### GUIDELINES FOR SUBMITTING ABSTRACTS TO GCMAS 2016:

### CLINICAL CASE STUDIES

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#### PATIENT HISTORY

The GCMAS 2016 Program Committee welcomes the submission of insightful case studies. Case studies must illustrate the value of gait analysis and/or modeling in the evaluation, understanding, and/or treatment of a movement disorder. Priority will be given to abstracts that include pre- and post-treatment data.

**CLINICAL DATA**

To be considered for a podium or poster presentation at the 2016 Conference, case studies must be formatted as shown in this template. Abstracts are limited to two pages. The content of each page must be contained within a 160mm X 225mm (6.3” x 8.8”) area. The text must be Times New Roman 12-pt font.

Two electronic copies must be submitted as PDF files: one copy for publication and one blinded copy for review. The first page of the publication copy should list the title of the paper, the author(s), affiliation(s), and email address of the corresponding author. The name of the presenting author should be underlined. The blinded copy should be devoid of any reference to the authors or affiliations. Please proofread your abstract before submitting it.

Abstracts describing case studies should be comprised of the following sections: History, Clinical Data, Motion Data, Treatment Decisions and Indications, Outcome (if available), Summary, and Disclosure Statement. One or two figures may be used, but the author(s) must ensure that the figures are legible when they are reduced to half size.

**MOTION DATA**

Abstracts must be submitted electronically and received by **December 11, 2015**.

If you encounter any problems with the submission process, or if you have questions about the scientific program, please contact the Program Council co-chairs:

Phyllis Richey PhD

Audrey Zucker-Levin PT, PhD, MBA, GCS Emeritus
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| One or two tables and/or figures may be incorporated within the document. All tables (Table 1) and figures (Fig. 1) must be referenced in the text. All titles, captions, figure legends, and axis labels should be large enough to be readable. For tables, include a brief title above the table. For figures, include a brief caption below the figure. The use of color is encouraged to enhance readability of the figures. Large graphics files may need to be compressed before exporting the PDF file. | Figure1 |

**Table 1:** Tables and graphs may span both columns if necessary (mean± SD).

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Running Speeds: | **3 m/s** | **4 m/s** | **5 m/s** | **6 m/s** |
| Stride Length: | 2.1 ± 0.3 m | 2.5 ± 0.2 m | 2.9 ± 0.3 m | 3.2 ± 0.2 m |
| Stride Rate: | 0.64 ± 0.12 Hz | 0.69 ± 0.11 Hz | 0.72 ± 0.13 Hz | 0.78 ± 0.12 Hz |

#### TREATMENT DECISIONS AND INDICATIONS

All abstracts that are properly formatted and submitted by the deadline will be peer reviewed. Abstracts that meet the acceptance criteria will be included in the official conference proceedings and published online. Authors of accepted abstracts will be considered for the GCMAS Best Paper and Best Poster Awards. When the first author is a student, abstracts will also be considered for the GCMAS Young Investigator Award.

**OUTCOME**

Include this section if post-treatment data are available.

**SUMMARY**

In this section, provide a succinct summary of the case, emphasizing how movement analysis or modeling contributed to the evaluation, understanding, and/or treatment of the subject. Describe any unanswered questions that might benefit from further research.

**DISCLOSURE STATEMENT**

I. Model and Wei C. Improvement have no conflicts of interest to disclose.

U. Measure is co-owner of Fiber Lengths, Inc., a company that develops and manufactures portable devices for the visualization and measurement of muscle architecture *in vivo.*