

ABSTRACT SUBMISSION AUTHOR GUIDELINES FOR ROUNDTABLE PRESENTATION

A. GENERALITIES

This online abstract submission will close on **January 15, 2026**. 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 ICFSR25 by **February 1, 2026** 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 a roundtable will automatically be considered for an oral communication or poster presentation if not selected for a roundtable. **Do not submit abstracts twice. Double submissions will be discarded from the system.**

B. STEP-BY-STEP ONLINE SUBMISSION GUIDELINES

Step 1: In the scroll down menu for type of presentation select the type of presentation **"ROUNDTABLE"**

Step 2: In the scroll down menu for topics make sure you select "Roundtable"

Step 3: Enter the **name and affiliation of the chairman and the presenters (a maximum of 3 presenters is permitted)**

Step 4: In the dedicated box please enter the key takeaway message (maximum 35 words) for your entire symposium

Step 5: In the dedicated box please enter the text of your abstract with the following format:

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 2026 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, 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 1000 words excluding 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 Elsevier 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:

Title : Properties of the meeting abstract: Mystery elements explained

¹Given M Family, ²Kong-sang (Jackie) Chan, ^{1,2}Victoria Von Waltz, ²on behalf of RSMA workgroup

¹University of Abstraction, Boston, MA, USA; ²Royal 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>

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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>