**CLINICAL SCIENCE ABSTRACT GUIDELINES**

* Must be a Resident, Clinical or Postdoctoral Fellow or Graduate Student registered in the Department of Surgery
* Only one submission per applicant allowed
* Your supervisor **must** review your abstract prior to submission
* Must be able to copy/paste into Microsoft Word for program
* The abstract limit is **350** words using **12-point Times New Roman** font

**Note:** headings are not included in the total word count

<http://archsurg.jamanetwork.com/public/instructionsForAuthors.aspx#SecManuscriptPreparationandSubmissionRequirements>

Please use the headings suitable for the method/design of your study (retrospective case series, randomized controlled study, systematic review, etc.)

* Additional authors need to be listed in authorship order
* **NO** tables, graphs or figures will be accepted in the abstract
* Incomplete submissions or submissions not adhering to the above guidelines will be returned to sender
* Please submit only studies with available results section (i.e. do not submit abstracts with no results)
* Email completed abstracts to surgrsch@ualberta.ca no later than **noon, February 21, 2020**
* You will receive an email confirmation verifying receipt of your abstract within 3 business days
* The choice of oral vs. poster is made by the Abstract Review Committee based on overall scoring in the categories of basic (fundamental) or clinical science
* All applicants will be notified regarding the status of their abstract (successful vs. unsuccessful) via email the week of March 23, 2020

First Name (Given Name): Last Name (Family Name):

Please check all that apply:

[ ] Resident [ ]  Clinical Fellow [ ]  Post-doctoral Fellow [ ]  MSc Student [ ]  PhD Student

Department of Surgery

Surgical Division:

Residency Year:

Department of Surgery Graduate Degree Program Year: Clinical Fellowship Year:

Postdoctoral Fellowship Year:

Phone Number: E-mail Address:

Primary Supervisor:

Are you currently a resident, fellow, or graduate student in a department other than Surgery? [ ] Yes [ ]  No

Have your supervisor and all additional authors reviewed your abstract? [ ] Yes [ ]  No

Category of Submission: **Clinical Science**

Has the project been funded by the Edmonton Civic Employees (ECE)? [ ] Yes [ ]  No

Is this project substantially different than what has been previously presented at Tom Williams Surgical Research Day in previous years? [ ] Yes [ ]  No

**Title**

Presented By:

Additional Authors:

**Background:**

**Objectives:**

**Methods:**

**Results:**

**Conclusions:**