



REVISED: Rules & Instructions for Submitting Abstracts

Submission Requirements

1. **Do not** submit case studies in abstract form.
2. Due to the many meeting cancellations and postponements in 2020, we will allow abstract submissions that were previously submitted to other conferences but have yet to be presented.

Note: If you wish to submit an abstract from a postponed meeting, the rescheduled date must not occur before NACFC 2020. In addition, for copyright reasons, you must also acknowledge where the abstract(s) were previously submitted at the end of the abstract.

3. Abstracts are accepted based on scientific merit and originality. For acceptance, abstracts must:
 - a. address an important question
 - b. present novel concepts, approaches, data or information
 - c. employ a study design that will permit the question to be answered
 - d. contain defined endpoints
 - e. describe methods in sufficient detail
 - f. contain sufficient data to support conclusions*
 - g. clinical studies must contain enough patients to be statistically valid and significant

*Placeholder abstracts are accepted but limited to **clinical trials**. Please see Placeholder Abstracts section on page 4 for details.

4. **Authors cannot split data to create several abstracts** from the same work. If splitting is judged to have occurred, acceptance of all abstracts may be jeopardized.
5. No more than **two** abstracts may be submitted by any first author.
6. Read “Guidelines for Categorizing Abstracts” to help you submit your abstract in the proper category. Authors are encouraged to carefully consider the category in which each abstract is to be submitted. Proper categorization will lead to referral to the appropriate review group. Improper categorization may limit the abstract’s chances of acceptance. The “Guidelines for Categorizing Abstracts” is available on the [NACFC website](#). The abstract review committee and CFF reserve the right to make the final determination of the category in which the abstract will be reviewed/accepted/presented. If you are not sure which category would be most appropriate, please contact us at nacfc@cff.org for assistance.

7. Only completed, **submitted** abstracts will be eligible for review. Abstracts remaining in the system as “drafts” will not be reviewed. If you return your abstract to draft status for editing, you must re-submit the abstract. Upon submission, you will receive an email as proof of submission; save this for your records.

Publication & Presentation

1. Submission of an abstract constitutes permission to publish the abstract. The electronic submission and review process is designed to ensure that no one other than authorized reviewers, the CF Foundation (CFF), and the publisher will have access to abstracts before the publication date. However, **once an abstract is submitted, absolute security cannot be guaranteed**. Therefore, an abstract should be considered “published” upon submission.
2. The author submitting the abstract (contact author) should be the abstract presenter if accepted (presenting author). CFF only sends notifications to the contact author.
3. Submitting an abstract for NACFC 2020 constitutes a commitment to present if accepted. Details on length and format of the presentations will be provided to individuals noted as the Contact Author (abstract submitter). If author is unable to present due to circumstances beyond their control, please contact us at nacfc@cff.org for further guidance.
4. All expenses associated with submission and presentation of the abstract are the presenter’s responsibility.
5. Requests for withdrawal of an abstract must be received by the CFF **in writing** at nacfc@cff.org before or by **August 31, 2020**.
6. **New this year:** Accepted abstracts will **only** be digitally published in Wiley Online Library as a supplement to *Pediatric Pulmonology*.
7. If accepted, the contact author will be required to certify, on behalf of all the abstract’s co-authors, that:
 - a. all authors are aware of and have agreed to have the abstract submitted and published;
 - b. all authors agree to transfer copyright of the abstract to John Wiley & Sons, Inc. (U.S. Federal Government authors: Since copyright cannot be transferred from government agencies, your abstract will be noted as public domain.); and
 - c. author(s) understands that, if selected for oral presentation, author could be audio/video recorded his/her image and presentation.

Format Instructions

1. Proofread your abstract carefully. If accepted, the abstract will be published exactly as it is submitted.
2. When creating an account, entering authors/ institutions, use initial caps followed by lowercase letters (i.e., John Smith, Children’s Hospital, 123 Main Street, City, State, Country).

3. There is a limit of **3,500** characters (including spaces, author names, and institutions) for your entire abstract submission. For space-saving measurements we suggest the following:
 - a. Do not double-space between sentences. Do not accidentally add spaces at the ends of paragraphs – these count against the character length.
 - b. Standard abbreviations for affiliations may be used, including Dept., Div., Univ., Inc.
 - c. Citations should be brief and included in parentheses in the text, e.g., (Kamin W, et al. J Cyst. Fibros. 2014; 5:205-15). Do not include article titles but do include enough information to properly direct the reader.
4. The system will allow you to submit one table **or** one graphic image.
 - a. Each row of the table, regardless of width, will automatically deduct an entire line (approx. 70 characters) from the total character count.
 - b. Each image will automatically deduct characters from the total space available for your abstract. Character count is determined by the image height. If you find that the image accounted for too many characters, you should reduce the height while keeping the width the same. Graphs, photos, and the like may be displayed on your poster.
5. Enter the entire title in uppercase letters.
6. Abstracts must be submitted in English.
7. Abstracts should not contain proprietary or confidential information.
8. If the drug has a generic version, the generic name(s) should be used for all drugs that qualify. If using brand names, they need to be company agnostic, not promotional, and consistent throughout your abstract(s) and presenting materials (poster, eposter, PowerPoint slides, etc.).
9. Genus/species names should be italicized, as well as genes, loci, and alleles; and parts of chemical names as appropriate (including *cis*, *trans*, *ortho*, and *para*).
10. Commonly used Latin terms (*in vivo*, *in vitro*) should **not** be italicized.
11. Avoid starting a sentence with a numeral. E.g., instead of “52 subjects completed the survey,” instead use, “The survey was completed by 52 subjects.”
12. Section headings (**Introduction**, **Methods**, etc.) must be in bold.
13. If abbreviations are used, spell out the term in full upon its first use and follow it with the abbreviation in parentheses. Standard abbreviations may be used without definition, e.g., CFTR, NIH, FEV₁.
14. Do **not** include the title and/or authors/institutions in the body of your abstract.
15. Place acknowledgements at the end of the abstract, e.g., Supported by _____.

Placeholder Abstracts

1. Clinical investigators may submit a placeholder abstract describing a very important clinical trial for which results are not available before the abstract submission deadline (but will be available before the conference).
2. Such abstracts should include:
 - a. background and purpose of the study;
 - b. study design;
 - c. patient selection criteria;
 - d. primary and secondary endpoints; and
 - e. any interim results.
3. **Be sure to include information about when the data will be available.** When submitting a placeholder abstract, authors must include when the last patient and the last visit will be finished for the study. If the final data will not be available before the conference, the reviewers will not accept the abstract.
4. Authors who submit a placeholder abstract will have an opportunity to update the submission, only if accepted. **IMPORTANT:** Authors will be notified on the editing period and will be granted “late” access to the abstract website to enter updates.
5. These abstracts will undergo the standard review.