only the first place winner is provided automatic acceptance into the National competition, everyone is encouraged to submit their abstracts into the National Competition. In the instance that the first place winner cannot attend, the award will be provided to the second place, and then third and so forth.

Presenting Author’s Availability

The presenting author must be available to present his or her work at the local chapter meeting.

Poster presenters, including residents and fellows, are responsible for any associated costs of attending the meeting, including registration, travel, and poster preparation and mailing costs.

Acceptance/Withdraw of Your Abstract

Acceptance notifications will be emailed within a week after the submission deadline. You will have a week to accept the invitation to present your poster. Your acceptance will be considered a commitment to attend the meeting and present the poster. After accepting, if you find that you are no longer able to attend the meeting, you may send someone to present in your place, but this must be communicated to the SHM Chapter Leadership in writing.

Questions?

Please contact the Chapter Leadership at shm.minnesota@gmail.com for questions regarding the local competition.