

 **Your Future in Medical Education**

 Friday 12th June 2020

**Macdonald Burlington Hotel, New Street, Birmingham**

The future of medical education: educational leadership through times of transition

***Call for Papers***

Dear Colleague,

You are invited to submit abstracts concerned with any innovations / developments in any area of postgraduate medical education or anything that has worked well and could be shared with others.

3 abstracts may be selected for verbal presentation **on the afternoon of 12th June 2020**

Abstracts will also be selected for poster presentation on **12th June 2020** when there will be an opportunity to present your poster verbally.

**Guidelines**

* The abstract should not be more than 200 words in length
* Please use the following headings:
* **BACKGROUND**
* **METHODS**
* **RESULTS**
* **KEY MESSAGES**
* **REFERENCES** - Vancouver style

**Deadline for abstracts is Friday 31st March 2020**

**If your abstract is selected, you must register as a delegate**

We look forward to receiving your abstract & completed Submission Form *(see overleaf)*

**Details of this conference can be found at www.nact.org.uk**

***For further information contact the NACT UK office: 01908 272898 or office@nact.org.uk***

**Abstract Submission Form – 12th June 2020
Deadline: Friday 31st March 2020**

*This form will be held by NACT UK for one year, and then disposed of securely in accordance with the new General Data*

*Protection Regulations and* *our privacy policy details of which can be found on our website.*

***By signing here you agree to the above ………………………………………………………***

(One form per abstract - photocopy if necessary) Please email your submission form and abstract to office@nact.org.uk

**Format**: Times New Roman, 12 pt font, single line spacing, in the space below, using the headings: **Background, Methods, Results, Key Messages and References.**

Please do not use headers or footers or put footnotes in your document.

|  |  |
| --- | --- |
| Title of paper: |  |
| Corresponding author/contact details ***(this contact will receive all correspondence):*** |
| Name (including title): |  |
| Address: |  |
| Mobile Tel: |  |
| Email: |  |
| Names of co-authors: |  |
| Name of presenter  |  |
| **Abstract:** |
|  |

 I/we confirm that the abstract has not been published elsewhere: 🞎

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 I/we would prefer the abstract to be considered as either:

 Oral or Poster presentation 🞎 OR Poster presentation only 🞎 OR Workshop 🞎