



2016 CALL FOR PROPOSALS SUBMISSION DATES

See website for submission dates: <http://www.acrm.org/meetings/2016-annual-conference/call-for-proposals-2016/>

CONFERENCE DETAILS

Pre-Conference Instructional Courses: Sunday, 30 October – Tuesday, 1 November 2016

Core Conference (Symposia, Scientific Papers & Posters): Wednesday, 2 November – Friday, 4 November 2016

Location: Chicago Hilton, Chicago, Illinois, USA

Proposal Submission GUIDELINES

The ACRM Annual Conference: *Progress in Rehabilitation Research (PIRR)* is the premier, evidence-based educational conference for creators, users, and funders of rehabilitation science. The 2016 Program Committee invites proposals focused on research evidence and its translation into clinical practice. ACRM is especially interested in the following content topics:

- Brain Injury
- Cancer Rehabilitation
- Clinical practice (assessment, diagnosis, treatment, knowledge translation/EBP)
- Geriatric Rehabilitation
- Health/disability policy, ethics, advocacy
- International
- Measurement
- Military and Veterans Affairs
- Neurodegenerative disease (e.g., MS, Parkinson's disease)
- Neuroplasticity (includes neuroscience)
- Pain
- Pediatric Rehabilitation
- Spinal Cord Injury
- Stroke
- Technology (e.g. prosthetics/orthotics, robotics, assistive technology)

Sample topic areas of interest to conference participants include:

- Evidence-based approaches to diagnosis, treatment, and overall care of individuals with acquired brain injury, spinal cord injury, stroke, neurodegenerative diseases, pain, and cancer
- Applications of technology in rehabilitation research and practice (prosthetics, orthotics, assistive technology, implantable devices, robotic devices)
- Evidence-based approaches for remediation of cognitive impairment, depression, post-traumatic stress disorder, sleep disturbances, and pain
- Role of exercise and "activity-based" therapy in neuro-recovery
- Use of innovative information and communications technology in rehabilitation (tele-health, tele-rehabilitation, Internet and social media)
- Use of neuro-imaging in diagnosis and treatment
- Methods for translation of evidence into clinical practice
- Alternatives to randomized clinical trials (RCTs) for validating treatment effectiveness and application of RCT findings into clinical practice

- Application of biomechanics, motor control, and learning perspectives in rehabilitation.

Proposals that are interdisciplinary in nature, or include international or early career presenters are encouraged.

Avoidance of Commercialism

All presentations must avoid commercialism. Presentations that constitute promotion and advertising will be prohibited. This includes pervasive and inappropriate use of logos. No advertising matter of any kind may be distributed. No material may be displayed that in any way directly promotes the commercial interest of any company or enterprise, or of the author(s)/presenter(s). If the cost of presentation has been underwritten to any extent, a clear acknowledgment stating support and identifying the particular source should be included (e.g., "The support of [name of corporation/institute] for this project is gratefully acknowledged."). Statements made in presentations are the sole responsibility of the author(s)/presenter(s). Any statement made should not be viewed as, or considered representative of, any formal stance or position taken on any product, subject, or issue by ACRM.

Accreditation Requirements

At the time of online submission, submitters must provide complete contact information (e.g., name, credentials, title, institution, mailing address, email, and phone) for all authors/presenters associated with the submission. Further, all submitters, authors, and presenters must submit a current CV or resume and electronically fill out a continuing education (CE) agreement and disclosure form. Failure to do so prevents acceptance of a submission. An electronic copy of presentations must be held on file with ACRM.

Conference Attendance and Presenter Expenses

Presenters for all accepted proposals are required to register for the conference, and are fully responsible for all of their expenses related to the conference (e.g., registration, airfare, hotel, meals).

ONLINE SUBMISSION

All submissions must be submitted online via the Annual Conference System available [here](#): You will need to create a new profile to begin the submission process.

Questions?

Contact meetings@ACRM.org.

Presentation Types

1) Pre-Conference Instructional Courses

Instructional courses may be proposed for a four-hour or eight-hour time block, allowing presenters the opportunity to discuss and present a topic in depth. Courses should be either instructional in nature, offering in-depth training or knowledge translation on a particular topic; or informative, providing detailed coverage of an area of research, methodology, or clinical practice. Courses may be scheduled as pre-conference sessions on Sunday, Monday or Tuesday (30, 31 October or 1 November, 2016) depending upon the length and level of interest in the topic. Instructional courses typically average about 18 attendees each, providing the opportunity for small-group interaction and hands-on activities.

The proposal should include a course title, course director/lead presenter, all presenters with credentials and affiliations, detailed course outline, and duration. The submission must describe the instructional method to be used, and the content and format of presentations. It should also identify the intended audience (i.e., researchers, clinicians, administrators). A concise and descriptive summary of the course is also required for marketing purposes.

There must be multiple presenters identified. All presenters must furnish necessary disclosure information concerning potential conflicts of interest and must agree to have the course audio or video-recorded for future re-broadcast. Presenters will not be paid a stipend or honorarium. All presentations must be submitted for review prior to the conference.

Selection Criteria

Each complete submission received by the published due date will be independently peer-reviewed. Late proposals are not accepted—no exceptions. Each proposal is peer-reviewed for the following elements: (1) scientific, clinical, or didactic quality; (2) interdisciplinary nature; (3) broad appeal to the ACRM membership; (4) timeliness of the topic; (5) and contribution to the state-of-the-art of rehabilitation science. The conference Program Committee reserves the right to offer alternative or reduced time slots for presentations based on submissions.

2) Symposia

Symposia are 75 minutes in length, presented by professionals with expertise in the topic. There is a mandatory period of 10 minutes for questions and discussion, and more time may be allotted. Desired symposia submissions:

- Show how current research can effectively guide clinical practice.
- Identify clinical questions where additional research data are needed.
- State a direct relationship between the subject matter and evidence-based practice.

The following components are encouraged: interdisciplinary content, presenters from multiple institutions, international presenters, and a point/counterpoint format, as appropriate, for the discussion period.

There must be more than one presenter identified. All presenters must furnish necessary disclosure information concerning potential conflicts of interest and must agree to have the course audio or video-recorded for future re-broadcast. Presenters will not be paid a stipend or honorarium. All presentations must be submitted for review prior to the conference.

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3) Scientific Papers & Posters

A scientific paper is a moderated oral presentation of 18 minutes including questions and discussion. Outstanding submissions may be chosen for a longer presentation. AV equipment may be used to supplement the presentation. Posters are graphic presentations of a scientific paper. Submissions must include objectives, hypotheses, methodology, and results in the abstract (see details below). **Submissions with pending results are not accepted.**

Submission Guidelines

A 275-word abstract must follow one of the two structured abstract formats required for submission of general articles to the *Archives of Physical Medicine and Rehabilitation*. See the Instructions for Structured Abstracts available at www.Archives-PMR.org.

Structured abstracts for Research Papers/Posters must have these sections:

- Research Objectives
- Design
- Setting
- Participants (animals or cadavers or specimens [for orthotics only])
- Interventions
- Main Outcome Measure(s)
- Results
- Conclusions
- Author(s) Disclosures

Systematic/Meta-analytic Reviews must have these sections:

- Research Objective(s)
- Data Sources
- Study Selection
- Data Extraction
- Data Synthesis
- Conclusions
- Author(s) Disclosures

The total length of all sections in the submission must not exceed 275 words. Tables or other graphics are not permitted. Submission must include three to five continuing education learning objectives. This is required whether the abstract is eventually selected for CE/CME or not.

Submission must indicate all participants in the abstract, listing the lead investigator first, followed by all other participants in the order in which they should appear in print. The submitter has the ability to complete all information for each participant, though we recommend that participants log in to the system to complete the information themselves.

Selection Criteria

Each complete submission received by the published due date will be independently peer-reviewed. Late proposals are not accepted — no exceptions. **There should be no more than ONE presenter identified for Scientific Papers & Posters.** Each abstract will be reviewed for the

following elements: (1) scientific and clinical quality; (2) broad appeal to the interests of the ACRM membership; (3) interdisciplinary nature; (4) timeliness of the topic; and (5) contribution to the state-of-the-art of rehabilitation science.

Accepted posters will have the opportunity to be considered for the ACRM Poster Awards. Further, a subset of the poster award winners will have the opportunity to present their poster in a Poster Grand Round session.

Proposal Review Criteria Details

Each proposal (instructional courses, symposia, scientific papers and posters) will be reviewed for the following elements: (1) scientific and clinical quality; (2) broad appeal to the interests of the ACRM membership; (3) interdisciplinary nature; (4) timeliness of the topic; and (5) contribution to the state-of-the-art of rehabilitation science.

WEIGHTING FOR EACH CRITERIA

Scientific quality or clinical quality	40%
Pertinent to the interests of the ACRM membership	20%
Timeliness of the topic	20%
Contribution to state-of-the-art of rehabilitation science	20%

Guiding questions for scoring each attribute:

SCIENTIFIC QUALITY OR CLINICAL QUALITY

1. To what degree are the concepts, approaches or methodologies, or interventions reflective of rigorous scientific principles, evidence-based research, or other generally accepted principles or practices?
2. To what degree does the research have application in practice?

PERTINENT TO THE INTERESTS ACRM MEMBERSHIP

- To what degree are the concepts in the abstract relevant to one or more the content topic areas of most interest to ACRM:
 - Brain Injury
 - Cancer Rehabilitation
 - Clinical practice (assessment, diagnosis, treatment, knowledge translation/EBP)
 - Geriatric Rehabilitation
 - Health/disability policy, ethics, advocacy
 - International
 - Measurement
 - Military and Veterans Affairs
 - Neurodegenerative disease (e.g., MS, Parkinson's disease)
 - Neuroplasticity (includes neuroscience)
 - Pain
 - Pediatric Rehabilitation
 - Spinal Cord Injury
 - Stroke
 - Technology (e.g. prosthetics/orthotics, robotics, assistive technology)

1. Interdisciplinary: To what degree are the concepts presented in the abstract relevant

to a large number of health professionals and researchers that comprise the ACRM membership?

- ACRM audiences include: rehabilitation medicine researchers, physicians, nurses, psychologists, counselors, occupational therapists, physical therapists, speech-language professionals, disability management specialists, healthcare executives, dieticians and others

TIMELINESS OF THE TOPIC

1. To what degree are concepts/findings presented in the abstract reflective of recently released, significant information?
2. To what degree are the concepts in the abstract a hot topic of interest to a large population of the ACRM audience?

CONTRIBUTION TO THE STATE-OF-THE-ART OF REHABILITATION SCIENCE

1. To what degree has this research utilized novel theoretical concepts, approaches or methodologies, instrumentation, or interventions?
2. To what degree does this research reflect a refinement, improvement, or new application of theoretical concepts, approaches or methodologies, or interventions?

SCORING GUIDANCE

Rating	Descriptor	Guidance for Scoring
5	Excellent	Exceptionally strong with few or no weaknesses
4	Very good	Strong but with some minor weaknesses
3	Good	Strong but with at least one moderate weakness
2	Satisfactory	Some strengths but with some moderate weaknesses
1	Poor	Very few strengths and numerous major weaknesses

ACRM | American Congress of Rehabilitation Medicine is dedicated to IMPROVING the lives of people with disabilities through interdisciplinary rehabilitation research. ACRM accomplishes this mission by welcoming and supporting ALL members of the rehabilitation team — including scientists, clinicians, administrators, counselors, therapists and others advancing the field of rehabilitation medicine. By providing a platform for interdisciplinary exchange through its 14 special interest and networking groups, ACRM supports research that promotes health, independence, productivity, and quality of life, and develops and promotes rigorous standards for rehabilitation research. As the premier provider of evidence-based rehabilitation content, ACRM disseminates cutting-edge research and its translation into clinical practice through its scientific journal, *Archives of Physical Medicine and Rehabilitation*, the most-cited journal in rehabilitation; the annual conference, Progress in Rehabilitation Research, offering nonstop educational content in six core diagnoses and continuing education credit in more disciplines than any other rehabilitation conference; and through its websites. ACRM is a strong advocate of public policy and legislature that supports adequate public funding of rehabilitation research and patient access to effective rehabilitation services throughout their lives.

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