

ORTHOPAEDIC — TRAUMA — ASSOCIATION

# OTA Annual Meeting October 5 – 8, 2016

# Gaylord National Hotel National Harbor, Maryland

Online submission site will close **11:59pm U.S. Central Time Zone February 3, 2016**. Submitting authors will be notified of program committee decisions by June 1, 2016.

All authors' financial disclosure will be requested upon abstract acceptance.

### Presenters are expected to register and pay required fees to attend the OTA Annual Meeting.

**IMPORTANT NOTICE:** If an abstract is accepted for podium presentation, authors agree to submit a manuscript online by September 1, 2016. Authors who do not submit a manuscript by September 1 will be barred from submission in 2017 and 2018, as will authors who withdraw from presenting after initially accepting to present. Authors of any accepted POSTERS who do not present will also be barred from submitting for two years.

### **GENERAL GUIDELINES**

- Papers and Posters presented at a previous OTA Meeting or previously published are NOT eligible for submission.
- The OTA program committee will determine the most effective presentation method, either paper or poster. Abstracts accepted for podium presentation at the Annual Meeting will not be additionally presented as posters. However, abstracts chosen as podium presentations at the Basic Science Focus Forum may occasionally be selected for presentation as papers or posters at the Annual Meeting.
- It is the responsibility of the submitting author to communicate all presentation information to the presenting author.
- There is no numerical limit on the number of abstracts an author may submit. However, an author may present only one paper per session; various co-authors must present any additional accepted abstracts.
- OTA reserves the right to withdraw a presentation at any time.

**BASIC SCIENCE ABSTRACTS:** Authors are frequently unsure if their study should be submitted in the basic science or clinical section. If the study involves no living humans it most likely should be submitted under "basic science". This includes biomechanical studies on cadaveric or bone surrogates, studies involving animals, anatomic cadaveric studies, as well as other traditional basic science topics. Meta-analyses, economic studies, and traditional clinical studies should continue to be submitted in the clinical sections. The program committee reserves the right to move the submission to the section deemed most appropriate.

**LARGE DATABASE STUDIES**: There has been a recent increase in submission of so called "large database" research. The program committee suggests that authors consider recent recommendations for high quality

studies in this domain [1]. Two particularly relevant suggestions from this editorial include: "[Studies should] correlate less-common adverse events with modifiable and previously unidentified risk factors, identify adjustable provider- or hospital-level variables associated with readmissions or complications, and compare resource utilization for common interventions across diverse geographic regions or practice settings. [Additionally, studies should] either present a genuinely counterintuitive descriptive finding, or provide a specific suggestion to improve clinical care, practice management, or public policy." Large database studies that do not follow these guidelines are unlikely to be accepted.

1. Editorial: large database studies--what they can do, what they cannot do, and which ones we will publish. Grauer JN, Leopold SS. Clin Orthop Relat Res. 2015 May;473(5):1537-9.

#### **REQUIRED FORMATTING OF ABSTRACTS:**

- Text must be blinded (no references to author, institution or country within the body or title of the abstract. Non-blind abstracts will not be considered.)
- Abstract body character limit cannot exceed 4,545 (approximately one page). 1 inch margins; 12 pt font. (Spaces are included as characters.)
- One image (5mb max, pdf file) may be uploaded to augment your abstract text.
- Abstracts must contain: Purpose (hypothesis), Methods, Results and Conclusion.
- Define any abbreviations the first time they are used.
- Click here to view a sample of a correctly formatted abstract.
- It is required that all terminology, descriptions and classification of fractures and injuries be according to the OTA Fracture and Dislocation Compendium developed by the OTA's Coding and Classification Committee. The Fracture Compendium is published in the Journal of Orthopaedic Trauma; Vol 21, Number 10 Supplement, Nov/Dec 2007 or is available on the OTA website: <u>Fracture Compendium</u>

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