

## Call for Late-Breaking Abstracts Form

2022 Food and Nutrition Conference & Expo – Orlando, FL  
Site opens May 1- Closes May 31st, 2022

### New Abstract

**Proposed Abstract Title\*** (75 words maximum)

**Abstract Type\*** (Refer to the [Posters Sessions webpage](#) for more information about abstract type)

- Research
- Project or Program
- Future Practice

### Learning Objective\*

Provide a learning objective that is clear, measurable and achievable and describes the outcomes or impact resulting from the presentation.

Complete the sentence, 'Upon completion, participant will be able to...'. Use action words to begin this learning objective, such as list, describe, define, demonstrate, conduct, etc. (30 words maximum)

### Abstract

**Topic\*** (Choose up to two)

- Business, Industry and Product Development
- Clinical Care
- Communications
- Community, Population and Global Health
- 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
- Quality Management
- Research and Scholarship

**Abstract\*** (Maximum 250 words)

**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. Which Council on Future Practice change driver is reflected in the abstract?\***

*(Select one)*

- Aging Population Dramatically Impacts Society
- Embracing America's Diversity
- Consumer Awareness of Food Choice Ramifications Increases
- Tailored Health Care to Fit My Genes
- Accountability and Outcomes Documentation Become the Norm
- Population Health and Health Promotion Become Priorities
- Creating Collaborative-Ready Health Professionals
- Food Becomes Medicine in the Continuum of Health
- Technological Obsolescence is Accelerating
- Simulations Stimulate Strong Skills
- Navigating Future Practice: VUCA

**2. Why did you select this change driver?\***

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

## Disclosures

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

You can access each author's form by clicking on the name(s) below.

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 12 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 have no real or apparent 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

Type 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
- Other: Please describe

**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. \*

## Terms and Conditions

Professional education, including posters presented at FNCE<sup>®</sup>, 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

Publication of research regardless of outcome

Disclosure of funder's influence on research

Disclosure of funder's influence on education for professionals

Disclosure of funder's influence on education for the public

Disclosure of funding source and conflicts of interest

- 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