



## ABSTRACT SUBMISSION AUTHOR GUIDELINES FOR ORAL COMMUNICATION OR POSTER PRESENTATION

### A. GENERALITIES

This online abstract submission will close on **December 5, 2023**. No late abstracts will be accepted. Presenting authors will be notified of the Scientific Committee's decision regarding acceptance of their abstracts. Presenting authors **must be registered** to ICFSR24 by **February 12, 2024** or their abstract will be discarded from the program.

**Only abstracts submitted via the online system will be taken into account. Please do not send abstracts by email as they will not be considered.**

Please note that abstracts submitted for an oral communication will automatically be considered for a poster presentation if not selected for an oral communication. **Do not submit abstracts twice. Double submissions will be discarded from the system.**

**Oral communications can only be presented in-person in Albuquerque.** If you are planning on attending remotely you can only submit for a poster presentation that will be presented in our Virtual Poster Hall.

### B. STEP-BY-STEP ONLINE SUBMISSION GUIDELINES

**Step 1:** Please indicate the type of presentation you are submitting for select the type of presentation **“ORAL COMMUNICATION presented in-person”** or **“POSTER PRESENTATION presented in-person”** or **“POSTER PRESENTATION presented remotely”** – Attention do not submit the same abstract for an oral communication and a poster presentation, if your abstract is not accepted for an oral communication, it will be automatically considered for a poster presentation.

**Step 2:** In the scroll down menu for topics make sure you select the topic of your choice from those listed below

- |  |   |
|--|---|
| 1 • Frailty in Clinical Practice and Public Health | 9 • Epidemiology                        |
| 2 • Cognitive Frailty                              | 10 • Animal Models, Preclinical Studies |
| 3 • COVID 19 & Frailty & Sarcopenia                | 11 • Biomarkers and Imaging             |
| 4 • E-Health, digital tool                         | 12 • Drug Developments                  |
| 5 • Clinical Trials and Therapeutics               | 13 • Physical Exercise                  |
| 6 • Osteoporosis & Frailty                         | 14 • Integrated Care (ICOPE)            |
| 7 • Geroscience: Senescent Cells                   | 15 • Body Composition                   |
| 8 • Nutrition and Aging                            | 16 • Biology of Frailty, sarcopenia     |

**Step 4:** Enter the abstract title, please do not capitalize the letters

**Step 5:** Enter the **name and affiliation of the presenting author (the person presenting the abstract at the conference, not necessarily the main author)**

- Enter names and affiliation of co-authors as needed – Maximum of 15 co-authors is allowed.
- **Bio of the presenting author** is required you will be asked to enter the bio after the abstract text. Attention text is limited to 100 words.

**Step 6:** Enter all the emails from the presenting author and co-authors.

**Step 7:** Enter all the different elements of your abstracts in the dedicated boxes

1. Background
2. Methods
3. Results
4. Conclusions
5. Keywords
6. Disclosures
7. References

### C. AUTHOR INSTRUCTIONS

- *Abstract selection:* Abstracts are selected on a peer-review basis by the [ICFSR Scientific Committee](#)
- *Abstract publication:* Abstracts accepted for presentation at ICFSR 2024 will be published in a supplement of [the Journal of Frailty and Aging](#) after the event. It is thus essential to follow the below instructions in preparing your abstract. Abstracts submitted in an inappropriate format will not be considered for presentation and/or publication.
- *Structured abstract:* Abstracts must be structured with the following headings: Background, Methods, Results, Conclusions, Keywords, Disclosures, References
- *Disclosures:* All authors are responsible for recognizing and disclosing any conflict of interest that could be perceived to bias their work, making known all financial support, grants, and any other personal connections. Biographical descriptions should be avoided but we do want transparency, delivered in a concise and full sentence
- *Abstract text* is limited to 350 words excluding keywords, disclosures and references
- *Additional material:* Tables, graphs and figures **are not** permitted
- *Trademarks:* Generic drug names are preferable to trademarked, brand-named drugs (for example, use acetaminophen as opposed to Tylenol, Johnson & Johnson Consumer, Inc., US). In all abstracts where brand or trade names are included the manufacturer names and locations are also required.
- *References:* References and citations to previously published work should be avoided. Where cited and necessary it is acceptable to provide abbreviated references with the DOI or web links to sources. Where the DOI or web links are not available the references should conform to the Journal format for reference lists.
- *Copyright:* In submitting your abstract via the ICFSR online submission system you agree to the transfer of copyright to Serdi and Springer Nature publishers of the Journal of Frailty and Aging.
- *Author duties:* In submitting your abstract via the ICFSR online submission system you agree to abide by the author duties available here: [Author duties](#)

Abstract text sample:

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**Title : Properties of the meeting abstract: Mystery elements explained**

<sup>1</sup>Given M Family, <sup>2</sup>Kong-sang (Jackie) Chan, <sup>1,2</sup>Victoria Von Waltz, <sup>2</sup>on behalf of RSMA workgroup

<sup>1</sup>University of Abstraction, Boston, MA, USA; <sup>2</sup>Royal Society of Meeting Abstracts (RSMA), Wan Chai, Hong Kong, PR China.

**Background:** The Background includes what is already known and what is not known about the subject, and so describes the purpose for the presentation and aim of study. It is important here and throughout to avoid using acronyms or perpetuating misspellings and jargon from previous work.

**Methods:** The Method section will include details on how the study was carried out [1], such as sample sizes (and variations), source of sample if limited or defined by location, any requirements for inclusion, and duration of the study [2]. Generic drug names are preferable when describing dosage [3].

**Results:** The Results section should have detailed findings and comparisons summarized in complete sentences. The data will be used to define the Conclusion, which may be negative, or may not be significant. If all data cannot be shared and summarized in the limited space it may be helpful to deposit data in an open repository and focus on the primary purpose.

**Conclusion:** In addition to briefly summarizing the results, this section may also highlight new or unexpected results and advise on future studies. Statements may only refer to the author conclusions collectively and within a wider perspective rather than offering individual and subjective opinions.

**Keywords:** optional, consistently applied, relevant short phrases, limit of four.

**Clinical Trial Registry:** NCT12345678; <https://clinicaltrials.gov>

**Data Deposition:** <https://dx.doi.org/00.0000/m0.figshare.000000.v1>

**Disclosures:** VVWs employer received a grant from Pharmatown. The authors declared no competing interests.

**References**

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3. Program Name. Version XX. Company Name; 2016. Accessible: <http://www.includethewebaddress.com>
4. ABC Committee. *Guide for Authors*; 2016:1552-1554. <https://www.springer.com/gb/authors-editors/authorandreviewertutorials/writing-a-journal-manuscript/figures-and-tables/10285530>