

You are here:

Submit an Abstract

Collection of this information is authorized by The Public Health Services Act, Section 410 (42 U.S.C. § 285; US Code - Section 285: Purpose of Institute). Rights of applicants are protected by The Privacy Act of 1974. Participation is voluntary, and there are no penalties for not submitting an abstract or withdrawing an abstract from consideration at any time. Refusal to participate will not affect your benefits in any way. The information collected will be kept private to the extent provided by law and only made available to other meeting attendees, unless permission is expressly granted to make this information available on the meeting website. The information collected through this abstract submission website will enable the planning committee to select the most suitable research to present at the meeting.

Public reporting burden for this collection of information is estimated to average 60 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: NIH, Project Clearance Branch, 6705 Rockledge Drive, MSC 7974, Bethesda, MD 20892-7974, ATTN: PRA (0925-X000). Do not return the completed form to this address.

Lead Author Full Name and Degree*

Affiliation*

Department

Mailing Address*

City*

State/Territory/Province*

Postal Code*

Country*

Telephone Number

Lead Author Email Address*

Co-Author Names and Degrees

Submission Title

Abstract (Limited to 300 words)

Implications for Public Health and/or Clinical Care

Submission Type*

Oral Presentation Poster Presentation Other

I am a Student