



78<sup>th</sup> ANNUAL MEETING • 78<sup>e</sup> CONGRÈS ANNUEL

**MONTRÉAL** **20**  **23**

June 23-25 juin

**ABSTRACT  
SUBMISSION  
GUIDELINES**

## Important Dates

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|---|------------------|
| <b>Abstract submission</b>                          | November 2022    |
| <b>Abstract deadline</b>                            | January 13, 2023 |
| <b>Notification email will be sent</b>              | March 1, 2023    |
| <b>Deadline for presenters to accept invitation</b> | March 15, 2023   |
| <b>Deadline for presenter to register</b>           | March 29, 2023   |

### A. Submission Terms

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1. **Rule of two:** Each presenter can present a total of two oral presentations (podium or moderated poster) during CUA 2023. This restriction does not apply to unmoderated posters.
2. Abstracts must be written and presented in **English**.
3. Submitted abstracts undergo a **blind review** by peer-reviewers. Acceptance is based on scientific merit and originality.
4. While abstracts may be submitted as podium, moderated poster, or unmoderated poster presentation types, the **Scientific Committee reserves the right to assign final presentation type** in the best interest of the program.
5. **Multiple abstracts** by the same authors based on the same study population or data may be disqualified without further consideration.
6. If an abstract has been published as a manuscript or accepted for presentation at another major urological meeting before June 23, 2023, this must be disclosed in the "acknowledgments" step of abstract submission. Please also inform the Abstract Manager ([adriana.modica@cua.org](mailto:adriana.modica@cua.org)).
7. **Trials in progress** can be submitted, but please note, the committee will review and take into account whether the information is presentable with the data accumulated.
8. **Case studies** are not accepted as abstracts.
9. Regarding production deadlines, **as of March 20, 2023, all presenting authors must be registered and must have paid their registration fees** to keep their abstract in the program. Any changes to the presenting author will not be reflected in CUAJ after this date.
10. **Authors are responsible for proofreading** their abstract before submitting, particularly with regard to general orthography, as well as author names/order and affiliations. CUAJ will edit all submissions for consistency and formatting.

## B. Abstract Format

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### Title:

- The title should clearly define the topic and contain no abbreviations.
- There is a character limit of 200 characters, including spaces.
- Enter the title as you were writing a sentence, i.e., only CAPITALIZE the first letter of the sentence and proper nouns, nothing else.
- Do not use punctuation at the end of the sentence UNLESS it is a question mark (?) or exclamation point (!)
- No symbols are permitted; write out the name of the symbol (i.e., beta, alpha, etc.). You will be allowed to use symbols for the abstract body.

### Body:

- The abstract is limited to 2000 characters, including spaces (or approx. 400 words). This includes the body of the abstract only.
- **The body must contain four separate paragraphs:** a) Introduction; b) Methods; c) Results; and d) Conclusions. The abstract should be informative and detailed.
- **Standard abbreviations** may be used as follows: on first use, spell out the full term and follow with abbreviation in parentheses. Abbreviations can be used subsequently.
- Use **generic names of drugs**.
- It is **NOT acceptable** to state that “The results will be discussed.” Inclusion of specific data is necessary for reviewers.
- Indicate the major new findings of the study.

### References are not required.

**Acknowledgements:** These include any recognition of resource support (i.e., librarian, lab staff, nurses, etc.), any financial support received for the study (i.e., research grants, corporate funding, etc.), or acknowledgement of previously published material. These will be noted below your abstract in CUAJ.

### Figures:

- To insert a **figure (image or graph)** please upload the files as a JPG in the “Figures & Tables” step. JPGs must be at least 300 DPI and measure at least 3.5 inches wide.
- Tables must be created in MS Word (not images pasted into Word) and can also be uploaded in the “Figures & Tables” step.
- All tables/figures must be titled (in sentence case) and all images/figures must have a caption.
- **A reference** to accompanying tables/figures must be made within the body of the abstract (i.e., Patient demographics are listed in Table 1).

**Authors:**

- Take care to list ALL authors in the relevant section of the submission site. Spell out completely the names of all authors using full first and last names, as well as any middle initials (which should appear as capital letters followed by a period).
- Maintain consistency in author names on multiple abstracts to avoid duplication in the Author Index.
- Affiliations (department, institution) should be spelled out in full.

**Presenting Author:** If the author(s) of the abstract is an employee(s) of, or has a financial relationship with the commercial interest that controls the content of the presentation, he/she cannot be the presenting author; however, investigators responsible for research and development are permitted to present as long as they resolve their Conflict of Interest (COI) and as long as they are not employees of the commercial interest. In all printed publications, the presenting author will be underlined.

**Conflict of Interest and Disclosure Statement:** This is required for the submitting author and the presenting author. It is the responsibility of the submitting author to collect this information.

**Copyright:** Once an abstract is accepted and published in CUAJ, the abstract becomes the property of CUA. Reproduction requires permission (and includes fees). Poster and podium presentations remain the property of the presenter.

**Topic List:** Authors must select an abstract topic (only one) from the provided list.

|                                   |                                 |
|-----------------------------------|---------------------------------|
| Basic Science/Physiology/Research | Oncology - Kidney/Ureter        |
| BPH                               | Oncology - Penis/Testis/Urethra |
| Community Urology                 | Oncology - Prostate             |
| EDI                               | Other                           |
| EMR                               | Pediatric Urology               |
| Endourology/Stones                | Pelvic Pain                     |
| Evidence-Based Medicine/Outcomes  | Robotics                        |
| Female Urology                    | Sexual Dysfunction              |
| HoLEP                             | Technology/Instruments          |
| Imaging/Radiology                 | Technology/Social Media         |
| Infections/Inflammatory Disease   | Telehealth                      |
| Infertility/Andrology             | Training/Education              |
| Laparoscopy/MIS                   | Transplant                      |
| Laser                             | Trauma/Reconstruction/Diversion |
| LUTS                              | Urinary Incontinence            |
| Male Strictures                   | Urodynamics                     |
| Neurourology                      | Voiding Dysfunction             |
| Oncology - Bladder                | Wellness/Burnout                |
| Oncology - General                |                                 |