



# NATIONAL PHARMACEUTICAL ASSOCIATION

## CALL FOR ABSTRACTS

### Select One

- Regions 1 & 2 Meeting
- Regions 3, 4, & 5 Meeting
- National Convention

The National Pharmaceutical Association (NPhA) invites authors to submit abstracts for poster presentations. Abstracts will be peer evaluated for content quality, topic applicability, and appropriateness to overall Association priorities. The final decision on acceptance and presentation format for individual submissions remains the prerogative of the Program Committee.

1. All presenters must register as fee-paying attendees.
2. All abstracts must be submitted in accordance with the following guidelines.
3. Authors may submit more than one abstract.
4. All presenters are eligible to receive the Poster Presentation Award/Recognition within your category.

### **ALL ABSTRACTS MUST ADHERE TO THE FOLLOWING GUIDELINES:**

- Each abstract must be submitted on a separate NPhA Abstract Form (please see example abstract for formatting information).
- Each abstract must include the authors' name and institutional affiliation.
- Choose only one form of submission for the abstract
  - Via electronic means (e-mail)
- INCLUDE **ALL** of the following items with the abstract form:
  - E-mail address (so you can be informed that your abstract was received);
  - A completed, signed financial disclosure form (an e-signature is sufficient).
- All necessary documentation and forms must be sent together in one packet.
- Accepted abstracts may be published in the final program.

Please **submit** complete packages **via e-mail** to be **received** no later than **1 month prior to event** to [Darrell.L.Bryant@rxcis.com](mailto:Darrell.L.Bryant@rxcis.com) (subject heading: NPhA abstract submission)

Any **questions** regarding the abstract submission process should be directed to Dr. Darrell Bryant via email [Darrell.L.Bryant@rxcis.com](mailto:Darrell.L.Bryant@rxcis.com) : (subject heading: NPhA abstract questions) or phone at (888) 588-3330.

### **DO NOT SUBMIT ABSTRACTS BY FAX**

The **National Pharmaceutical Association** is dedicated to representing the views and ideals of minority pharmacists on critical issues affecting health care and pharmacy, as well as advancing the standards of pharmaceutical care among all practitioners.

### **Detailed Instructions for Completing the Abstract Box:**

Type or print the abstract in 10-point font or larger. Make sure that the title is in all UPPERCASE LETTERS and in **bold print**. All authors' names should be listed in order of their contribution to this particular presentation or work. **Only** the presenting person's name should be underlined. The primary institutional affiliation of each author, as it relates to this work, should be listed as presented in the example abstract below.

The abstract should describe what will be presented. It should provide as much information as possible so that the reviewers can make an informed decision regarding the quality and applicability of the material.

The Financial Disclosure Box and Form should be completed, as it relates to this specific presentation only. Consider the following illustration from the example abstract below:

- a) We are presenting on the role of **pharmacological therapy** in **smoking cessation** programs;
- b) The U.S. National Cancer Institute has sponsored some of these activities; and
- c) We are discussing a product manufactured by a pharmaceutical company, from which a grant had also been received for an unrelated activity

Given a, b, and c, we would need to disclose the information shown in the Financial Disclosure Box\* below.

Proper financial disclosure enables the audience to determine if there is a potential for bias in the presentation due to your fiduciary relationships with sponsoring institutions.

### **EXAMPLE ABSTRACT**

#### **SMOKING TREATMENT:**

#### **THE ROLE OF NON-NICOTINE REPLACEMENT THERAPY**

Barry Bleidt<sup>1</sup>, PhD, PharmD; Sallie Anne Petrucci<sup>2</sup>, BA; Brittany Bleidt<sup>3</sup>

<sup>1</sup>Texas A&M University College of Pharmacy; <sup>2</sup>The Robert Wood Johnson Foundation;

<sup>3</sup>Health Resources™ Consulting

Nicotine is a potent psychoactive drug and the amount absorbed through the use of cigarettes, chewing tobacco, or snuff is responsible for the effects the user experiences. Nicotine is readily absorbed from the lungs during smoking, in the mouth from chewing tobacco, and in the nasal passage from the use of snuff. In a matter of seconds, it enters the blood stream and enters the brain. Within seconds of absorption, nicotine is activating the brain reward systems.

In order to break the cycle of smoking and the addiction to nicotine, there are several methods available to assist smokers in quitting. The role of non-nicotine replacement therapy is a relatively new and effective method of working with smokers – especially heavy smokers. We will present data from two research projects. These studies were double-blind, placebo controlled clinical trials. The results demonstrated the efficacy of non-nicotine replacement therapy. We will discuss concurrent nicotine replacement therapy and other adjunct methods that increase the likelihood of success.

**Note:** For presentation projects that do not report data, please give a full description of the activity and its implications and results. For studies as above, please include design, results, and discussion.

**FINANCIAL DISCLOSURE BOX\*:** GlaxoSmithKline - unrestricted educational grant  
U.S. National Cancer Institute grantee

**You will be notified of your acceptance status by e-mail.**



# National Pharmaceutical Association

## PRESENTER INFORMATION

Name and Degree(s): \_\_\_\_\_

Title: \_\_\_\_\_

Organization: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Postal Code: \_\_\_\_\_

E-mail: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Please submit the abstract typed or printed to ensure an accurate listing in Program and Index. See an example of a completed abstract form on page 2 of this Call for Abstracts.

## ABSTRACT FORM

FINANCIAL DISCLOSURE BOX\*:

\* (See next page)

Please type your abstract in 10 point or larger font, single-spaced. **TITLE OF PRESENTATION IN UPPERCASE LETTERS.** Presenting author's name should be underlined. Be sure to complete the Financial Disclosure Box\*.

**Please check one:**

Bridging The Gap Program  SNPhA Chapter/Regional Project  NPhA Chapter/Zone Project

Pharmacy Practice/Clinical  Lab Research Presentation  Special presentations

## FINANCIAL DISCLOSURE POLICY

The National Pharmaceutical Association is required to disclose to our attendees any significant financial interest or arrangement with any organization or institution whose products or services are being discussed in a session. Financial interest or relationship can include: contracts, grants; employment; consultant fees; ownership or partnership; stock or bond holdings; and other remuneration (for example, honoraria and travel expenses).

Having a significant financial interest does NOT prevent an individual from presenting at a session nor does it prevent us from accrediting the activity for continuing education credits. However, the existence of the relationship must be known to the audience prior to the session, so that the audience may form their own judgments about the presentation.

Any such financial interest or arrangement will be disclosed to our Annual Meeting participants in the Conference Program or through other appropriate means.

## FINANCIAL DISCLOSURE STATEMENT

I have read the National Pharmaceutical Association's policy on full disclosure and I declare that:

- I **do not** have any significant financial interest, arrangement, or affiliation with any organization or institution whose products or services are being discussed in this session.
- I **have** a significant financial interest, arrangement, or affiliation with an organization or institution whose products or services are being discussed in this session. I understand that I must disclose this information to the participants who attend my session. ⇒ ⇒ **Please complete the next two steps:**
1. Below list the financial interest, arrangements or affiliations as well as the nature of the relationship with each institution, such as contracts, grants, employment, consultant fees, ownership or partnership, stock or bond holdings, and other remuneration (e.g., honoraria and travel expenses).
  2. On the Abstract Submission Form within the abstract box, you **must** fill in the Financial Disclosure Box\* with the name of the Organization/Institution whose products or services are being discussed.

\_\_\_\_\_  
Name of presenter (*please print or type*)

\_\_\_\_\_  
Signature of presenter

\_\_\_\_\_  
Date

ORGANIZATION / INSTITUTION	RELATIONSHIP (grants, employment, etc.)

The financial disclosure statement must be filled out completely and signed before any abstract will be reviewed. Incomplete or illegible forms will be returned and not accepted. You may create your own form if it includes all the required information.

**DEADLINE: 1 MONTH PRIOR TO EVENT**