Vascular Anaesthesia Society Abstracts.

Abstract submissions should be limited to one side of A4.

Word-processing Package

Microsoft Word for Windows is preferred, although WordPerfect and other major word processing packages (including those for Macintosh) are acceptable.

Page Layout and Font

- Select **A4 paper size** (210 x 297 mm; 8.27 x 11.69").
- Set all margins to 2.54cm (1").
- Use single line spacing.
- Use only **Times New Roman 12pt** font including references.
- Do not use right hand margin justification (use ragged rights).

Text Layout

- Start at the top of the page with the title in bold, use sentence case (not all capitals).
- Leave a blank line.
- Start a new line and list the authors' initials and last names in normal typeface and sentence case. The presenting author's name should be in bold.
- Start a new line and provide the postal address where the work was carried out, including postcode. This should be in italics. For abstracts with authors from different institutions give the address where the work was carried out first followed by the other authors' addresses. Use the superscripted symbols * and # to indicate each author's affiliation.
- Leave a blank line.
- Type in the text of the abstract, following the relevant portions of the "Guide to Contributors" in the British Journal of Anaesthesia. This can be found in back of copies of the British Journal of Anaesthesia.
- Pay particular attention to the units used (SI only, except for intravascular and airway pressures) and to the format of the symbols for the units.
- Words which are abbreviated should be written in full at first mention and followed by the abbreviation in brackets. This will usually be in the form of large capitals without separating points.
- Do not use any subheadings except for References.
- Use a blank line to separate paragraphs.
- The complete abstract (including title, authors' names and addresses, text, table, space for figure, references and acknowledgements) should not exceed 1 page.

Figures and Tables

Only one table or figure is permitted.

- Tables should be incorporated into the abstract document.
- If a figure is to be used, be sure to leave sufficient space in the abstract document for it to be incorporated by the printers. The figure caption should be part of the abstract document. The figure itself should be submitted as a separate file i.e. File 2. Do not insert any graphics into the abstract document. The size of the figure should not exceed that of the space left for it in the abstract document. In production of the journal, your abstract (including the figure) will be reduced by 25%. Please ensure that your figure will remain legible after reduction. The use of "three dimensional" graphs is discouraged.

References and Acknowledgements

- Use superscripted numbers without brackets to indicate references. List the references in the order they appear in the text.
- The format for citing references is the British Journal of Anaesthesia (US National Library of Medicine) format, omitting the title. Precede each reference with its number followed by a full stop. The names and initials of more than six authors should be abbreviated to 3 authors followed by et al.
- The journal name should be abbreviated, using "Index Medicus" abbreviations and the volume number should be bold text, the issue number should be omitted.
- There is no restriction on the number of references cited.
- Start the reference list with the subheading **References(s)** in bold. The reference list should be normal text, do not use the automatic footnotes or endnotes facilities in word processor packages.
- Please acknowledge any source of funding for your study at the end of the abstract.

Notes

Abstracts presented at the Society meetings may be published in Anaesthesia, although acceptance of an abstract by the Vascular Anaesthesia Society cannot guarantee publication. The abstracts will be subject to peer review by the editors of Anaesthesia. Abstracts that contain no data and those prepared without regard to the instructions are unlikely to be accepted.

TYPES OF ABSTRACTS TO BE SUBMITTED

Research abstract for oral or poster presentation

These are for original research studies and should follow the guidance for abstract writing as required for the BJA that may be seen on the link "download instructions for the submission of abstracts". They should include the following sections: introduction and aims, method, results and conclusion but headings are not used in the abstract. They will be scored by several reviewers. The review process will result in the abstract being accepted or rejected on the basis of quality. Authors may elect to present only in poster format. Otherwise research

committee will select as required a few high scoring abstracts for oral communication (8 minute presentation, 3 minute discussion). All other presentations will be in poster.

Case reports & Technical reports

These should follow the same general features of abstract writing. They should have an introduction, report, and conclusion section that includes a critique. Case reports should normally contain a series of patients and add new information or experience. A single case report will only be accepted if its inclusion can be justified on the basis of novelty and detail. Technical reports should contain more than simple explanation and include some evaluation/assessment. Commercial support and industry involvement must be clearly stated.

Audits and observation of current practice

These should follow the structure of research abstracts. They should state the reason for the audit of current practice, methods, observations, and include in the conclusions the implications for any change in practice.

CATEGORIES OF VAS ABSTRACTS

Authors are asked to categorise their submission into type of abstract (a-f). A prize may be awarded.

1.1 Research Abstracts

- a) Clinical patient study (investigational/therapeutic)
- b) Biological Science (including cell and small animal studies)
- c) Health related research (population study, economic, public health etc)

1.2 Clinical Practice Abstracts

These will allow participants to present new knowledge of techniques, cases and audit experience of current practice. A prize may be awarded.

- d) Case reports
- e) Technical reports on new methods/techniques
- f) Audit and observation of current practice

TYPES OF POSTERS

Research Posters

These should follow the format of the research abstract and include the following sections: introduction and aims, method, results and conclusion. Follow advice on poster design include more detail than is possible in abstract and make effective use of tables, figures and illustrations to enhance your message. The following criteria are used to score Posters for prizes.

- Sensible poster layout that allows flow of argument with appropriate title
- Plan of study design with hypothesis/rationale and appropriate methods
- Accurate presentation of results with appropriate use of figures and statistics
- Conclusions clearly presented and are justifiable from the results presented
- Excellence in the art of display that enhances and does not distract from findings

Case reports & Technical reports

These should follow the same general features of good poster design. They should have an introduction, report, and conclusion section that includes a critical review. Case reports should normally contain a series of patients and add new information or experience. A single case report will only be accepted if its inclusion can be justified on the basis of novelty and detail. Technical reports should contain more than simple explanation and include some evaluation/assessment.

Audit and observation of current practice

These should follow the layout of research posters.

GUIDANCE ON POSTER PRESENTATIONS

- Prepare a short (< 60 seconds) oral guide through your poster to be offered to those that prefer your words before reading for themselves.
- Prepare a 5 minutes detailed presentation that you will present if there is a chairman guided poster session
- Prepare (on disc) **NO MORE THAN 5** summary powerpoint slides.

GUIDANCE ON POSTER LAYOUT

- Making a good poster is an art. Packages such as "Powerpoint" make the task much easier and allow you to experiment. However avoid simply copying and pasting your abstract.
- The VAS poster board surface area is usually 2 m high and 1 m wide.
- Posters should be prepared A1 (840mm X 594mm) size.
- **Don't overload your poster.** Remember, you are not writing an article.
- Seek simplicity, keep text to a minimum, avoid redundancies.
- Use 500 to 1'000 words (including title, figure legends and tables), definitely not more.
- The figures and tables should cover approximately 50% of the poster area.
- Prepare a 20 cm high title strip that runs the full width of the poster. Use a
 black and bold typeface, not smaller than 30 mm in height for the title and at
 least 20 mm for authors names and affiliations (the height refers to capital and
 tall letters), Capital letters are usually more difficult to read than small letters.
- The average reader spends 1-2 minutes on your poster. Highlight your main finding. Most of us start by reading the Conclusions. Thus, don't hide them in the right lower corner. Put them on eye level, either on top of the right column or alternatively start with the Conclusions. Otherwise, structure your poster by Introduction, Methods and Results. State your aims in the end of the introduction. A clear structure is important.
- The poster is supposed to be **readable from a distance of 1.5-2 m.** The text should definitely be no less than 5 mm for capitals and tall letters, and preferably larger. Use a constant font throughout the poster.
- Let your important points stand out. Use (but don't overuse) bold and colours.
- If possible, avoid abbreviations and acronyms, especially in the Conclusions.
- Feel free to provide one or more key references (in the right lower corner).
- Handouts of your poster on A4 paper (with your addresses) to your interested readers may facilitate future research communication.