Call for Abstracts and Oral Presentations

Pain Medicine Symposium, 2011: Evolving Advanced Pain Therapies
November 11-12, 2011
Hyatt Regency, Jersey City on the Hudson, Jersey City, NJ

Submission Deadline: October 1, 2011

The PAIN, 2011 Conference Scientific Program Committee invites you to submit abstracts for papers to be presented at the upcoming conference in at the Hyatt Regency, Jersey City on the Hudson, Jersey City, NJ.

General Information
The Pain Medicine Symposium, 2011: Evolving Advanced Pain Therapies Conference Scientific Program Committee has reserved time on the program for scientific poster sessions. Poster sessions will take place during breaks on Friday and Saturday (November 11 & 12) and posters will be able for viewing throughout the entirety of the conference. You are welcome and encouraged to bring handouts.

Topics for the free oral presentations and posters are as follows:

1. Spinal Cord Stimulation and Peripheral Nerve Stimulation
2. Stimulation of the Brain
3. Intrathecal Therapies
4. Novel Stimulation Uses
5. Functional Electrical Stimulation
6. Novel Therapies for Pain Management
7. Minimally Invasive Surgical Options for Pain Management

Submissions are not limited to the topics listed above.

Paper abstracts previously presented or published may not be submitted without modification. Original work must be changed or expanded, resulting in a new abstract.

The Scientific Program Committee recognizes that submissions of high quality, accepted for presentation at this meeting, should be acknowledged. The Pain Medicine Symposium, 2011: Evolving Advanced Pain Therapies educational committee will retain the copyright of published abstracts.

Awards will be presented to the top poster presenters in the following categories – Best Scientific Advancement and Best Resident/Fellow submission.

Meeting Registration Guidelines for Presenters
Poster presenters must register for the meeting and pay the applicable registration fee, as Pain Medicine Symposium, 2011: Evolving Advanced Pain Therapies will not waive the registration fee. Presenters are also responsible for all personal expenses (e.g., travel, hotel). You are encouraged to register for the meeting and to reserve hotel accommodations as early as possible to ensure that space is available.
For Travel and Hotel Reservations, go online to: www.etouches.com/NYSIPP or contact the program coordinator directly: MichelleHByers@gmail.com or Crystal.Molfino@spinepainny.com.

**Submission Information**

Please use the recommended abstract format: Introduction/Statement of the Problem, Materials and Methods, Results, and Conclusions. The text of your abstract may be up to 300 words. **All correspondence will be sent to the presenting author.**

All abstracts should be submitted electronically, as Word documents (with a .doc extension), via e-mail to:

NYSIPP
Michelle Byers, Program Coordinator
Cell: 415-518-5391
Email: MichelleHByers@Gmail.com

If you have any questions, please contact Ms. Byers at the number noted above.

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**Policy on Commercial Support**

Policy on Commercial Support: Presentations must avoid commercialism. Presentations that constitute promotion and advertising will not be accepted. If the cost of a presentation has been underwritten to any extent, a clear acknowledgement stating the support and identifying the source should be included in the abstract (e.g., "The support of [corporation or institution] for this project is gratefully acknowledged."). Statements made in presentations are the sole responsibility of the author or presenter. Statements should not be viewed as or considered representative of any formal stance or position taken on any subject, issue, or product by the NYSIPP scientific committee or the NYSIPP.

Selection Criteria: Submissions will be reviewed and rated by members of the Scientific Program Committee who have expertise in the clinical area to which the submission belongs. Each submission will be reviewed for its scientific or clinical importance, ethical practice, and study design.

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**Submission Information**

- Poster presentations are limited to one (1) primary presenter.
- In 300 words or less, provide an accurate, succinct, and informative representation of the content that will be presented in the paper. The abstract communicates the essence of the presentation to the intended audience.
- Do not use abbreviations. Type in sentence case. Do not use all caps.
- Do not use the ampersand character (&) unless it is part of the company name.
- Proofread for typographical, grammar, and syntax errors.

Abstracts must be submitted via e-mail to: MichelleHByers@gmail.com.

Abstracts must be submitted in a Word document (with a .doc extension) and include the following information:

- Indication of presentation as paper
- Title of presentation
- Name and institution of presenter(s)
- Abstract text

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**Notification of Acceptance or Rejection of Submissions**

Primary presenters of paper submissions will be notified by mail of the proposal’s acceptance or rejection by October 15, 2011. Presenters will be required to complete a presenter information form and faculty disclosure form.
Abstract Title:

Primary Presenter:
(name and credentials)

Primary Presenter Institution:
(place of employment, city and state)

Co-presenter(s):
(name and credentials)

Co-presenter(s):
(place of employment, city and state)

Presenting author's full street address and e-mail address:

Abstract Text

Introduction

Materials and Methods

Results

Conclusion

References
Author 1, Author 2, Author 3, Author 4, et al. Title. Journal Year. Volume: start page-end page.

Acknowledgements
Please acknowledge any funding sources and contributors to the research in this section.

Figure and Table Legend

Learning Objectives:
1.
2.
3.
The information on this form must be submitted for the Primary Presenter Only. Please type the information with your name and credentials exactly as you want them to appear in the published materials.

Name ___________________________________________ Credentials _______________________

Professional Title _________________________________________________________________

Facility ________________________________________________________________

Work Address _________________________________________________________________

City __________________________ State __________________________

Postal / Zip Code __________________________ Country __________________________

Work Phone __________________________ Home Phone __________________________

Fax __________________________ E-mail __________________________

Preferred Method of Contact  ☐ E-mail  ☐ Phone (home/work)  ☐ Mail

Academic preparation/institution(s) _______________________________________________

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Please include information on relevant training and experience in this area __________________________

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Agreement
If this abstract is accepted for the Pain Medicine Symposium, 2011: Evolving Advanced Pain Therapies conference, I agree to make the presentation at the Conference. As the primary presenter, I give permission for duplication of this abstract for inclusion in NYSIPP published materials.

Signature ___________________________ Date __________________________
Presenting Data and Materials
Presenters for poster presentations must present at the assigned time to present materials. Specific space will be assigned to hang and display your materials. Posters should be hung prior to the first break on Friday, November 11 and removed at the conclusion of sessions on Saturday, November 12, 2011.

General Information
Your information should be self-explanatory so that you are free to supplement and discuss particular points raised by viewers. Again, handouts are strongly encouraged. You should bring enough handouts to insure availability to all attendees.