

Call for Abstracts Form

Quality ManagementResearch and Scholarship

Food and Nutrition Conference & Expo®

Site opens January 1 - February 16; late-breaking May 1 - 31

Site opens Junuary 1 - February 10, late-breaking may 1 - 31							
New Abstract							
Abstra	Abstract Title* (30 words maximum)						
Abstra	act Type* (Refer to the <u>Posters Sessions webpage</u> for more information about abstract type)						
	Research						
	Project or Program Future Practice						
Lear	ning Objective*						
Provide	e a learning objective that is clear, measurable and achievable.						
action	ete the sentence, 'Upon completion of reviewing the abstract content, attendees will be able to' Use words to begin this learning objective, such as list, describe, define, demonstrate, conduct, etc. (30 maximum)						
<u>Abst</u>	<u>ract</u>						
Topic	* (Choose up to two)						
	Business, Industry and Product Development and Marketing						
	Clinical Care						
	Communications Community, Population and Global Health						
П	Critical Thinking and Decision Making						
	Education and Counseling						
	Ethics and Professionalism						
	Food, Nutrition and Dietetics and Physical Activity						
	Foodservice Systems Management						
	Informatics						
	Leadership and Advocacy						
	Organization Management						



Α	bstract*	' (Maximum 250 words.	Suaaested re	esearch abstract fo	ormat: Backarou	nd, Methods, I	Results, Cor	nclusion

Funding Source

List if corporate, private, grant, etc. Be specific.

Abstract Authors

Presenting Author*

If accepted, the presenting author will receive all future communications regarding next steps.

First Name

Last Name

Credentials

Position

Employer/University

Phone

Email Address*

Tip! Consider adding a personal email address in case of changes to employment or school.

Co-Author(s)*

If accepted, the presenting author will receive all future communications regarding next steps.

First Name

Last Name

Credentials

Position

Employer/University

Phone

Email Address



Additional Details

This section will appear if "Future Practice" was selected as "Abstract Type" when creating a new abstract.

1.	What future trend or driver of change is the focus of your abstract and what is
yoı	ur justification for selecting this as a topic of future trend/change driver?*

2. What is the potential of the new idea, method, or tool described to advance future practice, education, and/or research in responding to the change driver or future trend? Please include the scalability, adaptability, and transferability to other settings?*

3. How do you think this information will affect future practice?*

Disclosures

Each author is required to submit a Conflict-of-Interest Disclosure. Each author can enter the portal to fill out this section.

You can access each author's form by clicking on their name.

In addition, the envelope icon next to each name will create an automatic email to that speaker inviting them to complete the form.



1. In the past 24 months, have you (or an immediate family member) had a financial relationship with a commercial organization that produces, markets, re-sells or distributes health care goods or services consumed by, or used on, patients? If so, click the 'Add a financial relationship' link below.

I (or my spouse/partner) do not have any potential conflicts of interest to disclose. I (or my spouse/partner) do have potential conflicts of interest to disclose.

2.	Financial Relationships (add a financial relationship if applicable) Company Name
	Individual(s) Involved Self Spouse/Partner Both myself and my spouse/partner
Туре	of Financial Relationship (check all that apply) Grant/Research Support Consultant Stock Shareholder (excluding mutual funds) Honorarium Other Financial or Material Support Other Research Support Advisory Board
	tus of Financial Relationship: <i>ongoing or terminated</i> te Financial Relationship Ended:
3.	Presentation Bias If you reported relationship(s) above with a commercial organization that produces health care products or services. Does the educational content (over which you have control) involve the products or services of the commercial organization? * Yes No N/A
4.	Attestation I certify that the information I have provided is complete to the best of my knowledge and I accept responsibility for the accuracy of the information in response to the aforementioned questions. Sign Name
	By signing this box with my electronic signature, I attest that all information above is true and

correct. *



Scientific Integrity Principles

Professional education, including Date Financial Relationship Ended: posters presented at FNCE®, are considered scientific activities by the Academy of Nutrition and Dietetics and are therefore expected

to adhere to the Academy's Scientific Integrity Principles, which include: Ethical conduct of research and protection of human subjects Funders' influence on research question/methodology/education content and conflicts of interest Review of research-related materials Maintain and promote a culture of scientific integrity □ I attest that the project/research described in this abstract and any resulting poster presentation (if accepted) adheres to the Academy's Scientific Integrity Principles. Please indicate your agreement by typing in your full name above.

Upon completion of your abstract submission, select "Save" and then "Submit" when ready.