

Sample Abstract

Contact Information

1. Name: **Melissa E. Chaulk**
2. Email Address: **test@cdha.ca**
3. Phone Number: **(555) 555-5555**
4. Please indicate the abstract type (Refer to [Abstract Guidelines](#) and [Abstract Submission Tips](#))
 - **Original Research**
 - New Community Project/Program
 - Systematic Review

Abstract

5. Title of Abstract: **Commonly Encountered Errors in Abstract Submissions**

Please provide your abstract by completing the following fields¹:

Original Research <ul style="list-style-type: none"> • Objective(s) • Methods • Results • Conclusions 	New Community Project <ul style="list-style-type: none"> ○ Background/Goal(s) ○ Objective(s) ○ Approach ○ Evaluation 	Systematic Review <ul style="list-style-type: none"> ○ Objective(s) ○ Methods ○ Results ○ Conclusion
--	---	---

6. Abstract – Original Research

Objective:

The objective of this study was to assess the types of errors encountered by dental hygiene reviewers who evaluated submitted abstracts for a national dental hygiene research conference.

Method:

This single-blind study utilized a convenience sample of 20 reviewers who were selected to complete a survey about commonly encountered errors on abstract review forms while evaluating abstracts submitted to a national dental hygiene research conference. The reviewers evaluated 80 submitted abstracts prior to completing the survey. The instrument used in the study contained 30 items with closed-ended responses, which was previously pilot-tested with 5 other reviewers to establish content validity. Survey information was obtained through the use of an electronic online tool, and all responses remained confidential. Descriptive statistics were used to analyse the data. IRB approval was obtained from the USC School of Dentistry.

¹For the purposes of this sample abstract, *Original Research* was selected. However, when you are completing the online form, you will select the applicable category and complete the corresponding fields.

Sample Abstract

Results:

Failure to include all of the required elements was the most commonly reported error in submitted abstracts to a national dental hygiene research conference (35%). Other errors included typographical errors (23%), lack of information about statistical methods (20%), spacing errors (7%), and failure to include affiliation (3%).

Conclusions:

It is essential for prospective presenters to follow published recommendations to ensure that their abstracts conform to conference guidelines.

7. Funding for this project was provided by: **The National Center for Dental Hygiene Research and Practice.**

8. Presentation Type*:

**There are limited spots available for oral presentations*

- Oral presentation
- Oral presentation as first choice, but would consider a poster presentation**
- Poster presentation

9. This Research is*:

**Abstracts in progress may be accepted provisionally; final data must be submitted no later than June 30, 2017.*

- Complete**
- In progress

Primary Presenter Information

10. Name: **Melissa E. Chaulk**

11. Credentials: **BSc, RDH**

12. Affiliation: **University of Dental Hygiene**

13. Address 1: **123 Main Street**

14. Address 2: **Room 4338**

15. City: **Ottawa**

16. Province: **Ontario**

17. Postal Code: **K1K 1K1**

18. Country: **Canada**

19. Email Address: **mchaulk@cdha.ca**

20. Phone Number: **(555) 555-5555**

21. Are you a Student?

- Yes
- No**

Sample Abstract

22. Will there be a Secondary Presenter?

- Yes
- No**

23. Please indicate all authors, including presenters, in the order they should appear:

Author 1 (First Name, Middle Initial, Last Name, Credentials, Affiliation and Country):

Melissa E. Chaulk, BSc, RDH, University of Dental Hygiene, Canada

Author 2 (First Name, Middle Initial, Last Name, Credentials, Affiliation and Country):

Melanie Martin RDH, MA, University of Dental Hygiene, Canada

Additional Authors (please list in same format as others):

N/A

24. Has your abstract been previously presented or published?

- Yes
- No**

Terms & Conditions

25. I understand that the submission of this abstract constitutes a commitment from the identified presenter to be in attendance at the conference should the abstract be accepted. I understand that any expenses incurred during the submission of the abstract and/or attendance at the conference are the responsibility of the authors/presenters.

- Yes**

26. By submitting this abstract and should it be accepted, I agree to have it published in the Conference Proceedings.

- Yes**

27. I have read and understood the terms outlined in the Abstract Guidelines form, and confirm that all the information I have entered is accurate.

- Yes**