The Ohio Orthopaedic Society is now accepting scientific abstract submissions for the Resident Research Competition at the 2023 OOS Annual Meeting. This year’s 83rd Annual Meeting is being held May 11-12, 2023 at the Quest Conference Center, 9200 Worthington Road, Ste 400, Westerville, Ohio 43082.

The top eight abstracts will be selected for podium presentation. Each resident whose paper is chosen for presentation will receive a monetary award of $100.00. In addition, the top three papers chosen at the meeting will receive an additional $100.00 each.

The next six abstracts will be selected for poster presentation option in the Exhibit Hall. Each resident whose paper is chosen for the poster presentation will receive a monetary award of $100.00. In addition, the top two chosen at the meeting will receive an additional $100.00.

**Abstract Submission Instructions:**

Residents may submit multiple abstracts, however only one abstract per author will be accepted for the contest.

Abstracts must be typed, single-spaced and not smaller than number 12-sized font and contained on a single page. Include the title of the paper on the front page of the abstract, but do not include the name of the author(s) on the front of the form. This allows for blind selection of papers by the Program Committee.

In order to be eligible, the work must be the work of the principle author who must be a resident in training at the time of submission of the abstract in an approved residency or fellowship within the State of Ohio.

All abstract papers must be submitted by **December 31, 2022** to be considered by the Program Committee. Please email submissions to: Susan@OhioOrthoSociety.org in word format and PDF format.

**Podium Presentation Friday, May 12, 2023**

Each Podium presentation will be 5 minutes in length with open discussion from the floor.

**Poster Presentation, Friday, May 12, 2023**

Poster presentations will be shown for the entire meeting at the break sessions. Poster presenters will be expected to be at their posters during break times.

Abstracts will be graded on the following criteria:

1. Quality of original work
2. Scientific content and methodology
3. Significance of the study
4. Content and clarity
5. Research data to support conclusions

**Abstracts will be judged in a “blind” fashion. Your text should not reveal the authors or institutions of origin.**

Abstract Submission Forms can also be found on-line under the Annual Meeting tab on the Ohio Orthopaedic Society website. [www.ohioorthosociety.org](http://www.ohioorthosociety.org)

Questions? Email Susan@ohioorthosociety.org
THE AMERICAN ACADEMY OF ORTHOPAEDIC SURGEONS AND
THE OHIO ORTHOPAEDIC SOCIETY
FACULTY DISCLOSURE STATEMENT
OF COMMERCIAL SUPPORT

Having an interest or affiliation with a corporation offering support does not prevent a speaker from making a presentation, but the relationship must be made known in advance to the audience, in accordance with the Standards of the Accreditation Council of Continuing Education.

CME Activity: 2023 Ohio Orthopaedic Society Annual Meeting
Location: Westerville, Ohio
May 12, 2023

Presenter’s Name: __________________________________________________

Please Complete either Section A or Section B

SECTION A:
I, the undersigned declare that neither I nor any immediate family member currently have a financial arrangement or affiliation with any organization(s) that may have a direct interest in the subject matter of this continuing medical education presentation(s).

Signature: ________________________________________________

SECTION B:
I, the undersigned (or an immediate family member) currently have a financial interest arrangement or affiliation with the following organization(s) that may have a direct interest in the subject matter of this continuing medical education presentation(s) as follows:

AFFILIATION/ FINANCIAL INTEREST

Name of Affiliated Corporation(s):

Please check any that apply:  _____ Research/ Grant Support

 _____ Consultant

 _____ National Speaker’s List

 _____ Major Stock Shareholder (5%)

Other Financial or Material Interest

(Please specify) ________________________________________________________________

Signature: ________________________________________________

Print: ________________________________________________
**Principle Investigator and Author**

Name: ________________________________

Institution: ________________________________

Mailing Address: ________________________________

City: __________________ State: ____ Zip Code: ______

Phone Number: ________________________________

Email Address: ________________________________

**First Co-Author**

Name: ________________________________

Institution: ________________________________

Email Address: ________________________________

**Second Co-Author**

Name: ________________________________

Institution: ________________________________

Email Address: ________________________________

**Third Co-Author**

Name: ________________________________

Institution: ________________________________

Email Address: ________________________________

**Fourth Co-Author**

Name: ________________________________

Institution: ________________________________

Email Address: ________________________________

**Contact Person:** ________________________________

**Phone Number:** ________________________________ **Email:** ________________________________

Please include name and degrees of all co-authors.
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Abstract Submission - Resident Competition