Instructions for Preparation and Submission of All Abstracts for EATA Poster Presentations & Free Communications:

Please read all instructions before preparing and submitting your abstract. Individuals may submit only one abstract as the primary (presenting) author but may submit unlimited abstracts as a secondary author. All abstracts will undergo a blind review. All presentations must be of original work (not previously presented). This restriction includes any electronic/internet postings. Exceptions to this restriction are limited to state and district meetings of athletic training organizations, and the NATA Athletic Training Educators' Conference. If accepted, posters should not exceed 4' x 6' in size.

All abstracts will be submitted via Google Forms. Any forms not completed fully will be automatically rejected. It is highly recommended that authors complete their abstracts in Word to ensure proper word count, because authors will have to report this count and not exceed the maximum threshold. Sections I – III of this document provide additional detail regarding category submissions. Please refer to the annual *"Call For Abstracts"*, posted on the EATA website, for the appropriate links based upon submission category. You will receive an email confirmation of your submission.

There are separate submissions for students and professionals. Students who are submitting work from their ***professional-level program*** (either bachelor or master) need to use the links under the ***STUDENT Submission*** section in *the "Call For Abstracts".*

Students enrolled in a ***post-professional graduate program*** (master or doctoral) will use the links under the ***PROFESSIONAL Submission*** section in the *"Call For Abstracts".* All ***professional Certified Athletic Trainers*** will submit under the ***PROFESSIONAL Submission*** category.

Additional Requirements for Student Submissions:

1. Faculty mentor's name and email address must be provided.
2. Faculty mentors will be contacted to verify if they have reviewed and approved the abstract.
3. Failure for the faculty mentor to review & approve the abstract will result in an automatic rejection.
4. Emails will be sent to faculty mentors shortly after the deadline for submission.

ALL Abstracts will fall into one of the following categories: Experimental Design, Case Reports, Critically Appraised Topics (CAT).

I. Experimental Design

Studies which are Basic Research, Qualitative, or Survey research will format their abstract with the following headings.

Context: Write a sentence or two summarizing the rationale for the study, providing a reason for the study question. **Methods:** Describe the overall study design of the project reported. Describe the environment in which the study was conducted to help readers understand the transferability of the findings. Describe the underlying target population, selection procedures (e.g., population-based sample, volunteer sample or convenience sample) and important aspects of the final subject pool (e.g., number, average age, weight, height and measures of variance, years of experience or gender). Identify the interventions in the study. Describe the essential pieces of the study's methods, measurements and instrumentation utilized, data analysis procedures and statistical tests employed. Provide validity and reliability information on novel instrumentation. Clearly identify primary or critical dependent variables that support the primary objective(s) of the study. **Results:** The main results of the study should be given. Comparative reports must* include descriptive data (e.g., proportions, means, rates, odds ratios or correlations), accompanying measures of dispersion (e.g., ranges, standard deviations or confidence intervals) and inferential statistical data if applicable. **Conclusions:** Summarize or emphasize the new and important findings of the study and, if possible, relate implications of the findings for clinical practice. The statement of your findings must be consistent with the results as reported and should be no more than three sentences. **Clinical Implications:** Provide an overall summary of the most important clinical component(s) that can be gleaned from this study. This section should identify how the professional can implement these findings into clinical practice. **Word Count:** Limited to 450 words.

II. Case Reports

There are 4 evidence levels for Clinical CASE Reports based upon the evidence generated and the case design. For EATA, only levels 1-3 (described below) will be considered. Levels 1-3 more broadly contribute to clinical practice. Level 4 CASE Reports, which are used to describe rare events, will not be considered. Authors will have to identify which level their CASE Report falls within. For a more in-depth presentation of the Clinical Case Reports, see Clinical Contributions to the Available Sources of Evidence (CASE) Reports: https://www.natafoundation.org/wp content/uploads/2022-Peer-Review-Track-Instructions-Final-002.pdf

1. Level 1: The purpose of a Level 1 CASE is to test or validate the results of previously published research
2. Level 2: The purpose of a Level 2 CASE is to report on several unique cases with a similar defining feature that links the cases together.
3. Level 3: The purpose of a Level 3 CASE is to report on a unique case.

All CASE Reports will follow the below formatting:

Background: Provide an overview of the condition of interest using available evidence, where appropriate. Indicate the level of the clinical CASE Study. For a Type 1 validation CASE study, the authors should provide a clear description of the previously reported comparison study and highlight the most important findings. For Type 2 & 3 exploration case studies/series, introduce the alternate, unique, or irregular presentation of the case examined compared to the available evidence.

Patient: Present the clinical case(s), including primary patient characteristics (age, sex, sport if appropriate, sport or activity, and years of experience) and diagnosis. For a case series, describe the underlying target population with measures of means and variance and important aspects of the subject pool. Pertinent aspects of medical history should be included. Describe their complaints, MOI, initial clinical examination, diagnostic imaging, lab tests, and their commonality (examples: characteristic, injury, postural/gait abnormality, pathology, MOI). Describe the process that led to the diagnosis of the condition.

Intervention or Treatment: Describe the management of the case, interventions used, the timeline for progression to final resolution in the case, and the specific time points when treatment was provided. Relevant and unique details should be included. For type 2 or 3 case studies/series, compare and contrast the interventions used with the typical presentation of the condition as described in the literature.

Outcomes or other Comparisons: Describe the primary outcomes or results of the case. For type 1 CASE studies, compare and contrast the outcome from the current case to the outcome of the previously reported comparison study. Compare/contrast the outcomes used in the type 2 or Level 3 Exploration CASE Studies / CASE Series with the typical presentation of the condition as previously described. For Case Series, report whether all patients responded similarly to each other. For this, it is important to ensure that similar outcome measures were used.

Conclusions: Interpret the findings of the study. For type 1 CASE studies, discuss the current case in the context with the previously reported comparison study, including the similarities and differences in the patient and outcomes. Discuss challenges associated with implementing the intervention from the comparison study "in real life" and provide recommendations for continued use of the assessment or intervention. For type 2 & 3 case studies/series, discuss the challenges associated with the case due to the atypical presentation, and provide recommendations for clinical practice.

Clinical Bottom Line: Provide an overall statement of the most important clinical points that can be gleaned from the current CASE study. Relate implications of the case for clinical practice – provide a clinical take-home message/bottom line/recommendation that aligns with the objective(s). The clinical take-home message may address one or more of the following aspects of patient care: 1) financial implications, 2) equipment needs, 3) practicality of implementation, or 4) applicability of findings to various patient populations.

Word count: Limited to 600 words, not including headings.

III. Critically Appraised Topic (CAT)

1. Critically Appraised Topics are brief systematic reviews of the most current and best available evidence to answer a focused clinical question related to the recognition, rehabilitation, and prevention of sport-related injuries. While large-scale systematic reviews and meta-analyses involve an exhaustive search of the literature, CATs involve similar elements but on a smaller scale (typically 3-8 sources of peer- reviewed evidence).

2. CATs will follow the below formatting:
   Context: Write a sentence or two summarizing the rationale for the study, providing a reason for the study question. **Objective:** This is your Focused Clinical question. Typically, the PICO (Patient or Population of interest, Intervention, Comparison or Control group, Outcome of interest) format is used to develop the clinical question. **Data Sources**: Identify how relevant research papers were identified – search strategy (electronic databases, hand search, etc), databases, timeframe of search, key words, and search limits. **Study Selection**: Describe the criteria for selection - the processes through which studies were selected for inclusion for further analysis. **Data Extraction**: Describe the specific outcomes that were to be gathered from the included studies. **Data Synthesis**: For all outcomes considered, present a summary of data for each comparison, group differences, intervention, etc. For these results point estimates and measures of variability should be presented (for example, effect sizes and confidence intervals). **Conclusions**: Summarize the main findings of the study. Emphasize the "answer" to the clinical question. Interpret these findings within the context of the strengths / weaknesses / biases based on the evidence appraisal. **Clinical Implications:** Provide an overall summary of the most important clinical component(s) that can be gleaned from this study. This section should identify how the professional can implement these findings into clinical practice. **Word Count**: Limited to 600 words.