## CLINICAL PRACTICE: IN PRACTICE

# Abstract Submission Information and Instructions

## I. GENERAL INFORMATION

#### A. Presentation Categories

#### **Clinical Case Study**

A case study is a presentation that describes a problem and the means used to resolve the situation. The case may involve a patient or in rare cases, more than one patient, who presents with an unusual disease or a common disease with unusual clinical presentation, complication, or outcome. The clinical diagnosis requires an extended battery of tests to confirm. Clinical diagnosis and laboratory findings relate to the patient's symptoms. Abstracts for a clinical case study should include:

- a short description of the patient history/presentation/problem.
- significant diagnostic laboratory tests results.
- patient outcome.
- a short description of the disease/condition.

#### Management/Education Case Study

A case in management may involve creative scheduling, compliance or personnel issues, or an ethical dilemma. Problems encountered in CLS/CLT education may involve issues such as admission/dismissal policy, competency testing, or recruitment and retention. The case describes the significance and implication of the problem to the clinical laboratory practice. The case presents strategies utilized to resolve the dilemma. Abstracts for a management or education case study should include:

- a short description of the problem or dilemma.
- underlying principle for resolving the issue.
- brief description of the strategy used.
- outcome or resolution.

#### Research

A research presentation characterizes a structured investigation of a specific problem. The research investigation presents the:

- nature of the problem investigated.
- reasons for investigating.
- scope of the problem.
- brief review of pertinent literature.
- research hypothesis.
- brief description of materials and methods used.
- representative data.
- conclusion.

#### The abstract must:

- state the nature of the problem investigated.
- provide reasons for investigating.
- describe the methodology.
- summarize the results.
- state the conclusion.

#### **B.** Submission Information

1. Abstracts must be submitted according to instructions below and **must be postmarked by January 15**.

2. An individual's name may appear as an author in no more than two abstracts at the same meeting.

3. An author may present only one oral presentation and one poster presentation at the same meeting.

4. A nonmember may submit an abstract for presentation if an ASCLS member is a coauthor.

5. All presenting authors must register for the meeting.

6. All abstracts must be original and not submitted for presentation at any other meeting(s).

7. All abstracts, case study or research, may be accepted for either oral or poster presentation.

#### II. PREPARATION AND SUBMISSION INSTRUCTIONS A. Preparation of abstracts

1. Title: Use concise title (five or six words, if possible) that reflects abstract content. Capitalize the first letter of first word and all other words except prepositions, conjunctions, and articles. Underline scientific genus and species names of organisms. Do not use acronyms, abbreviations, or initials in a title.

2. Author/Institution: The presenting author must be listed first, in **boldface** type. When multiple authors submit an abstract, clearly identify **one** contact author and provide complete contact information. Limit academic degrees to highest degree earned, master's and doctoral degrees only. List author institution affiliation (excluding department or division information), followed by the city and state of the institution, except when authors share the same institutional affiliation. (See sample abstract below for reference.)

3. Abstract: All abstracts must be typed double-spaced on plain, white 8 1/2 x 11-inch paper with 1 inch margins. Courier is the recommended font, 10-point type. Abstract text format is flush left. Text length (not including title and author information) must be at least 100, not to exceed 200, words. Use a single-space-return to separate title, author information, and the abstract. (See sample abstract below for reference.) To encourage consistency in style, refer to guidelines in *Scientific Style and Format* – The Council of Biology Editors Manual for Authors, Editors, and Publishers, 6th Edition.

#### **CLINICAL PRACTICE: IN PRACTICE**

Authors of abstracts for poster presentations must follow the same guidelines for oral presentations. In addition, poster presenters are required to submit three (3) multiple-choice questions. Each question should have four (4) response choices. Authors must provide an answer key. The presenter will post these questions as part of the poster display. ASCLS members who visit and review five posters and answer the questions from those posters may receive 1.0 contact hour of P.A.C.E.<sup>®</sup> credit.

#### **B.** Abstract Proposal Submission

1. All abstract proposals must be submitted with a fully completed proposal form.

2. Send the fully completed and signed abstract submission form with the following: one original abstract; one hard copy of the abstract; and one copy of the abstract on IBM formatted computer disk (MS Word). Disk label must clearly indicate author's name and phone number(s), abstract title, and current date. Label the disk with the author's name, title of presentation and text file, computer used, and name/version of word processing program.

3. The abstract proposal form is also available at www.ascls.org. Follow above instructions for submission.

#### C. Review, Acceptance, and Notification

Members of the ASCLS Abstract Review Committee review all abstract submissions. Authors will receive written -notification of abstract acceptance/rejection in mid-March. The letter of acceptance will include information on the presentation date and time of the presentation. Accepted abstracts are edited for publication in *Clinical Laboratory Science*.

#### D. Presentations and Poster display provisions

Each oral presentation is limited to 15 minutes. Authors of poster presentations are provided with an approximately 4-foot-high x 8-foot-wide bulletin board to display a summary of the paper. Exact poster specifications will be included in the abstract acceptance letter.

#### E. Questions

Questions regarding these instructions should be directed to Joan Polancic, ASCLS Director of Education and Project Planning. joanp@ascls.org.

#### **III. SAMPLE ABSTRACT**

Effects of Exercise on Cholesterol and Hormone Levels of Premenopausal and Perimenopausal Women Diane M Cearlock PhD CLS (NCA) Nancy A Nuzzo PhD Northern Illinois University DeKalb IL

The purpose of this study was to compare the effects of regular moderate exercise on cholesterol and hormone (cortisol, growth hormone, and estrogen) levels in premenopausal and perimenopausal women. Little has been published about the effects of exercise on the levels of these analytes in perimenopausal women. These hormones typically diminish with age, but exercise may promote increased secretion. Fifteen premenopausal women (ages 20 to 30 years) and 11 perimenopausal women (ages 40 to 50 years) participated in a 4-week, 3-times-per-week exercise program. Once a week for 6 weeks, blood samples were collected from each participant, preexercise, during exercise, and postexercise. Data indicated that all analyte concentrations of the premenopausal women remained stable throughout the program. In contrast, there was a significant (p < 0.5) decrease in cholesterol levels of the perimenopausal women when comparing week 0 to week 4, but not when comparing week 0 to week 5, suggesting that exercise lowers cholesterol in perimenopausal women, but the effect was sustained only if exercise was continued. There were no significant differences in the cortisol values of the perimenopausal women, suggesting that the exercise did not activate inflammatory responses to a significant extent. The investigators concluded that the exercise program was safe for use in a similar study involving older women (ages 60 to 75 years). Growth hormone and estrogen values are currently being analyzed.

# 2003 ABSTRACT PROPOSAL FORM

Please complete all the requested information on this form. This form must accompany all submitted abstracts. Abstracts must be postmarked by January 15, 2003 for the 2003 ASCLS Annual Meeting.

TITLE	DISCIPLINE			
	Check only ONE:			
	Administration			
Contact/Presenting Author:	Biochemistry/Urinalysis/Ligand Immunoassay			
NAME:	Consultants' Forum			
DEGREE: CREDENTIAL:	Education			
Address:	Hematology/Hemostasis			
	Immunology/Immunohematology			
	Microbiology			
	Other (please specify)			
City/State/Zip:				
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Work phone: ()	Check only <b>ONE</b> :			
Fax: ()	Abstract for <b>oral presentation</b> only			
E-mail address:	Abstract for <b>poster presentation</b> only			
ASCLS member number:	Abstract for either <b>oral or poster presentation</b>			
Signature of contact/presenting author:	Abstract for <b>case study presentation</b>			

#### Before mailing information, enclose the following:

- \_\_\_\_ Abstract typed in appropriate format
- \_\_\_\_ Disk containing abstract
- \_\_\_\_ Completed abstract proposal form
- \_\_\_\_ Signature of presenting author
- \_\_\_\_ Discipline specified
- \_\_\_\_ Type presentation specified
- \_\_\_\_ Questions/answer key (posters only)
- \_\_\_\_ Original and one copy of all materials

Mail all materials to: ASCLS 2003 Abstract Review Committee 7910 Woodmont Avenue, Suite 530 Bethesda, MD 20814

## FOCUS: MANAGEMENT

**Continuing Education Questions** 

### **SUMMER 2002**

To receive 2.0 contact hours of basic level P.A.C.E.<sup>®</sup> credit for Focus: Management, insert your answers in the appropriate spots on the immediately following page; then complete and mail the form as directed.

**NOTE:** There may be more answer spaces on the answer sheet than needed. If so, leave them blank. Make sure the number of the answer space you fill in matches the number of the question you are answering.

#### LEARNING OBJECTIVES

The participant...

- 1. Identifies the agency managing bioterrorist grants.
- 2. Selects the appropriate laboratory level for response to bioterrorism.
- 3. Demonstrates knowledge of problems encountered in bioterrorist events.
- 4. Selects the appropriate specimen for isolation of *Bacillus anthracis*.
- 5. Selects the appropriate category for each potential bioterrorist organism.
- 6. Lists the levels of laboratories in the LRN.
- 7. Describes the characteristics of the categories of potential bioterrorist agents.
- 8. Demonstrates knowledge of publications related to laboratory preparedness.
- 9. Recognizes the appropriate Biological Safety Cabinet for a laboratory setting.
- 10. Demonstrates knowledge of the responsibilities of each level in the LRN.
- 11. Describes the appropriate safety precautions for each level of laboratory in the LRN.
- 12. Understands the proficiency testing requirements of the JCAHO.
- 13. Lists the organisms included in each category of potential bioterrorist threats.
- 14. Compares the symptoms of anthrax and flu-like diseases.
- 15. Selects the correct continued credentialing of Joint Commission Lab Surveyors.

Vicki S Freeman PhD, of the Department of Clinical Laboratory Sciences, University of Texas Medical Branch is P.A.C.E.® liaison for the CLS Continuing Education section. She reviews Focus articles, assigns contact hours, and edits learning objectives and test questions. Direct all continuing education inquiries to Vicki S Freeman PhD at (409) 772-3056, (409) 747-1610 (fax). vfreeman@utmb.edu

- 16. Discusses the agencies involved in criminal investigation of bioterrorist threats.
- 17. Describes the relationship of bioterrorism preparedness to JCAHO standards.
- 18. Distinguishes the activities expected from each laboratory level in the LRN.
- 19. Selects the appropriate category for organisms posing potential bioterrorist threat.
- 20. Describes the terminology unique to the LRN functions.

#### CONTINUING EDUCATION QUESTIONS

- 1. The "Public Health Preparedness for Bioterrorism" cooperative agreement grant monies will be administered by:
  - a. Homeland Security.
  - b. CDC.
  - c. FDA.
  - d. HHS.
- 2. Which level of laboratory is designated by the LRN to be the sentinel of a bioterrorist event?
  - a. A
  - b. B
  - c. C
  - d. D
- 3. The single most frequently cited problem during last year's anthrax outbreak was a lack of:
  - a. knowledge.
  - b. reagents.
  - c. specimen.
  - d. communication.
- 4. The best specimen for the isolation of inhalational anthrax is: a. blood.
  - b. nasal swab.
  - c. sputum.
  - d. cutaneous swab.
- 5. Category A agents of bioterrorism include:
  - a. plague.
  - b. botulism.
  - c. tularemia.
  - d. none of the above.
  - e. all of the above.

#### FOCUS: MANAGEMENT

- 6. A tertiary care hospital laboratory occupies which level in the LRN?
  - a. A
  - b. B
  - c. C
  - d. D
- 7. An organism which can be easily disseminated with a high degree of mortality would qualify in which category for the LRN?
  - a. A
  - b. B
  - c. C
  - d. D
- 8. The *Sentinel Event Alert* newsletter is published by the: a. CDC.
  - b. JCAHO.
  - c. FDA.
  - d. LRN.
- 9. Biological safety cabinets are categorized by:
  - a. level.
  - b. class.
  - c. size.
  - d. volume.
- 10. Persons working in level D laboratories are employed by the: a. state government.
  - b. military.
  - c. federal government.
  - d. local government.
- 11. Level B laboratories perform analytic activities requiring protection at:
  - a. BSL-1.
  - b. BSL-2.
  - c. BSL-3.
  - d. BSL-4.
- 12. The JCAHO requires that laboratories verify proficiency testing enrollment:
  - a. annually.
  - b. bi-annually.
  - c. monthly.
  - d. twice a year.
- 13. Category B organisms include:
  - a. viral hemorrhagic fevers.
  - b. yellow fever.
  - c. Q fever.
  - d. all of the above.
  - e. none of the above.

- 14. Rhinorrhea is a less frequent symptom of:
  - a. laboratory-confirmed influenza.
  - b. influenza-like-illness.
  - c. hay fever.
  - d. inhalational anthrax.
- 15. Joint Commission Laboratory surveyors are:
  - a. analyzed.
  - b. certified.
  - c. baptized.
  - d. criticized.
- 16. In combating bioterrorism, criminal activity is investigated by the:
  - a. highway patrol.
  - b. postal inspector.
  - c. fire department.
  - d. FBI.
- 17. Participation in the LRN will be inspected by the Joint Commission under standards related to:
  - a. environment of care.
  - b. leadership.
  - c. emergency management.
  - d. quality control.
- 18. Level A laboratories can rule in which category of organism?
  - a. A
  - b. B
  - c. C
  - d. None of the above
  - e. All of the above
- 19. Brucellosis is an example of which category of organism in the LRN?
  - a. A
  - b. B
  - c. C
  - d. D
- 20. In the vernacular of the LRN, the term "category" refers to: a. disease agents.
  - b. laboratory safety level.
  - c. laboratory classification.
  - d. disease classification.

# **Continuing Education Registration Form**

To earn continuing education (P.A.C.E.®) credit, (1) complete the form below, (2) record your answers, and (3) tear out and mail this form with a check or money order (\$18 for ASCLS members, \$28 for non-members for all articles) to:

American Society for Clinical Laboratory Science P.O. Box 79154 Baltimore, MD 21279-0154

A certificate and credit will be awarded to participants who achieve a passing grade of 70% or better. Participants should allow 8 weeks for notification of scores and receipt of certificates.

Focus: Management carries 2.0 contact hours of basic level credit. This form can be submitted for credit for up to one year from the date of issue.

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(01) NAME				ASCLS membership number				
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(06) DAYTIME PHONE (	)		(07) E-MA	.IL:				
(08) CREDIT CARD #		TY	YPE (CIRCLE)	AE .	МС	VIS	EXP. DATE	
Check all that apply I am an ASCLS member I am not an ASCLS mem	ber		2. Specialty (c) lab adm (f)immuno	y: (a) bio ninistrati logy (g)	ochem on (d immu	istry/ur ) hema 1nohem	inalysis (b) microbiology tology/hemostasis (e) education atology	
<ul> <li>I would like to receive ASCLS membership information</li> <li>I have previously participated in Focus</li> <li>I would like information on other continuing education sources</li> </ul>			3. Workpla beds (c) ho (e)private l (h) private j	3. Workplace: (a) hospital over 500 beds (b) hospital 200–499 beds (c) hospital 100–199 beds (d) hospital under 100 beds (e)private lab (f) community blood bank (g) group practice (h) private physician (i) clinic (j) other				
Answers Circle correct answer (questions are on previous two pages).			4. Salary r (c) \$20,0 (e) over \$40	4. Salary range: (a) under \$10,000 (b) \$10,000 to \$20,000 (c) \$20,000 to \$30,000 (d) \$30,000 to \$40,000 (e) over \$40,000				
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4. a b c d e 11. a b c d e 5. a b c d e 12. a b c d e	e 18. abcde e 19. abcde	25. a b c d e 26. a b c d e	6. How mu (a) all (b) s					
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Participant Information Please circle the most appropr	iate answers.		8. How lon and the qui	ng did it 1 iz?	take y	ou to co minu	omplete both the reading ates	
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