ACRM AMERICAN CONGRESS OF REHABILITATION MEDICINE

PROPOSAL WORKSHEETS

All submissions must be submitted online via the <u>ACRM Annual Conference System</u>. If you submitted a proposal for the 2024 Annual Fall Conference & EXPO, you can use your same email and access code to login to the 2025 submission system and all your personal profile information will pre-populate. If you forgot your access code or you did not submit an abstract for the 2024 Annual Conference, please select the 'Join Now' button to create your profile.

Additional information about the Call for Proposals including important dates may be found at: https://acrm.org/call

To facilitate your submission, use this worksheet to help you compose your answers. Type up your responses in a document and then, copy/paste your responses into the online submission form. You may copy and paste text only (no graphics) from a word processing program such as Microsoft[®] Word.

Worksheets

| PRE-CONFERENCE INSTRUCTIONAL COURSES |
|--|
| SYMPOSIA |
| RESEARCH PAPERS AND POSTERS |
| SYSTEMATIC AND META-ANALYTIC REVIEW PAPERS AND POSTERS |

PRE-CONFERENCE INSTRUCTIONAL COURSES

| 1 | Choose the thematic or topical area for your abstract from the list below: Instructional Course Symposium Research Paper or Poster Systematic and Meta-Analytic Review Paper or Poster | |
|---|---|--|
| 2 | Title of Abstract | Title must be 25 or fewer words in length Capitalize the first letter in every word in the title that consists of four or more letters, including prepositions such as "with" and "from". |
| 3 | Time Allotment | NOTE: Courses are 4 hours (half-day), 8 hours (full-day) or 16 hours (two-day). Full day courses include a 1-hour break at mid-day. The Program Committee will determine final duration in hours. Proposed course content and scope must justify the requested duration. |
| 4 | Level of Material Introductory Intermediate Advanced | Select one |
| 5 | What Presentation Type are you Planning: Hands-on Workshop Workgroup Demonstration - Other | Select one |
| 6 | Body of Abstract | Body must be 1,000 or fewer words in length The scoring of your proposal depends upon following the submission criteria closely and completely. Reviewers will use this information to score your submission. Topic is timely Topic demonstrates relevance. Topic demonstrates consistency with available literature and evidence A clear, reflective component is identified Abstract articulates purpose and content of presentation |

| 7 | Supply abbreviated description as it will appear in the conference materials | Level of material is appropriate for the identified target audience (e.g. Introductory, Intermediate, Advanced) References are current and relevant Proposal is coherent Description must be 150 or fewer words in length. Provide an abbreviated description of your proposed presentation that informs attendee expectations and attracts your target audience. This description will be used unedited in print and electronic promotional materials. Please ensure correct spelling, grammar and punctuation are used. Text entered here will be EXACTLY how the description appears in marketing materials and the online program. |
|----|--|--|
| 8 | Faculty of proposed instructional course | You must have at least 2 presenters for an instructional course. |
| 9 | Faculty Disclosures | Financial Disclosures, Non-Financial Disclosures, Presentation Bias, Unlabeled or Unapproved Drugs and Attestation of CME/CE Value Statements must be completed by each faculty member to be considered for acceptance. |
| 10 | Faculty Agreements | All presenters must review and agree to the Faculty Agreement. |

| 11 | Identify all participants in this Abstract and ensure all requirements | Directions: | |
|----|--|--|--|
| 11 | Identify all participants in this Abstract and ensure all requirements are met | Directions: Add participants to the table until all individual contributors to this abstract have been entered Click the participant's role entry to set or unset them as a Presenter Use the ordering buttons to set the sequence in which contributors will be listed The Actions section shows each of the areas that must be completed before a participant will be "done." Click an area to update or complete it. Actions for each presenter include: Contact Information (including professional address) Professional Information Biography CV Education If you wish to have presenters complete their own information, you may add their name, email address and presenter role. Once complete, click the 'Invite' button next to their name. They will receive an automated email with instructions to complete their information. Once all contributors are "done," you may proceed | |
| 12 | Course Outline | Provide Instructional Course sections, presenters, time allotment, and brief outline of each presentation. | |

| 13 | Primary content topic: Aging Research & Geriatric Rehabilitation Arts & Neuroscience | Select the main topic of your presentation. If your content is broadly applicable across diagnoses or is not diagnosis specific, select "cross-cutting." |
|----|--|--|
| | Athlete Development & Sports Rehabilitation | |
| | Behavioral Health Sciences | |
| | Big Data | |
| | Brain Injury | |
| | Burn Rehabilitation | |
| | Cancer Rehabilitation | |
| | Cardiopulmonary Rehabilitation | |
| | Caregiver Needs | |
| | Clinical practice (assessment, diagnosis, treatment, | |
| | knowledge translation/EBP, implementation science, program | |
| | development) | |
| | Complementary Integrative Rehabilitation Medicine | |
| | COVID-19 and Long COVID (Post-Acute Sequelae SARS-CoV-2 | |
| | infection, PASC) | |
| | Rehabilitation for All | |
| | Early Mobilization/Rehabilitation in the Intensive Care Unit | |
| | Health Services Research | |
| | International | |
| | Leadership | |
| | Lifestyle Medicine | |
| | Limb Restoration | |
| | Measurement | |
| | Military and Veterans Affairs | |
| | Neurodegenerative disease (e.g., MS, Parkinson's disease) | |
| | Neuroplasticity (includes neuroscience) | |
| | Pain Rehabilitation | |
| | Pediatric Rehabilitation | |
| | Rehabilitation Treatment Specification System | |
| | Skin Management | |
| | Spinal Cord Injury | |
| | Stroke | |
| | Technology (e.g. robotics, assistive technology) | |
| | Telehealth | |
| | Trauma | |
| | Writing Grants & Getting Funded | |

| 14 15 16 17 | Additional Content Topic Areas Learning Objectives Key Words Please upload your Reference List (lists of works cited) | Additional Topic Areas may be selected if your presentation is also directly relevant to more than one topic area. A minimum of three (3) learning objectives are required. Do not number your objectives or paste tabs in the fields below. Omit boilerplate text such as "The learner will be able to" Authors must include 3 to 5 key words from NLM's Medical Subject Headings (MeSH) (http://www.nlm.nih.gov/mesh/) Word or PDF uploads allowed Contains a complete list of all sources (books, journal articles, websites, etc.) that |
|----------------------|---|--|
| 18 | Additional Information Save Abstract progress or lock and submit for review | have been directly cited in your presentation Please answer the two questions below: Who is your ideal audience? Additional information You must click the "Save Submission" button for your Abstract to be submitted for review. If all tasks have been completed, you will then be able to submit your presentation. |

SYMPOSIA

| | Information Requested – Symposia | Instructions or Notes |
|---|---|--|
| 1 | Choose the thematic or topical area for your abstract from the list below: Instructional Courses Symposia Research Papers and Posters Systematic and Meta-Analytic Review Papers and Posters | |
| 2 | Title of Abstract | Title must be 25 or fewer words in length Capitalize the first letter in every word in the title that consists of four or more letters, including prepositions such as "with" and "from". |
| 3 | What Type of Symposium Are You Planning: Original Research: Present new and important basic or clinical research extending existing studies or providing a new approach to a traditional subject Systematic or Meta-Analysis/Guideline Development Translating Evidence into Clinical Practice | If the type of symposium you are presenting is a combination of the types listed, please choose all that apply (If choosing multiple formats, please ensure abstract includes all requested information from each type: e.g., original research and translational or systematic review and translational) |
| 4 | Focus Training/instruction in new knowledge/skills (attendees will develop new competencies that can be applied in practice or research) In-depth information communication/knowledge translation (course is intended primarily to impart information) | Select one |
| 5 | Level of Material | Choose between Introductory, Intermediate or Advanced |
| 6 | Body of Abstract | Body must be 1,000 or fewer words in length You may copy and paste text only (no graphics) from a word processing program such as Microsoft[®] Word. The scoring of your proposal depends upon following the submission criteria closely and completely. Reviewers will use this information to score your submission. Topic is timely Topic demonstrates relevance. Topic demonstrates consistency with available literature and evidence |

ACRM 2024

| 7 | Supply abbreviated description as it will appear in the conference materials | A clear, reflective component is identified Abstract articulates purpose and content of presentation Level of material is appropriate for the identified target audience (e.g. Introductory, Intermediate, Advanced) References are current and relevant Proposal is coherent Description must be 150 or fewer words in length. Provide an abbreviated description of your proposed presentation that informs attendee expectations and attracts your target audience. This description will be used unedited in print and electronic promotional materials. Please ensure correct spelling, grammar and punctuation are used. |
|----|--|---|
| 8 | Faculty of proposed Symposium | Directions: 5. Add participants to the table until all individual contributors to this abstract have been entered. You are strongly encouraged to have a minimum of 2 presenters. 6. Click the participant's role entry to set or unset them as a Presenter 7. Use the ordering buttons to set the sequence in which contributors will be listed 8. The Actions section shows each of the areas that must be completed (only presenters are required to supply disclosure) before a participant will be "done." Click an area to update or complete it. a. Actions for each presenter include: Contact Information (including professional address) Professional Information CV Education c. If you wish to have presenters complete their own information, you may add their name, email address and presenter role. Once complete, click the 'Invite' button next to their name. They will receive an automated email with instructions to complete their information. once all contributors are "done," you may proceed |
| 9 | Faculty Disclosures | Financial Disclosures, Non-Financial Disclosures, Presentation Bias, Unlabeled or Unapproved Drugs and Attestation of CME/CE Value Statements must be completed by each faculty member to be considered for acceptance. |
| 10 | Faculty Agreements | All presenters must review and agree to the Faculty Agreement. |

| 11 | Timed Session Outline | Provide presenter, time allotment, and brief outline of each presentation. |
|----|---|---|
| | | It is important to build in time for Q&A and account for transition time between presenters. |
| 12 | Primary content topic: Aging Research & Geriatric Rehabilitation Arts & Neuroscience Athlete Development & Sports Rehabilitation Behavioral Health Sciences Big Data Brain Injury Burn Rehabilitation Cancer Rehabilitation Cardiopulmonary Rehabilitation Caregiver Needs Clinical practice (assessment, diagnosis, treatment, knowledge translation/EBP, implementation science, program development) Complementary Integrative Rehabilitation Medicine COVID-19 and Long COVID (Post-Acute Sequelae SARS-CoV-2 infection, PASC) Rehabilitation for All Early Mobilization/Rehabilitation in the Intensive Care Unit Health Services Research International Leadership Lifestyle Medicine Limb Restoration Measurement Military and Veterans Affairs Neuroplasticity (includes neuroscience) Pain Rehabilitation Pediatric Rehabilitation Rehabilitation Rehabilitation Rehabilitation Military and Veterans Affairs Neuroplasticity (includes neuroscience) Pain Rehabilitation Rehabilitation | presenters. Select the main topic of your presentation. If your content is broadly applicable across diagnoses or is not diagnosis specific, select "cross-cutting." |
| | Shoke | ACRM 2024 |

| | Technology (e.g. robotics, assistive technology) Telehealth Trauma Writing Grants & Getting Funded | |
|----|---|--|
| 13 | Additional Content Topic Areas | Additional Topic Areas may be selected if your presentation is also directly relevant to more than one topic area. |
| 14 | Learning Objectives | A minimum of three (3) learning objectives are required. Do not number your objectives or paste tabs in the fields below. Omit boilerplate text such as "The learner will be able to" |
| 15 | Key Words | Authors must include 3 to 5 key words from NLM's Medical Subject Headings (MeSH) (http://www.nlm.nih.gov/mesh/) |
| 16 | Please upload your Reference List (lists of works cited) | Word or PDF uploads allowed Contains a complete list of all sources (books, journal articles, websites, etc.) that have been directly cited in your presentation |
| 17 | Additional Information | Please answer the two questions below: Who is your ideal audience? Additional information |
| 18 | Save Abstract progress or lock and submit for review | You must click the "Save Submission" button for your Abstract to be submitted for review. If all tasks have been completed, you will then be able to submit your presentation. |

RESEARCH PAPERS AND POSTERS

| 1 | Choose the thematic or topical area for your abstract from the list below: Instructional Courses Symposia Research Papers and Posters Systematic and Meta-Analytic Review Papers and Posters | |
|---|---|--|
| 2 | Choose the presentational form of your abstract content from the list below: Poster Oral Presentation | Click to view the Instructions for Authors for Structured Abstracts in the Archives of PM&R for more information: https://www.elsevier.com/data/promis_misc/apmr_inststrabs_updated.doc |
| 3 | Title of Abstract | Title must be 25 or fewer words in length Capitalize the first letter in every word in the title that consists of four or more letters, including prepositions such as "with" and "from". |
| 4 | | |

| 5 | Research Objectives | • | Begin with a clear, concise statement of the precise objectives. Objectives begin with the word "To" (e.g., To investigate the). If more than 1 objective is addressed, the main objective should be indicated and only key secondary objectives stated. If an a priori hypothesis was tested, it should be stated. Do not type or include the header" Research Objective(s)" in the box. |
|---|---------------------|----|---|
| 6 | Design | 2. | Describe the basic study design. State the duration of follow-up, if any. As many of the following terms as apply should be used: Intervention studies: randomized controlled trial (see Glossary for the definition of this and other technical terms); nonrandomized controlled trial; double-blind; placebo control; crossover trial; and/or before-after trial. For studies of screening and diagnostic tests: criterion standard (ie, a widely accepted standard with which a new or alternative test is being compared; this term is preferred to gold standard); and/or blinded or masked comparison. For studies of prognosis: inception cohort (subjects assembled at a similar and early time in the course of the disorder and followed thereafter); cohort (subjects followed forward in time, but not necessarily from a common starting point); and/or validation cohort or validation sample of the study involves the modeling of clinical predictions. For studies of causation: randomized controlled trial; cohort; case control; and/or survey (preferred to "cross-sectional study"). For descriptions of the clinical features of medical disorders: survey and/or case series. For studies that include a formal economic evaluation: cost-effectiveness analysis; cost-utility analysis; and/or cost-benefit analysis. For new analyses of existing data sets, the data set should be named and the basic study design disclosed. |

| 7 | Setting | - | Describe the study setting(s). Of particular import is whether the setting is the general community, a primary care or referral center, private or institutional practice, or ambulatory or hospitalized care. Do not type or include the header "Setting" in the box. |
|---|--|---|---|
| 8 | Participants (or Animals, Specimens, Cadavers) | • | Subjects include, but are not limited to, controls, laboratory animals, etc. State clinical disorders, important eligibility criteria, and key sociodemographic features. Provide the numbers of participants and how they were selected (see below), including the number of otherwise eligible subjects who were approached but refused. If matching is used for comparison groups, specify characteristics that are matched. In follow-up studies, indicate the proportion of participants who completed the study. In intervention studies, give the number of patients who withdrew due to adverse effects. For selection procedures, use the following terms, if appropriate: random sample |
| | | | (where "random" refers to a formal, randomized selection in which all eligible subjects have a fixed and usually equal chance of selection); population-based sample; referred sample; consecutive sample; volunteer sample; or convenience sample. These terms help readers determine an important element of study generalizability. They also supplement (rather than duplicate) the terms used by indexing services. |
| 9 | Interventions | • | Describe the essential features of all interventions, including their method and duration of administration. The intervention should be identified by its most common clinical name (eg, the generic term chlorthalidone). Common synonyms should be given as well to facilitate electronic textword searching. This includes the brand name of a drug if a specific product was studied. NOTE: If the study does not contain any interventions, then the following form should be used: Interventions: Not applicable. Do not type or include the header "Interventions" in the box. |

| 10 | Main Outcome Measure(s) | • | Indicate the primary study outcome measurement(s) as planned before data collection began. If the study does not emphasize the main planned outcomes of a study, state this fact and indicate the reason. If the hypothesis being reported was formulated during or after data collection, state this information clearly. |
|----|-------------------------|---|--|
| | | • | Do not type or include the header "Main Outcome Measure" in the box. |
| 11 | Results | • | Provide the main study results. Define measurements requiring explanation for the expected audience of the article. Indicate whether observers were blinded to patient groupings, particularly for subjective measurements. Results must be given in narrative rather than tabular form. If possible, the results should be accompanied by CIs (eg, 95%) and the exact level of statistical significance. For comparative studies, CIs should relate to the differences between groups. For nonsignificant differences for the major study outcome measure(s), state the clinically important difference sought and give the CI for the difference between the groups. When risk changes or effect sizes are given, indicate absolute values so that readers can determine the absolute as well as relative impact of the finding. Approaches such as number needed to treat to achieve a unit of benefit are encouraged when appropriate; reporting of relative differences alone is usually inappropriate. If appropriate, studies of screening and diagnostic tests should use the terms sensitivity, specificity, and likelihood ratio. If predictive values or accuracy are given, give prevalence or pretest likelihood as well. Report no data in the abstract that do not appear in the article. |
| | | • | Do not type or include the header "Results" in the box. |
| 12 | Conclusions | • | Conclusions must be directly supported by the evidence reported. Avoid speculation and overgeneralization, and indicate whether additional study is required before the information should be used in usual clinical settings. Do not type or include the header "Conclusions" in the box. |
| 13 | Author(s) Disclosures | • | All authors listed on the abstract are required to declare any conflicts or lack thereof. Disclosure should include any relationship that may bias an author(s) presentation or that, if known, could give the perception of bias. The intent of this disclosure is not to prevent a speaker from making a presentation or an author(s) from presenting a poster. This policy allows the listener/attendee to be fully knowledgeable in evaluating the information being presented. |

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| | | b. If you wish to have presenters complete their own information, you may add their name, email address and presenter role. Once complete, click the 'Invite' button next to their name. They will receive an automated email with instructions to complete their information. |
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| 16 Primary content topic: Aging Research & Geriatric Rehabilitation Artis & Neuroscience Athlete Development & Sports Rehabilitation Behavioral Health Sciences Big Data Brain Injury Burn Rehabilitation Carcer Rehabilitation Carcer Rehabilitation Carcer Rehabilitation Carcegiver Needs Clinical practice (assessment, diagnosis, treatment, knowledge translation/EBP, implementation science, program development) Complementary Integrative Rehabilitation Medicine COVID-19 and Long COVID (Post-Acute Sequelae SARS-CoV-2 infection, PASC) Rehabilitation for All Early Mobilization/Rehabilitation in the Intensive Care Unit Health Services Research International Leadership Lifestyle Medicine Limb Restoration Messurement Military and Veterans Affairs Neurodgegenerative disease (e.g MS, Parkinson's disease) Neuroplasticity (includes neuroscience) Pain Pediatric Rehabilitation R | Trauma Writing Grants & Getting Funded |
|--|---|
|--|---|

| 17 | Additional Content Topic Areas | Additional Topic Areas may be selected if your presentation is also directly relevant to more than one topic area. |
|----|--|--|
| 18 | Learning Objectives | A minimum of three (3) learning objectives are required. Do not number your objectives or paste tabs in the fields below. Omit boilerplate text such as "The learner will be able to" |
| 19 | Key Words | Authors must include 3 to 5 key words from NLM's Medical Subject Headings (MeSH) (http://www.nlm.nih.gov/mesh/) |
| 20 | Please upload your Reference List (lists of works cited) | Word or PDF uploads allowed Contains a complete list of all sources (books, journal articles, websites, etc.) that have been directly cited in your presentation |
| 21 | Save Abstract progress or lock and submit for review | You must click the "Save" button for your Abstract to be submitted for review. If all tasks have been completed, you will then be able to submit your presentation. |

SYSTEMATIC AND META-ANALYTIC REVIEW PAPERS AND POSTERS

| 1 | Choose the thematic or topical area for your abstract from the list | |
|---|---|--|
| | below: | |
| | Instructional Courses | |
| | Symposia | |
| | Research Papers and Posters | |
| | Systematic and Meta-Analytic Review Papers and Posters | |
| 2 | Choose the presentational form of your abstract content from the | Click to view the Instructions for Authors for Structured Abstracts in the Archives of |
| | list below: | PM&R for more information |
| | Poster | (https://www.elsevier.com/data/promis_misc/apmr_inststrabs_updated.doc) |
| | Oral Presentation | |
| 3 | Title of Abstract | Title must be 25 or fewer words in length |
| | | Capitalize the first letter in every word in the title that consists of four or more |
| | | letters, including prepositions such as "with" and "from". |
| 4 | The total of the ne | xt six fields must not exceed 400 words. |
| | (Objectives, Data Sources, Study S | Selection, Data Extraction, Data Synthesis, Conclusions) |
| | For posters, if your abstract is accepted, you can expand the explanat strict word limit. | tions on the actual poster (and use graphics), but to submit an abstract now, there is a |
| 5 | Objective(s) | Begin with a precise statement (e.g., To investigate the) of the primary objective |
| | | of the review. |
| | | The focus should be guided by whether the review emphasizes factors such as cause |
| | | and diagnosis, prognosis, therapy, or prevention. It should include information about the specific population, intervention or exposure, and test or outcome being reviewed. |
| | | Do not type or include the header "Objective(s)" in the box. |

| 6 | Data Sources | Succinctly summarize data sources, including any time restrictions. Potential sources include experts or research institutions active in the field, computerized databases and published indexes, registries, abstract booklets, conference proceedings, references identified from bibliographies of pertinent articles and books, and companies or manufacturers of tests or agents being reviewed. If a bibliographic database is used, state the exact indexing terms used for article retrieval, including any constraints (e.g., English language or human). Do not type or include the header "Data Sources" in the box. |
|---|-----------------|---|
| 7 | Study Selection | Describe the criteria used to select studies for detailed review from among studies identified as relevant to the topic. Details of selection should include particular populations, interventions, outcomes, or methodologic designs. Specify the method used to apply these criteria (e.g., blind review, consensus, or multiple reviewers). State the proportion of initially identified studies that met selection criteria. Do not type or include the header "Study Selection" in the box. |
| 8 | Data Extraction | Describe the guidelines used for abstracting data and assessing data quality and validity (e.g., criteria for causal inference). State the method by which the guidelines were applied (e.g., independent extraction by multiple observers). Do not type or include the header "Data Extraction" in the box. |

| 9 | Data Synthesis | - | State the main results of the review, whether qualitative or quantitative. Outline the methods used to obtain these results. Meta-analyses should state the major outcomes that were pooled and include odds ratios or effect sizes, and, if possible, sensitivity analyses. |
|----|-----------------------|---|--|
| | | • | Numerical results should be accompanied by CIs, if applicable, and exact levels of |
| | | | statistical significance. Evaluations of screening and diagnostic tests should address issues of sensitivity, specificity, likelihood ratios, receiver operating characteristic curves, and predictive values. |
| | | • | Assessments of prognosis could include summaries of survival characteristics and |
| | | | related variables. State the major identified sources of variation between studies, for example, differences in treatment protocols, cointerventions, confounders, outcome measures |
| | | • | Do not type or include the header "Data Synthesis" in the box. |
| 10 | Conclusions | • | State the conclusions and their applications clearly, limiting generalization to the domain of the review. Suggest directions for new studies. Do not type or include the header "Conclusions" in the box. |
| 11 | Author(s) Disclosures | • | All authors listed on the abstract are required to declare any conflicts or lack thereof. Disclosure should include any relationship that may bias an author(s) presentation or that, if known, could give the perception of bias. The intent of this disclosure is not to prevent a speaker from making a presentation or an author(s) from presenting a poster. This policy allows the listener/attendee to be fully knowledgeable in evaluating the information being presented. |

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| 14 | Primary content topic: Aging Research & Geriatric Rehabilitation | Select the main topic of your presentation. If your content is broadly applicable |
|----|---|---|
| | Arts & Neuroscience | across diagnoses or is not diagnosis specific, select "cross-cutting." |
| | Atts & Neuroscience Athlete Development & Sports Rehabilitation | |
| | Behavioral Health Sciences | |
| | Big Data | |
| | Brain Injury | |
| | Burn Rehabilitation | |
| | Cancer Rehabilitation | |
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| | Complementary Integrative Rehabilitation Medicine | |
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| | Rehabilitation for All | |
| | Early Mobilization/Rehabilitation in the Intensive Care Unit | |
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| | Lifestyle Medicine | |
| | Limb Restoration | |
| | Measurement | |
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| | Pain | |
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| | Stroke | |
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| | Telehealth | |
| | Trauma | |
| | Writing Grants & Getting Funded | |

| 15 | Additional Topic Areas | Additional Topic Areas may be selected if your presentation is also directly relevant |
|----|--|---|
| 16 | Measurable Learning Objectives | to more than one topic area. A minimum of three (3) learning objectives are required. |
| | | Do not number your objectives or paste tabs in the fields below. Omit boilerplate text such as "The learner will be able to" |
| 17 | Key Words | Authors must include 3 to 5 key words from NLM's Medical Subject Headings (MeSH) (http://www.nlm.nih.gov/mesh/) |
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