



# Free Communications Program

## Student Exchange Track Instructions

The mission of the NATA Research and Education Foundation Free Communications Program is to advance the discovery, dissemination, and application of scientific knowledge in athletic training domains through written and oral forum. This mission is realized by communicating scientific knowledge to the athletic training community through the sharing of original research reports during NATA convention.

### CALL FOR ABSTRACTS

for the NATA Clinical Symposia & AT Expo, June 26-29, 2017 – Houston, TX

**DEADLINE FOR ABSTRACT SUBMISSION IS NOVEMBER 15, 2016** (*All abstracts submitted for presentation must be submitted ONLINE.*)

## Instructions for Abstract Preparation and Submission

Please read all instructions before preparing and submitting the abstract. Individuals may submit only one Original Research Abstract as the primary (presenting) author, but may submit unlimited abstracts as a secondary author. All student exchange abstracts will undergo mechanical review but not scientific peer review. All presentations must be of original work (not previously presented). This restriction includes any electronic/internet postings. Exceptions to this restriction are limited to athletic training organizations' state and district meetings and the NATA Athletic Training Educators' Conference. All accepted student exchange track submissions will be presented in poster format and are not considered for student awards. The Original Research Abstract must be written to the accepted scientific standards of a research area and should present findings pertaining to healthcare issues related to the athletic training profession.

Please remember to upload a CV or Bio of the presenting author.

**PLEASE NOTE:** Student Exchange Track Abstracts are not published in the *Supplement to the Journal of Athletic Training*.

## Formatting Instructions

Information for submitting your abstract has changed, the information will be submitted in sections, if you have created your abstract, you will be able to copy and paste the information into the sections.

You will need to follow the formatting information below for the writing of your abstract.

1. Prepare your abstract (on your computer) in accordance with the following instructions. You will later be directed to upload your abstract file from your computer to the Abstract Manager system.
2. Top, bottom, right, and left margins of the body of the abstract (in a WORD file) should be set at 1" using the standard 8.5" x 11" format. Use either Arial or Helvetica 12pt. font with single spacing. Provide the title of the paper or project starting at the top left margin.
3. On the next line, indent 3 spaces and provide the names of all authors, with the author who will make the presentation listed first. Enter the last name, then initials (without periods), followed by a comma, and continue the same format for all secondary authors (if any), ending with a colon.
4. On the same line following the colon, indicate the name of the institution (including the city and state) where the research was conducted. If primary author is not at the institution where the work was completed place an \* after their name and following the institution where the research was conducted the primary author can indicate their present institution (including the city and state). For collaborative projects where portions of the project were conducted at different institutions, list all authors as described above (#3), then list institutional affiliations using the following consecutive symbols (\*, †, ‡, §, ¶, #, \*\*, etc.)
5. Double space and begin entering the body of the abstract flush left in a single paragraph with no indentions. The text of the body must be structured (with the headings as indicated in the various formats below). Do not justify the right margin. Do not include tables or figures. The body of the abstract for Original Research is limited to 450 words. A word count generated by MS Word must be included at the bottom of the abstract. The word count should include the body of the abstract and structured headings.
6. The required formats for the structured abstracts are listed below. For further clarification, authors should consult the AMA Manual of Style 9th edition and the instructions for authors in the Journal of Athletic Training.
7. Abstracts fall into one of the following 4 categories; the author is responsible for determining the most applicable category for structuring their abstract:. Each is provided with examples where applicable but the examples are not all encompassing and some may overlap. Authors should choose the format that seems to best fit and present their data.

### Basic Research

- Basic Sciences (e.g. muscle tissue biopsy, EMG, etc)
- Epidemiology (e.g. cohort, case-control, intervention, clinical trial)
- Biomechanics (e.g. motion analysis, jump landing characteristics)

### Survey Research

- Instrument development (e.g. validation and reliability, psychometrics)
- Cross-sectional survey (e.g. paper, web-based, or interview questionnaires)

### Meta-Analysis Research & Systematic Reviews

- Meta-analysis (e.g. review and analysis of ACL clinical trials)
- Systematic Review (e.g. review of all clinical trials of the ACL without analysis)

### Qualitative Research

- Research using qualitative techniques (e.g. interviews or direct observation, etc)

### Review Criteria for All Original Research Abstracts:

- Completeness of requested information in each structured heading.
- Overall clarity of writing
- Originality of research and or contribution to the literature or knowledgebase
- Methods and results address the primary objective
- Consistency between data and conclusions
- Adequacy of sample size to support conclusions

## Format For Basic Research Abstracts

**The Title of your Abstract Bolded and in Title Case** [3 spaces]Doe JT\*, Public JQ†: \*First Author's Institution Name, †Second Author's Institution. [Blank Line] [Blank Line] **Context:** Write a sentence or two summarizing the rationale for the study, providing a reason for the study question and/or uniqueness of study. **Objective:** State the precise objective(s) or question(s) addressed in the report, including a priori hypotheses if applicable. **Design:** Describe the overall study design of the project reported (e.g., randomized controlled trial, crossover trial, cohort or cross-sectional). **Setting:** Describe the environment in which the study was conducted to help readers understand the transferability of the findings, (e.g., patient clinic, research laboratory or field). **Patients or Other Participants:** Describe the underlying target population, selection procedures (e.g., population based sample, volunteer sample or convenience sample) and important aspects of the final subject pool (e.g., number, average age, weight, height and measures of variance, years of experience or gender). Appropriate sample size should be evident. **Interventions:** Interventions are the independent variables in

the study. Describe the essential pieces of the experimental methods, types of materials, measurements and instrumentation utilized, data analysis procedures and statistical tests employed. Provide validity and reliability information on novel instrumentation. **Main Outcome Measures:** Clearly identify primary or critical dependent variables that support the primary objective(s) of the study. Indicate the statistical analysis employed to answer the primary research objective(s). **Results:** The main results of the study should be given. Comparative reports must include descriptive data (e.g., proportions, means, rates, odds ratios or correlations), accompanying measures of dispersion (e.g., ranges, standard deviations or confidence intervals) and inferential statistical data. Results should be accompanied by the exact level of statistical significance. The P value should not exceed 3 digits to the right of decimal. When the exact significance is below  $P < .001$ , the exact significance should be reported as  $P < .001$ . **Conclusions:** Summarize or emphasize the new and important findings of the study. The conclusion must be consistent with the study objectives and results as report and should be no more than three to four sentences. If possible, relate implications of the findings for clinical practice. **Word Count:** Limited to 450 words including headings. *\* The purpose of having both descriptive and inferential data is that it provides the reader with the ability to judge the concluding statements. Descriptive data provides confidence that the data are 'reliable' and provides a gauge to determine whether the inferential statistics and conclusions are meaningful. Studies reporting analysis of larger data bases with multiple variables do not need to report all descriptive data, but should provide descriptive data for those variables which the author(s) believe to be the primary outcome(s) and support the overall conclusions of the study.*

## Format For Survey Research Abstracts

**The Title of your Abstract Bolded and in Title Case** [3 spaces]Doe JT\*, Public JQ†: \*First Author's Institution Name, †Second Author's Institution. [Blank Line] [Blank Line] **Context:** Write a sentence or two summarizing the rationale for the study, providing a reason for the study question. **Objective:** State the precise objective(s), purpose or question(s) addressed in the report. **Design:** Describe the overall study design of the project reported (e.g., cross sectional, case-control, longitudinal or controlled intervention trial). **Setting:** Describe the environment in which the study was conducted to help readers understand the transferability of the findings, (e.g., population-based, patient clinic, classroom or athletic event). **Patients or Other Participants:** Describe the underlying target population, sample selection procedures (e.g., population based, volunteer or convenience sample, random or systematic sample, or stratified or cluster sampling) and important aspects of the final subject pool (e.g., number, average age, years of experience or gender). Provide the final response rate. **Interventions:** Interventions are the independent variables in the study. Describe the essential pieces of the experimental methods, the mode of survey administration (e.g., in-person interview, telephone, self-administered, online or computer-assisted), details of the survey development (formative research or pre-testing for new instruments), execution and data collection process,

and instruments utilized. Provide validity and reliability information for all instruments. **Main Outcome Measures:** Clearly identify primary or critical dependent variables that support the primary objective(s) of the study. Describe how any data was manipulated (e.g. scoring process for scaled instruments or categorization of variables). Indicate the data and statistical analysis employed to answer the primary research objective(s). **Results:** The main results of the study should be given. Reports must include descriptive data (e.g., proportions, means, rates, odds ratios or correlations), accompanying measures of dispersion (e.g., ranges, standard deviations or confidence intervals) and inferential statistical data. Results should be accompanied by the exact level of statistical significance. The P value should not exceed 3 digits to the right of decimal. When the exact significance is below  $P < .001$ , the exact significance should be reported as  $P < .001$ . **Conclusions:** Summarize or emphasize the new and important findings of the study and relate implications of the findings for clinical practice. The statement of your findings must be consistent with the results as reported and should be no more than three sentences. **Word Count:** Limited to 450 words including headings. *\* The purpose of having both descriptive and inferential data is that it provides the reader with the ability to judge the concluding statements. Descriptive data provides confidence that the data are 'reliable' and provides a gauge to determine whether the inferential statistics and conclusions are meaningful. Studies reporting analysis of larger data bases with multiple variables do not need to report all descriptive data, but should provide descriptive data for those variables which the author(s) believe to be the primary outcomes(s) and support the overall conclusions of the study.*

## Format For Meta-Analysis & Systematic Reviews

### The Title of your Abstract Bolded and in Title Case

[3 spaces]Doe JT\*, Public JQ†: \*First Author's Institution Name, †Second Author's Institution

[Blank Line]

[Blank Line]

**Context:** Write a sentence or two summarizing the rationale for the study, providing a reason for the study question. **Objective:** State the precise objective(s) or question(s) addressed in the report, including a priori hypotheses if applicable. **Data Sources:** Identify how relevant research papers were identified – include databases and timeframe, key words and search limits. **Study Selection:** Describe the processes through which studies were selected for inclusion for further analysis. **Data Extraction:** Identify the number of investigators, the descriptive and measurement data obtained and if and how the quality of study methods was evaluated. **Data Synthesis:** Describe how the data were organized, the statistical procedures applied (during assessment of heterogeneity) and the results (e.g., effect sizes, odds ratios and confidence intervals) of the analysis. **Conclusions:** Summarize or emphasize the new and important findings of the study and relate implications of the findings for future research and/or for clinical practice and offer an indication as to the strength of the evidence provided. The statement of your findings must be consistent with the results as reported. **Word Count:** Limited to 450 words including headings.

## Format For Qualitative Research Abstracts

### The Title of your Abstract Bolded and in Title Case

[3 spaces]Doe JT\*, Public JQ†: \*First Author's Institution Name, †Second Author's Institution

[Blank Line]

[Blank Line]

**Context:** Briefly explain the rationale for the study—provide a background for the study question. **Objective:** State the precise objective(s) or question(s) addressed in the report. **Design:** Describe the overall study design of the project reported (e.g., case study, phenomenology or grounded theory). **Setting:** Describe the environment in which the study was conducted to help readers understand the transferability of the findings, (e.g., clinical setting or educational institution). **Patients or Other Participants:** Describe the underlying target population, selection procedures and important aspects of the final subject pool (e.g., number, average age and measures of variance, years of experience or gender). Describe the essential pieces of the sampling methods (e.g., theoretical sampling and criterion sampling). Comment on why this number of participants was used (e.g., data saturation guided the total number of participants selected for the study). **Data Collection and Analysis:** Describe how the data were collected (e.g., interviews, observations or document analysis), managed (e.g., interviews were recorded and transcribed verbatim; identify if software was utilized) and analyzed (e.g., the interviews were analyzed using an inductive content analysis). Include intercoder agreement information if relevant to the study. Identify any verification strategies used to ensure trustworthiness (e.g., indicate form of triangulation, or use of peer debriefer). **Results:** A short descriptive account of the case or the interpretation of the findings should be provided. This should include identifying and briefly explaining the emergent categories of themes. **Conclusions:** Summarize or emphasize the new and important findings of the study and relate implications of the findings for future research and/or for clinical practice. The statement of your findings must be consistent with the results as reported and should be no more than five sentences. **Word Count:** Limited to 450 words including headings.

### Acceptable Abbreviations

ACL	Anterior Cruciate Ligament
ADL	Activities of Daily Living
AROM	Active Range of Motion
BESS	Balance Error Scoring System
BOC	Board of Certification
CAATE	Commission on Accreditation of Athletic Training Education
CAI	Chronic Ankle Instability
CNS	Central Nervous System

CT	Computed Tomography
DVT	Deep Vein Thrombosis
EMG	Electromyography
FMS	Functional Movement Screen
HRQL	Health Related Quality of Life
LCL	Lateral Collateral Ligament
LESS	Landing Error Scoring System
MCL	Medial Collateral Ligament
MRI	Magnetic Resonance Imaging
NWB	Non-Weight Bearing
PCL	Posterior Cruciate Ligament
PPF	Patellofemoral Pain
ROM	Range of Motion
RROM	Resistive Range of Motion
SEBT	Star Excursion Scoring System

ABSTRACTS WILL NOT BE ACCEPTED AFTER NOVEMBER 15, 2016