



Florida Society of Interventional Pain Physicians  
Florida Society Physical Medicine & Rehabilitation  
July 29-31, 2022  
JW Marriott Hotel  
Tampa, Florida

## **CALL FOR ABSTRACTS**

**Submission Deadline: June 15, 2022**

The Planning Committee for the Florida Society of Interventional Pain Physicians Annual Meeting invites you to submit abstracts for papers to be presented at the upcoming conference at The JW Marriott Tampa Water Street, Tampa, Florida. Abstracts should describe original research in the field of pain management, and physiatrics. We welcome residents and fellows to submit abstracts as well.

### **General Information:**

The Florida Society of Interventional Pain Physicians together with the Florida Society Physical Medicine and Rehabilitation has reserved time on the program for scientific poster sessions. ePosters will be available for viewing throughout the entirety of the conference. You are welcome and encouraged to bring handouts.

Paper abstracts previously presented or published may not be submitted without modifications, Original work must be changed or expanded, resulting in a new abstract.

The Planning Committee will retain the copyright of the published abstracts. Awards will be presented to the top poster presenters.

### **Submission Information:**

Please use the recommended abstract format:

Introduction/Statement of the Problem, Materials and Methods, Results, and Conclusions. The text of your abstract may be up to 300 words.

- In 300 words or less, provide an accurate, succinct, and informative representation of the content that will be presented in the paper.
- Do not use abbreviations. Type in sentence case. Do not type in all caps.
- Do not use the ampersand character (&) unless it is part of the company name.

- Proofread for typographical, grammar, and syntax errors.

All abstract should be submitted electronically as Word documents (with a .doc extension), via email to:

**FSIPP 2022 Abstracts**  
**Lakyn Tankersley**  
**lakyn.mantra@gmail.com**

### **Policy on Commercial Support:**

Abstracts must avoid commercialism. Abstracts that constitute promotion and advertising will not be accepted. Statements should not be viewed as or considered representative of any formal stance or position taken on any subject, issue, or product by the FSIPP 2022 Planning Committee.

### **Selection Criteria:**

Submissions will be reviewed and rated by members of the Scientific Planning Committee who have expertise in the clinical area to which the submission belongs. Each submission will be reviewed for its scientific or clinical importance, ethical practice, and study design.

Abstract Poster winners will be recognized at the podium during the conference. The top 3 chosen will win a cash prize.

You will be notified by e-mail of the proposal's acceptance or rejection by **June 30, 2022**

### **Meeting Registration Guideline for Poster Winners:**

Poster winners can register for the meeting and pay the applicable registration fee, as the FSIPP 2022 Conference will not waive the registration fee. Poster winners are also responsible for all personal expenses (e.g., travel, hotel). You are encouraged to register for the meeting and to reserve hotel accommodations as early as possible to ensure that space is available.

For Registration and Hotel Information, please contact the planning committee at:

Trista.mantra@gmail.com

Florida Society of Interventional Pain Physicians  
Florida Society Physical Medicine & Rehabilitation

**Abstract Submission Form**

|                           |  |       |  |
|---------------------------|--|-------|--|
| ABSTRACT TITLE            |  |       |  |
| Name & Credentials        |  |       |  |
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Page may be copied, if needed, for additional authors.

**Abstract: Please Attach Your Abstract Which Includes:**

- Introduction
- Objectives
- Materials and Methods
- Results
- Conclusion
- References (Author 1, Author 2, Author 3 et al. Title. Journal Year. Volume: start page-end page)
- Acknowledgements – please acknowledge any funding source and contributors to the research.
- Figure and Table Legend

| Disclosures                                                                                                                                                                                                   | Yes | No |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| Do any of the authors of this abstract have any commercial relationships to disclose? <ul style="list-style-type: none"> <li>• If yes, please complete the Disclosure of Commercial Relationships.</li> </ul> |     |    |

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| Is any device or drug requiring FDA approval identified as an important component of your presentation?<br><ul style="list-style-type: none"> <li>If yes, please complete the FDA Disclosure Form</li> </ul> |  |  |
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| <b>SIGNED:</b> | <b>DATE:</b> |
| Print Name:    |              |

By submitting this abstract, the author certifies the following:

- The identical abstract has not been submitted to any other meeting.
- The material has not been accepted for publication prior to this submission.
- All the listed authors have reviewed this abstract and agree to its submission.

### **Disclosure of Financial Relationships:**

All authors submitting abstracts for publication are required to disclose any relationships with industry that may direct bearing on relevant subject matter.

The primary presenter must disclose any author who has relevant financial interest or other relationships occurring with the past 12 months with commercial companies or organizations.

Please type “Yes” for any category that applies. You may copy and complete as many forms as needed.

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| <b>AUTHOR NAME</b>        |  |  |  |
| Company                   |  |  |  |
| Enter Yes, if applicable: |  |  |  |
| • Board Member/Trustee    |  |  |  |
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| • Employee                |  |  |  |
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| • Investment Interest              |  |  |  |
| • Meeting Participant/<br>Lecturer |  |  |  |
| • Owner                            |  |  |  |
| • Scientific Study/Trial           |  |  |  |
| • Other (please specify)           |  |  |  |

### **FDA Disclosure**

If a device or drug requiring FDA approval is identified as an important component of your presentation, please list the device/drug and indicate the FDA status as either:

- Approved
- Investigational Device/Drug
- Not Approved for Distribution in the United States

| <b>DEVICE/DRUG</b> | <b>STATUS</b> |
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**We look forward to receiving your abstracts for FSIPP 2022!**

For additional FSIPP 2022 Meeting Information, please contact the Planning Committee.

Sincerely -

Michelle Byers-Robson  
[Director@FSIPP.org](mailto:Director@FSIPP.org)