Abstract categories

In previous years a number of authors have experienced difficulty deciding which category best describes their project. There is often debate about the difference between original research, service evaluation and quality improvement. Simply defined, they are:

1. Original Research

Research attempts to find new knowledge i.e. what is best practice? It usually requires approval of an ethics committee and the written consent of all subjects.

2. Service Evaluation

Service evaluation is a way to define or measure current practice, often service delivery aspects of care, the results of which help produce internal recommendations for improvements i.e. what standard does the service achieve? Where patient data is to be presented, the proposal should be approved by an ethics committee or the local Caldicott Guardian or in some situations by the hospital audit committee.

3. Quality Improvement

A QI program involves systematic activities that monitor, assess, and improve its quality of health care. Improving quality makes healthcare safer, effective, patient-centred, timely, efficient and equitable. Quality improvement projects should be peer-reviewed by senior members of the authors' anaesthetic department. They may or may not require approval from ethics or audit committees but at the very least if patient data are to be presented, the local Caldicott Guardian must be contacted and approval given.

Regardless of the category to which the project is submitted, authors are advised to seek peer-review and approval of their work by an ethics committee, audit committee or hospital Caldicott Guardian (or equivalent). Failure to do so without adequate explanation may result in rejection of the abstract. All oral and poster presenters will be required to state the type of peer review / approval at the time of their presentation. This information should also be included on slides or posters. The meeting organisers may request that authors submit documents relating to the approval of their project or signed consent forms for case reports.

4. Surveys

Authors of surveys which involve the collection and presentation of patient data are advised to seek the advice and approval of their hospital Caldicott Guardian, research and development department or audit committee. If patients are directly involved in surveys and data collection is not part of routine care, ethical approval is likely to be necessary. In such cases authors are advised to contact their local research ethics committee.

5. Case Reports

For case reports, efforts should be made to protect the anonymity of patients. Written consent to presentation and publication must have been given (signature of the patient following an explanation that states they understand that, and agree to, their case being presented anonymously at a post-graduate educational meeting and/or appearing in a journal and on-line). The International Journal of Obstetric Anesthesia has a consent form than can be used. Presentation of a case series requires approval of the local Caldicott Guardian (or equivalent).

Notes

- Authors accepting an offer of poster presentation will automatically accept responsibility for uploading their ePoster presentation. Instructions for uploading and the deadline for doing so will be provided
- Abstracts without results and those in which the randomisation code has been broken to allow analysis before the study has finished (without interim analysis being part of the original design) may be accepted at the discretion of the Chair of the Assessors.
- In the case of a presentation by a trainee, the supervising author (or a nominated substitute) must be present during presentation of the abstract to answer any questions.
- Authors are advised to read the section on Submission Categories below before uploading their abstract

For Further Information See:

- Choice of trainee presenter
- Review and acceptance
- Results
- Publication
- Judging
- Award of prizes

Ethics and Consent: For human studies the authors should confirm that the research protocol was approved by a local institutional review board or ethics committee and that written consent was obtained from all subjects. For case reports subjects must not be identifiable and consent to publish must have been given *(signature of the patient, or next of kin, following a sentence that states they understand that, and agree to, their case being presented anonymously at a post-graduate educational meeting and/or appearing in a journal).*

View Abstract examples for each category

- Research
- Service Evaluation
- Quality Improvement
- Surveys
- Case Reports

For more information please email **OAA Abstracts**