PODIUMS & POSTERS 2014

October 22, 2014

CALL FOR ABSTRACTS

Save the date for October 21, 2014

Research Role Development Workshops!

Sponsored by: The UCSF Center for Nursing Research & Innovation and STTI Region 1 and STTI Bay Area Chapters

- El Camino Hospital
- Hill-Rom
- John Muir Medical Centers – Concord and Walnut Creek
- Kaiser Permanente Central Valley
- Kaiser Permanente –Northern California
- Laguna Honda Hospital
- Lucile Salter Packard Children’s Hospital
- Mills Peninsula Health Services
- Oregon Health & Science University Healthcare
- Portland Veterans Affairs Medical Center
- Samuel Merritt University School of Nursing
- Santa Clara Valley Medical Center
- San Francisco General Hospital
- San Francisco State University, School of Nursing
- San Jose State University, School of Nursing
- Sigma Theta Tau
- Stanford Hospital and Clinics
- Travis Air Force Base Hospital
- UCSF Medical Center and Children’s Hospital
- UCSF School of Nursing
- VA Medical Center, San Francisco
- VA Northern California Health Care System
- VA Palo Alto Health Care System
WE WANT TO HEAR FROM YOU!

Please send us an abstract if you have completed one of the following in care across the continuum (acute, post-acute, community):

- Clinical Research Study (with special emphasis on nurse-sensitive outcome measures)
- Evidence Based Practice Project
- Quality or Performance Improvement Project
- Systematic Review

STUDENT SECTION

- Literature Reviews
- Research Studies
- Capstone Project

Mark your calendar!
Your Abstract must be received before 9 am July 21, 2014

Send your abstract electronically to:

Lily Ann Mendoza at lilyann.mendoza@nursing.ucsf.edu
GUIDELINES FOR ABSTRACTS

Research Abstracts
If you are submitting a research abstract, the work must be completed so that results can be reported. You must be sure to include:

1. Purpose, aims, hypotheses or research questions
2. Background and significance
3. Methods (design, sample characteristics, measures or instruments, procedures for data collection and data analysis)
4. Data findings, results and conclusions
5. Implications for practice and further study

Clinical Project Abstracts
If you are submitting an Evidence Based Practice Project Quality or Performance Improvement Project abstract, the work must be completed so that results can be reported.

1. Purpose and/or objectives of the project
2. Background and significance
3. Description of Improvement steps, methods or procedure
4. Evidence of results or outcomes of the project and how you measured the results—we want to see your data!
5. Conclusions and evidence of impacts of the project on patient care quality, costs or outcomes.

Abstract Format – Incomplete or inaccurate submittals will not be reviewed

- Abstract Title (15 words max- no identifiers)
- Abstract should be 500 words maximum (excluding title)
- Microsoft Word format – submit electronically please.
- Use 12 point font, single-spaced, with 1 inch margins.

At no time should any facility identifier be included in the abstract

- NO graphs, tables or references please. (may be added to final abstract).
- Abstract Submission form (or other page separate from the Abstract Page) must list all authors’ names and include:
  - The presenter’s name with an asterisk
  - Full corresponding author contact information.
- Select Option of Oral Presentation or Poster Presentation
- Podium presentations require completed work & must include any relevant data. Posters include pilot projects or projects still in progress or completed. Topics may relate to conducting research as well as implementing its results.
Please Note--Due to limits of program presentation time & poster presentation space, not every abstract may be accepted for presentation. Following a review of all abstracts, you will be notified by August 19, 2014.

Title of Abstract (15 words max):

Presenter (include credentials):

Other Authors:

Employer:

Employer address:

☐ Site Coordinator Review

By checking the box to left I attest, my Site Coordinator has reviewed this abstract prior to submission. Site Coordinators and listed at the end of this document.

CONTACT AUTHOR OR PROJECT REPRESENTATIVE

Name:

Address:

Email:

Work Phone:

Home Phone:

Other Phone:

Type of Abstract

☐ Quality or Performance Improvement

☐ Evidence Based Practice

☐ Systematic Review

☐ Other:

Student Category:

☐ Literature Review

☐ Research Study

☐ Capstone Project

Preferred method of presentation:

☐ Oral

☐ Poster

☐ No Preference

Please ask your Site Coordinator to review your abstract before you submit.
Send your abstract electronically by 9 AM July 21, 2014 to: Lily Ann Mendoza at lilyann.mendoza@nursing.ucsf.edu
# Research Day 2014 Coordinators

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