Call for Abstract Submission Form

**Type of Abstract:**

**Evidence-Based Practice**

**28th Annual Research,**

 **Evidence-Based Practice and Performance Improvement in Healthcare Conference**

**Wednesday, April 17, 2024**

**Deadline for Submission: December 4, 2023**

**Check List:**

[ ]  **I have read and understand the Abstract Submission Guidelines**

[ ]  **Completed all sections of this form.**

[ ]  **Text of abstract totals 300 or less words, not counting the headings and title.**

[ ]  **Saved this document with the first author’s last name first, followed by the title of the abstract.**

[ ]  **Email this form to Kelley Collazo at** **kacollazo@usi.edu** **by December 4, 2023, 11:59 p.m.**

[ ]  **“EBP Abstract” is in the subject line of your submission email.**

**Title of Abstract: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Name of Organization: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Check one for type of presentation requested:**

[ ]  **Oral Presentation**

[ ]  **Poster Presentation**

[ ]  **Oral or Poster Presentation**

**List all authors beginning with first author (correspondence will occur with first author listed):**

|  |  |  |  |
| --- | --- | --- | --- |
|  | Name | Credentials | Email address |
| First author |  |  |  |
| 2 |  |  |  |
| 3 |  |  |  |
| 4 |  |  |  |
| 5 |  |  |  |
| 6 |  |  |  |
| 7 |  |  |  |
| 8 |  |  |  |

**Receipt of submission will be emailed during regular business hours, 8 am to 4:30 pm, Monday – Friday. Please allow up to 72 hours for acknowledgement of receipt of your abstract. Notification of decision will be emailed in mid-January to the first author listed. Questions: Kelley Collazo at (812) 461-5217 or email** **kacollazo@usi.edu**

Abstract Number (for official use only):

**Insert abstract text in the following separate, labeled paragraphs.**

**Title of Abstract: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

***Background / Significance of the Problem:***

|  |
| --- |
|  |

***Clinical Question:***

|  |
| --- |
|  |

***Search of Literature/Best Evidence:***

|  |
| --- |
|  |

***Clinical Appraisal of Literature / Best Evidence:***

|  |
| --- |
|  |

***Integration into Practice:***

|  |
| --- |
|  |

***Evaluation of Evidenced-Based Practice:***

|  |
| --- |
|  |