

# GUIDANCE ON WRITING A HIGH-QUALITY ABSTRACT

This Guidance should be taken into account alongside the Call for Abstracts in respect of submissions for the APAGBI ASM.

## GENERAL CONSIDERATIONS

Abstracts should be well written in clear plain English and formatted according to the guidance below. The reader should be able to clearly identify why the work was carried out, how the work was carried out, what the results were and what conclusions the authors feel should be made from this. The language should be succinct and word limit (450 words) kept to, extensive bibliographies are not necessary and meaning should be clear.

A single graphical image may be included. This will not affect the word limit. Images included in the abstract should be simple, illustrative of the text and clear in meaning. Photographs, overly complex diagrams or images containing more than a minimal amount of text will be rejected. Jpeg files, or .doc files are preferred.

## ABSTRACT TYPES

### *Research*

Research can come in various types. What unites it is a desire to draw conclusions which can be generalised and the use of formal methodology. Examples include (but are not limited to) randomised controlled trials, observational studies, basic science research, dose finding methodologies and systematic review.

- The question being addressed should be clearly stated.
- The methodology should be appropriate to the question being answered. Aspects such as sample size should be justified.
- The results should be clearly stated. This should include statements of residual uncertainty such as confidence intervals.
- When results are based on a secondary analysis, such as subgroups, or outcomes other than the primary objective of the study, this should be stated.
- Any conclusions should be justified by the data given.

We will also welcome submission of abstracts concerning research proposals or ongoing research. This can be a useful way to achieve wider collaboration, aid recruitment or provide fresh momentum to a project. In the case of research proposals, which are not yet running, feedback can be useful to improve methodology and may aid subsequent funding applications. Proposals at a very early stage of development are likely to be rejected. We would not encourage presentation of intermediate results. Be aware that abstracts will be published on a publicly accessible website.

### *Quality Improvement*

Unlike research, QI projects aim to improve the quality of care within a given system (department, hospital, health service) rather than reach conclusions which can be generalised to all patients. Asking 'is use of a penile block associated with lower pain score after circumcision' is research: asking 'how can I improve pain relief in patients undergoing circumcision in our day care unit' is a QI

project. If the outcome of the project is more penile blocks and better analgesia this may encourage doctors in other units to perform penile blocks, but this was not the objective of the project and may not be the only outcome.

*Guidance on high quality QI projects can be found at:*

<https://www.apagbi.org.uk/professionals/science/quality-improvement>

When judging abstracts more points will be given for:

- Projects encompassing a complete, and ideally several, PDSA cycles.
- Projects which contain some thought about the process of producing change through education, recourses or other means.
- QI which is integrated into clinical practice rather than short term directed audit projects.
- A larger number of subjects does not of itself produce a better project, but numbers should be adequate for the stated objective
- Appropriate use of statistical methodologies and data collection.

## ***Education and Training***

The educational section is primarily intended for educational initiatives aimed at anaesthetists and other health professionals and students. Abstracts may cover any topic related to healthcare professions education within the scope of practice of paediatric anaesthesia and paediatric peri-operative medicine.

For 2021 we would particularly welcome submissions related to educational initiatives that ensured ongoing training and professional development in paediatric anaesthesia despite the impact of the Covid-19 pandemic.

Educational initiatives aimed at patients, families or the general public may also be considered, however these may be better submitted as QI projects.

Scoring criteria and considerations when judging abstracts:

- Clarity - the educational objective is clearly identified
- Choice of approach – appropriate methodology used for the project
- Relevance and importance of the topic
- Improved educational outcomes can be demonstrated
- Originality, including appropriate and innovative use of technology
- The initiative has potential to be more widely applied
- The initiative builds upon current knowledge of best practice in education

Abstracts should be submitted in the format:

Introduction

Methods

Results

Discussion or Conclusion

## *Case Reports and Case Series*

Case reports can be a powerful way of learning and often the only way to describe management of rare occurrences.

Emphasis should be on what is unique and worthy of discussion. What are the lessons you learnt and wish to tell others? Discussing what went badly is often as useful as what went well.

Where information given is potentially identifiable to an individual patient or if any patient images (including radiographs) are included it must be clearly stated that consent was given. Other than in special circumstances, this will apply to all single case presentations or short case series.