Due to the great success of last year’s event, the North Carolina Medical Society (NCMS) is issuing a Call for Scientific Posters for its 2014 Annual Meeting. This year, the competition will be held at the Grandover Resort in Greensboro October 24-25, during the NCMS’s Annual Meeting. The NCMS’s objective for the poster presentations is to offer students, residents and fellows an opportunity to share significant research and clinical work of interest with other fellow clinicians. We encourage all of our up-and-coming physicians to participate in this educational program by submission of a formal application for scientific presentation. The General Poster Session will be divided into two categories: Clinical Research and Clinical Vignette.

Prizes — provided by event sponsor MAG Mutual Insurance Company — will be awarded to the top three students, residents and fellows (first authors) in both categories.

1st prize=$200 per student/resident/fellow author in both categories, for a total of six awards
2nd prize=$100 per student/resident/fellow author in both categories, for a total of six awards
3rd prize=$50 per student/resident/fellow author in both categories, for a total of six awards

RULES FOR SUBMISSION OF POSTERS:
Applicant must be a student enrolled in a North Carolina medical school or a resident/fellow in an accredited training program in the state of North Carolina. Poster may be original or previously published (regardless, all posters must adhere to the specifications listed below). Applicants are limited to one abstract submission. NO EXCEPTIONS.

Criteria for selection: Educational posters should present information of interest to physicians and their patients. An evaluation session will be held in the poster display area to provide an opportunity for discussion, Q&A, and judging. Presenters are required to participate in this designated interactive session in order to qualify for prizes. Further information regarding this session will be provided at a later date.

Poster specifications: Posters will be presented via freestanding fabric covered boards. Each poster must fit within a 48-inch tall and 48-inch wide space. NO EXCEPTIONS. The NCMS will provide the supplies necessary to affix posters to the boards.

Tentative Schedule:
Session Registration and Poster Set-up: Friday, October 24, 2014 10:00 am to 12:00 pm
Judging & Review: Friday, October 24, 2014 1:00 pm to 5:00 pm
Announcement of Winners: Friday, October 24, 2014 during Presidential Inauguration 7:00pm

Content and Ethical Considerations: Posters are intended to convey a scientific result and may not contain advertisements for commercial interests, products or services. Volunteer physician members of the NCMS will make final decisions about eligibility. The NCMS reserves the right to deny any application that, in the opinion of the reviewers, is deemed promotional, commercial or unethical. These regulations are designed to ensure that each poster accepted helps achieve the purpose of stimulating research and education throughout the health care community.

On-site Judging: Posters selected for presentation will be judged through an evaluation process that consists of the following criteria: significance; innovation; approach; poster design; and presentation. Cash prizes will be awarded for the top three posters in each category, Clinical Research and Clinical Vignette, for students, residents and fellows (see prize amounts above).

Note: In order to qualify for the cash prizes, first authors must be available to respond to questions during judging time. This time is tentatively scheduled for Friday, October 24 from 1:00-5:00 pm. Winners will be announced during an Awards Ceremony during the Presidential Inauguration on Friday evening beginning at 7:00 pm.

DEADLINE FOR POSTER APPLICATION FORM SUBMISSION – Monday, September 15, 2014.

Application Process:
1. Submit the following materials no later than Monday, September 15, 2014.
   a. Poster Application Form & Abstract (Abstract limited to one page single-spaced)
   b. Primary author’s current CV or biographical sketch
2. Application and supporting documents should be directed to Jennifer Soboleski via e-mail: jsoboleski@ncmedsoc.org.
POSTER APPLICATION FORM

TITLE OF POSTER: ____________________________________________________________

Check the appropriate categories:
☐ Clinical Research OR ☐ Clinical Vignette

PRIMARY AUTHOR: ____________________________________________________________
First Name MI Last Name Degree(s)

Primary Author is a ☐ Medical Student OR ☐ Resident OR ☐ Fellow in Training

INSTITUTION: _________________________________________________________________

MAILING ADDRESS: __________________________________________________________
____________________________________________________________________________

E-mail (required) Telephone Facsimile

ADDITIONAL AUTHOR(S) (Attach separate sheet for additional authors)
Name City & State NCMS Member Non-Member
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________

Attach an abstract that describes the poster and its educational purpose and design. See the next page for general guidance about abstracts.

All authors must agree to the following:
I agree that the material presented in this poster is original and is intended to convey a scientific result rather than any advertisement for commercial interests, products, or services.

Signature: _________________________________________________________________

INSTRUCTIONS TO AUTHORS
1. Deadline for receipt of Poster Application and Abstract is September 15, 2014
2. Send the following items:
   (1) Poster Application Form and Abstract
   (2) Primary author’s CV or biographical sketch

   TO: Jennifer Soboleski, NC Medical Society, 222 N. Person Street, Raleigh, NC, 27611
   Via e-mail: jsoboleski@ncmedsoc.org

3. Authors will be notified of the NCMS decision by e-mail no later than October 1, 2014
Suggested Format for Abstracts: Clinical Research

Purpose: Why was this study/research performed?
Methods: How has this problem been studied?
Results: Principal data and statistical analysis?
Discussion: What is the interpretation of the data?
Conclusion: What is the relevance to practice or future research?
References: Provide up to three references if applicable.

Suggested Format for Abstracts: Clinical Vignette

Introduction to explain the background of the case, including the disorder, usual presentation and progression and an explanation of the presentation if it is a new disease.

Case presentation which includes all relevant details concerning the case. Consider including the following: a description of the patient’s relevant demographic information (without adding any details that could lead to the identification of the patient); any relevant medical history of the patient; the patient’s symptoms and signs; any tests that were carried out; and a description of any treatment or intervention and outcome/follow-up if available.

Conclusion should state clearly what can be concluded from the case report, and give a clear explanation of the importance and relevance of the case. Is it an original case report of interest to a particular clinical specialty of medicine or will it have a broader clinical impact across medicine? Consider including information on how it will significantly advance care of patients through increasing knowledge with regard to a particular disease, etiology, promotion of health, quality of patient care, potential economic impact, or understanding of a pharmacologic mechanism.

General Reminders:
- Keep it brief and concise
  1. Preferably one page - approximately 250-300 words
- Large legible font
  1. Calibri works well - 11 or 12 point font size
  2. Space-and-a-half works well
- Use short sentences, correct tense throughout, active voice, varied structure
- Be consistent with display - same title (exactly), same key words, same results
- Avoid commercial logos and pharmaceutical trade names
- Edit carefully; advance review with an NCMS member is highly recommended
  1. Use correct scientific terms, correct abbreviations, correct units
  2. Spell check, grammar check, punctuation check
The intent of this disclosure is to allow North Carolina Medical Society the opportunity to resolve any potential conflicts of interest to assure balance, independence, objectivity and scientific rigor in all of the poster presentations at Annual Meeting. All faculty and planners of NCMS-sponsored activities are expected to disclose to NCMS any relevant financial relationships with any commercial interest that produces health care goods or services related to the content of the educational presentation in which they are involved.

**Conflict of interest.** Circumstances create a conflict of interest when an individual has an opportunity to affect CME content about products or services of a commercial interest with which she/he has a financial relationship.

**Commercial interest.** Any proprietary entity producing health care goods or services, with the exemption of non-profit or government organizations and non-health care related companies.

**Financial relationships.** Those relationships in which the individual benefits by receiving a salary, royalty, intellectual property rights, consulting fee, honoraria, ownership interest (e.g., stocks, stock options or other ownership interest, excluding diversified mutual funds), or other financial benefit. Financial benefits are usually associated with roles such as employment, management position, independent contractor (including contracted research), consulting, teaching, membership on advisory committees or review panels, board membership, and other activities for which remuneration is received or expected. Relevant financial relationships would include those within the past 12 months of the person involved in the activity and his/her spouse or partner. Relevant financial relationships of your spouse or partner are those of which you are aware at the time of this disclosure.

**PLEASE COMPLETE AND SIGN ON THE SIGNATURE LINE BELOW**

Name of Author: __________________________________________

Content of Poster: __________________________________________

Title of Poster: __________________________________________

Do you or your spouse presently (past 12 months) have relevant financial relationships with proprietary entities producing health care goods or services related to the content of this poster?

□ Yes  □ No

If yes, please identify the commercial interest/organization next to the best description of this relationship.

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<th>Financial Relationship</th>
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I agree that my recommendations involving clinical medicine in this poster will be based on evidence that is accepted within the profession of medicine as adequate justification for their indications and contraindications in the care of patients. All scientific research referred to, reported or used in support or justification of patient care recommendations will conform to the generally accepted standards of experimental design, data collection and analysis. I further agree to disclose when discussion of an unlabeled use of a product or an investigational use not yet approved occurs during the poster.

Signature of Author: __________________________________________ Date: ____________________