



CANADIAN ASSOCIATION OF PAEDIATRIC SURGEONS

ASSOCIATION CANADIENNE DE CHIRURGIE PÉDIATRIQUE

## INSTRUCTIONS TO THE PRESENTERS FOR CAPS 2017!

1. Please register as soon as possible especially while the early bird registration rate is still available until August 31<sup>st</sup>, 2017!
2. **IMPORTANT:** please advise the members of your team travelling with you to register and arrange for accommodations/transportation. For trainees who are presenting at CAPS, the senior author must register and attend the CAPS meeting. Those CAPS members serving as CAPS sponsors of abstracts accepted for presentation must also register and attend.
3. Please visit [www.caps.ca](http://www.caps.ca) and follow the links to preliminary scientific presentation schedule to find the date and time of your presentation.
4. If you have any other questions, please do not hesitate to contact the CAPS Program Chair at [program@caps.ca](mailto:program@caps.ca)- please don't leave your questions to the last minute.
5. **Don't forget the prize for bilingualism and find innovative ways to insert French into your presentation or poster!**

The scientific sessions are tightly timed this year. The session moderators have strict instructions to follow the schedule closely and will enforce the time limits for all sessions. Be considerate of your fellow presenters and rehearse your presentation so you don't go overtime or else the discussion period will have to be shortened. The discussions have traditionally been productive and well received by the audience, and in many cases, the highlight of the presentations.

Presentations must be brought to the meeting to be loaded onto the main computer **BEFORE** the start of the scientific session. The presenters' ready room will be clearly identified on site. A non-encrypted memory stick is preferable for this purpose. You can direct any questions about the presentation to the Program Chair or the CAPS Meeting Coordinator, Mrs. Arlene Ein.

**NEW FOR 2017, 4-minute oral presentations:** For original papers, presenters will have **4 minutes** for their presentation. As this also includes introduction by the moderators, in reality, it is only ~3 ½ minutes. The presentation will be followed by **3 minutes** of discussion.

For video/technique reports, presenters will be allowed **4 minutes** for their presentation. As this also includes introduction by the moderators, in reality, it is only ~3 ½ minutes. There will be **3 minutes** of discussion.

**NEW FOR 2017, 2-minute poster presentations: THERE WILL BE NO PAPER POSTERS. ALL POSTER PRESENTATIONS WILL BE e-POSTER FORMAT.** For the 2-minute poster presentations, you are allowed **2 minutes** to present your e-poster. There will be **2 minutes** for discussion. We will also project your SINGLE SLIDE e-Poster in the poster hall to promote and increase visibility of your poster- for this you will need to provide the Program Chair with a SINGLE SLIDE summary of your e-poster (see below) for poster viewing during all coffee breaks throughout the CAPS meeting from Thursday, Oct. 5<sup>th</sup> through Saturday, Oct. 7<sup>th</sup>.

**BACK BY POPULAR DEMAND: Coffee Break e-Poster Wall Paper.** For all abstracts accepted for e-Poster presentation, please also provide 1 (ONE) PowerPoint slide with the following details- your poster number, poster title, authors, purpose of your study and results. The summary slide will be projected in the poster hall so please **use large font size, keep words to a minimum and be sure your poster number is easily found on the slide-** it will alert the viewer where to find your poster in the poster hall. Please send your PPT slide to the CAPS Program Chair, at [program@caps.ca](mailto:program@caps.ca). You will only have time to present the **key points** of your study in ONE slide.

Here is an example of a single slide summary for an e-Poster:

**Cumulative Radiation Dose in Esophageal Atresia (EA)  
Patients: A 10 Year Cohort Study- POSTER #12**



P Zamiara, KE Thomas, BL Connolly, E Lapidus-Krol, MA Marcon, PPL Chiu, Toronto, ON, Canada

**AIM**

1. Quantify Cumulative Effective Dose (CED) over the 1<sup>st</sup> 3 years of life for EA patients.
2. Identify the most significant contributors to cumulative dose.
3. Consider possible strategies for dose reduction.

**RESULTS**

- EA patients undergo 25 (median) diagnostic imaging studies in the first 3 years of life with a **median CED of 10.9 mSv (range 0.1 to 60 mSv)**-moderate dose but exposure during early infancy with increased radio-sensitivity.
- **Diagnostic fluoroscopy** studies account for nearly **70%** of radiation exposure.
- Raised awareness of radiation safety among referring physicians (pediatric surgery and gastroenterology) resulting in change of practice (avoid routine post-operative esophagrams).
- Underlines the importance of incorporating new dose-saving technologies into practice.

**Please note:**

- **ALL PRESENTERS are required to complete the form and disclose any conflicts of interest (COI) prior to the start of their presentations.** All presentations involving the names of any pharmaceuticals or medications must use only the generic names as per CPD requirements. Please read the detailed requirements and sample slides for COI and disclosures below. Please complete the disclosure form below and return to the CAPS Program Chair by email: [program@caps.ca](mailto:program@caps.ca)
- Presentations should be in **Microsoft POWERPOINT** format in English +/- French, but remember there will be a prize for bilingualism.
- **All videos must be embedded within the presentation file, not linked to another file.** Please also bring your separate link to the video to avoid the disappointing situation where the video does not load. All videos should be loaded on the main computer and tried before the beginning of the session.
- **The PC used for the meeting will not support Mac-based presentations**– please ensure the presentation is capable of being played on a PC.

Once again, thank you for your participation in 2017 CAPS Annual Meeting. I am convinced that we will have a great program thanks to the high quality of your research. I am looking forward to seeing you in Banff in October!

Priscilla Chiu, MD PhD  
Chair, CAPS Program Committee  
Division of Paediatric General and Thoracic Surgery  
The Hospital for Sick Children  
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## Disclosure Slides for Presenters:

SLIDE 1

### Faculty/Presenter Disclosure

- **Faculty:** [Speaker's name]
- **Relationships with commercial interests:**
  - **Grants/Research Support:** PharmaCorp ABC
  - **Speakers Bureau/Honoraria:** XYZ Biopharmaceuticals Ltd.
  - **Consulting Fees:** MedX Group Inc.
  - **Other:** Employee of XXY Hospital Group

SLIDE 2

### Managing Potential Bias

- [Explain how potential sources of bias identified in slide 1 has been managed]

## **2017 CANADIAN ASSOCIATION OF PAEDIATRIC SURGEONS ANNUAL MEETING**

### **Conflict of Interest Disclosure Form**

A Conflict of Interest may occur in situations where the personal and professional interests of individuals may have actual, potential or apparent influence over their judgment and actions. The intent of this disclosure requirement is to inform the audience of any bias that speakers may have, not to prohibit speakers from presenting.

**What to disclose:** All financial or 'in kind' relationships (not only those relevant to the subject being discussed) encompassing the previous two (2) years must be disclosed.

*"It is the presenter's responsibility to ensure the scientific validity, objectivity, and completeness of CPD/CME activities. Organizers and individual presenters must disclose to the participants at their CPD/CME events any financial affiliations with manufacturers of products mentioned at the event, or with manufacturers of competing products."*<sup>1</sup>

Presenters must ensure their presentations, and any recommendations, are balanced and reflect the current scientific literature. Unapproved use of products or services must be declared within the presentation. The only caveat to this guideline is where there is only one treatment or management strategy. Examples of relationships that must be disclosed include but are not limited to the categories detailed over the page.

#### **How to disclose**

Please complete the attached disclosure form and submit to the CPD/CME Provider or Planner prior to the start date of the event or program.

- Part 1 must be completed by all Speakers and Program Committee members.
- Part 2 must be completed by all Speakers.
- Indicate whether you are a Program Committee member, speaker, or both.
- Please PRINT your FULL name, sign and date the form.

**RCPSC** requires that disclosures are made either in the form of a slide, verbally, or by inclusion in written conference materials. Speakers who have no involvement with industry should inform the audience that they cannot identify any conflict of interest and include this declaration in their slides or written material. If a disclosure slide has not been included in a presentation, it must be inserted by the Program Committee.

Failure to disclose, or false disclosure, may require the CAPS Program Committee to replace the speaker. If you have any questions regarding conflict of interest disclosure when preparing your CME/CPD presentations, please contact your Program Committee Chair.

**Please PRINT the presentation name, date and your name before completing the declaration and returning to the CAPS Program Chair at: [program@caps.ca](mailto:program@caps.ca)**

<sup>1</sup> CMA Policy: Guidelines for physicians in Interactions with Industry. Approved 2007-Dec-01. <http://policybase.cma.ca/dbtw-wpd/Policypdf/PD08-01.pdf>

**2017 CAPS ANNUAL MEETING**

Date: \_\_\_\_\_

Title of Presentation (if applicable): \_\_\_\_\_

Check all that apply:  Faculty/Speaker  Program Committee Member**PART 1: All Speakers and Program Committee members must complete this part.**

Disclosure must be made to the audience whether you do or do not have a relationship with a commercial entity.

 I do **not** have an affiliation (financial or otherwise) with a pharmaceutical, medical device or communications organization. I **have/had** an affiliation (financial or otherwise) with a pharmaceutical, medical device or communications organization.

Complete the section below as it applies to you during the past two calendar years, indicating the commercial organization(s) and briefly explaining your affiliation.

	Speakers & Planning Committee members	Company/Organization	Details
<b>A</b>	I am a member of an Advisory Board or equivalent with a commercial organization		
<b>B</b>	I have a relationship with one or more for-profit organizations that are funders of this program		
<b>C</b>	I am a member of a Speakers' bureau		
<b>D</b>	I have received payment from a commercial organization (including gifts or other consideration or 'in kind' compensation)		
<b>E</b>	I have received a grant(s) or an honorarium from a commercial organization		
<b>F</b>	I hold a patent for a product referred to in the CME/CPD program or that is marketed by a commercial organization		
<b>G</b>	I hold investments in a pharmaceutical organization, medical devices company or communication firm		
<b>H</b>	I am currently or have participated in a clinical trial within the past two years		

**PART 2: Speakers only**

		Yes	No
<b>I</b>	I intend to make therapeutic recommendations for medications that have not received regulatory approval ("off-label" use of medication). You must declare all off-label use to the audience during your presentation.		

**Note:** The RCPSC and CFPC require faculty presentations to be consistent in their use of either generic names or both generic and trade names.

I, [PRINT FULL NAME] \_\_\_\_\_ have reviewed the declaration form instructions &amp; guidelines, and the information above is accurate. I understand that this information will be made publically available.

Signature \_\_\_\_\_ Date \_\_\_\_\_