Guidelines for Submission of Abstracts for Asian Pacific Congress on Bronchology and Interventional Pulmonology 2019

All abstracts must be submitted by 1800 AEST 12 October 2018

These guidelines are provided to assist members in preparing abstracts for presentation at the Asian Pacific Congress on Bronchology and Interventional Pulmonology. Compliance with these guidelines will expedite the process of scientific evaluation, program arrangements and online publication of abstracts.

- The Congress welcomes the submission of abstracts on any aspect related to Bronchology and Interventional Pulmonology.
- Abstracts which are being or have been presented at international scientific meetings where abstracts are published (e.g. ATS, ERS) may be submitted to the Congress.

Abstracts will not be accepted for presentation at the Congress if they:

- contain data which have been previously published in the context of commercial development.
- report research work which has been carried out with financial support from the Australian Tobacco Research Foundation or any research on behalf of the tobacco industry.
- contain data which have previously been published in a full paper prior to abstract submission.
- are not accompanied by a Declaration of Interest.

Please note that discretion should be taken in the presentation of data that might be considered commercially sensitive.

A good abstract is difficult to write. It comprises a brief summary of a large amount of work and requires a depth of understanding, perspective and focus. Junior researchers particularly should be prepared for the need to write several drafts before reaching a final, acceptable version and are encouraged to seek help from more experienced abstract writers and colleagues.

Instructions to Authors

Failure to adhere to these instructions will result in rejection of the abstract.

a) Title
The title should be in sentence case, brief and as precise as possible. It should be relevant to the key original point of information contributed by the study and should preferably be descriptive, e.g. “Caffeine primes neutrophil oxidative function”, rather than ambiguous, eg. “The effects of caffeine on neutrophil function”.

b) Authors
Follow on from the title in upper/lower case with the presenting author listed first.

c) Address(es)
Address(es) for the authors should be listed in the following order: Department, Institution, State and Country. The entire address section should be in italics. Where the abstract includes authors from different departments, place the presenting author’s department first, followed by other departments, using superscript numerals to link all authors with departments.

d) Text
In general “structured” abstracts convey information more economically and succinctly. If using abbreviations, give the full term, with the abbreviation in parentheses. Universally recognised abbreviations (e.g. FEV1, see Approved Abbreviations below) need no explanation. Do not use non-standard abbreviations in the title of the abstract.
Abbreviations for microorganisms should follow standard scientific notation, i.e. the first letter of the genus in capitals followed by the species name in lower case (e.g. P. aeruginosa). By convention, the entire abbreviation is printed in italics or underlined.

e) Introduction/Aim
The first sentences should state explicitly the background, rationale, aims, goal or purpose of the study.

f) Methods
A concise description of the methods should follow. The details of this depend on the originality of the technique or approach used. Abstracts without methodological details are regarded as deficient.

g) Results
Results should be provided in a quantitative manner in adequate detail. In some cases a small table(s) may be a useful means of presentation (maximum of two per abstract without title or legend), however the abstract, including tables, must comply with the specified formatting requirements. Statements such as “The results will be discussed” are not acceptable.

h) Statistics
Use the following format: x±y (state whether SEM or SD); n=z, p=q; e.g. 60±6 (SEM); n=10, p<0.05.

i) Conclusions
The Conclusions should be clearly stated and must be referable to the results provided.

j) Grant Support
Any funding should be briefly acknowledged at the bottom of the abstract.

k) Declaration of Interest Statement
All abstracts must be accompanied by a Declaration of Interest. No abstracts will be accepted without this declaration.

l) References
References are generally unnecessary, but if required should be limited to a maximum of 3, numbered in the text and listed immediately below the text (within the specified area) in the following sequence: Authors, Journal, Year, Volume, First and Last pages, e.g. I Cerveri et al, Chest, 2004, 125, 1714-1718.

m) Word Count
The abstract body text (excluding headings, title and author information) should be limited to 300 words.

n) Approved Abbreviations
FEV$_1$ – one second forced expiratory volume
FVC – forced vital capacity
TLC – total lung capacity
FRC – functional residual capacity
PD$_{20}$ – provocative dose for 20% fall
PC$_{20}$ – provocative concentration for 20% fall
PaO$_2$, PaCO$_2$ – arterial partial pressure of oxygen, carbon dioxide

Units of measure should conform to current scientific usage and can be abbreviated when they follow a number (e.g. cm, ml, g, mg, nmol, °C). Unusual units should be defined in full.
Abstract submission

Your abstract(s) must be submitted online with additional details on the submission form on the APCB Congress website –

http://www.apcb2019.com/abstracts/

Accepted abstracts will be published on the Congress website.