

**ISIPT Conference 2024 - POSTER ABSTRACT SUBMISSION**

**Please submit this completed form to** **fiona.rose@iptuk.net** **by 30/11/23**

|  |
| --- |
| **Title of poster abstract** (Limited to 25 words in UPPER CASE) |
|  |
| **Abstract** (Limited to 250 words in total) |
| Objectives |  |
| Methods |  |
| Results |  |
| Conclusions |  |
| **Keywords** (You may enter up to 10 keywords that define your abstract) |
|  |
| **Presenting / corresponding author’s contact details** |
| Name: |  |
| Professional title: |  |
| Affiliation: |  |
| E-mail address: |  |
| **Confirmation of your acceptance of ISIPT requirements** (indicate ‘Yes’ or ‘No) |
| I understand that all presenters will be required to pay a registration fee. | Y / N |
| I understand no honoraria or travel expense reimbursement will be provided. | Y / N |
| **List of all authors (including presenting / corresponding author) in the order they should appear in the heading of the abstract** (Add extra rows as applicable) |
| Name: |  |
| Professional title: |  |
| Affiliation: |  |
| Name: |  |
| Professional title: |  |
| Affiliation: |  |
| Name: |  |
| Professional title: |  |
| Affiliation: |  |