

FNA Nursing Research and Evidence-Based Practice Conference

July 26, 2025 | Harry P. Leu Gardens, Orlando, FL

ABSTRACT GUIDELINES

Purpose: The purpose of this conference is to promote communication and dissemination of nursing research and evidence-based practice projects that are being conducted in diverse academic, clinical, and/or community settings throughout Florida.

Benefits/Values to Presenting Your Projects and/or Research:

- Develop your statewide reputation
- Associate your name with your specific topic/research/project
- Network and collaborate with other nurse researchers in your field
- Promote your research in academia/clinical/community settings
- Open up potential job opportunities
- Obtain feedback on your findings from peers, which may be helpful in developing or improving your future research work

Presenting your work is invaluable not only to the attendees who discuss the content with you but also for yourself because of the benefits and values this experience brings.

Eligibility

- Nursing research and evidence-based practice projects are eligible for podium and poster presentation.
- Research and evidence-based practice projects conducted in practice and/or as part of educational endeavors are eligible for podium and poster presentation.
- Research and evidence-based practice projects must be completed by time of submission to be eligible for podium presentations.
- In-progress and completed projects are eligible for poster presentations.
- Literature reviews and concept analyses and similar will be considered for poster presentations.
- Nursing students are eligible and encouraged to submit.

Abstract Format

Please read and follow all instructions carefully to ensure your abstract is accepted for review.

- **For blinded peer-review purposes, please place the last four digits of your social security number (or another four-digit code of your choosing) at the top of your abstract. Do NOT put your name on your abstract.**
- **Please comply with all requirements to ensure your abstract is submitted for peer-review.** Peer-review will be conducted by fairly and impartially by members of the FNA Research Special Interest Group (SIG). You may receive feedback on your abstract submission with your acceptance notification.

Document Requirements

Please follow all guidelines below to ensure your abstract is accepted for review.

File Type	The abstract must be submitted as a Word document (.doc or .docx). Do NOT submit a pdf.
Word Count	Abstracts should have a maximum of 300 words . Abstracts exceeding the maximum word count will NOT be reviewed . Titles are <i>not</i> included in word count. Headings <i>are</i> included.
Font	Abstracts should be typed in Times Roman font with a type no smaller than 12 point font.
Paragraph	The body of the abstract should be single spaced with double spacing between paragraphs. Left justify all paragraphs; do not indent to begin a paragraph.
Headings	If you would like to use headings, make sure you bold them. Heading examples such as Objective, Background, Methodology, Analysis, etc. may be used. <i>Headings are included in word count.</i>
References	You may provide a reference list on the second page of the abstract. <i>Reference lists are optional and are not included in the word count. You will not be penalized for not including references.</i>
Grant Citation	If the project or research was supported in full or in part by a grant, please cite the grant number and granting organization at the bottom of the abstract. This will not be included in the word count.

Abstract Submission Requirements

- Complete and submit your abstract, abstract submission form and biographical form to Alfaz Habiban at events@floridanurse.org **no later than Monday, May 5, 2025**.
- If there is more than one person presenting for either podium or posters, a biographical form must be completed for each presenter.
- Peer-review on all submitted abstracts will be conducted throughout May. Notification of acceptance will be no later than mid-June (person who submitted abstract will be officially notified via email).
- If your abstract is accepted, you will have until **June 30 to register for the conference** at www.floridanurse.org/events. **All podium and poster presenters are required to register for the conference.**
- If your abstract is accepted and you are unable to attend, please notify FNA staff as soon as possible.

Poster Presentations

- Poster size no larger than 4 ft. high x 8 ft. wide (48" x 96").
- Digital poster submission is NOT required.
- FNA will provide poster display boards and pins to hang poster.
- You can prepare a handout summarizing your work with key findings, links to more information, and providing your contact information. *Handouts are optional.*
- Practice in sharing your story... "Tell me about your project."
- Poster presenters are encouraged to stay for the entire conference.
- Poster presenters must register to attend the conference **no later than June 30.**

Podium Presentations

- Podium presentations will be between 30-60 minutes in length.
- Once notified of your podium acceptance, you must complete a continuing education learning objective form and submit **no later than June 30.** Objective forms will be provided with your notification of acceptance.
- PowerPoint presentations will need to be submitted **no later than Friday, July 18.**
- Podium presenters are encouraged to stay for the entire conference.
- Podium presenters must register to attend the conference **no later than June 30.**



2025 FNA Research & Evidence-Based Practice Conference Abstract Submission Form

Last Four Digits of Your Social Security # (or Chosen Blind #): _____

Title of Abstract/Research: _____

Presentation Format (Indicate Preference):

- ☐ Podium (*Research must be completed by time of submission*)
- ☐ Poster
- ☐ Either Podium or Poster

Abstract Category:

- ☐ Research / Evidence-Based Practice
- ☐ Literary Review / Concept Analyses

Name & Credentials of person submitting abstract: _____

Contact phone number: _____

Email address: _____

Name, Credentials, and Email Address for Each Presenter:

Name	Credentials	Email
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Affiliated Organization/Academic Institution: _____

Highest Nursing Degree Completed/Non-nursing Degree Completed/Student: _____

Remember to complete a Biographical Form for EACH presenter.

Submit to Alfaz Habiban at events@floridanurse.org.

Submission Deadline: May 5, 2025

Biographical and Financial Relationship Disclosure Form

Section 1 - Biographical Data

Name with Credentials: _____

Address: _____ City: _____ St: _____ Zip: _____

Telephone: _____ E-Mail Address: _____

Title: _____ Employer: _____

Title of Activity: _____

Date & Location of Activity: _____

Role in Educational Activity: ☐ Content Expert (Presenter) ☐ Reviewer (Planning Committee) ☐ Nurse Planner

Section 2 – Qualifications

Please describe your expertise and/or experience in the subject matter:

Section 3 – Financial Relationships

Please disclose **all financial relationships** that you have had in the past 24 months with ineligible companies (see definition below). For each relationship, enter the name of the ineligible company and the nature of the financial relationship(s), regardless of the potential relevance of each relationship to the education. There is no minimum financial threshold. **The Standards for Integrity and Independence require that we disqualify individuals who refuse to provide this information.** For questions, please contact Willa Fuller at wfuller@floridanurse.org.

Enter the Name of Ineligible Company	Enter the Nature of Financial Relationship	Has the Relationship Ended?
An ineligible company is any entity whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients. For specific examples of ineligible companies visit accme.org/standards	Examples of financial relationships include employee, researcher, consultant, advisor, speaker, independent contractor (including contracted research), royalties or patent beneficiary, executive role, and ownership interest. Individual stocks and stock options MUST be disclosed; diversified mutual funds do not need to be disclosed. Research funding from ineligible companies MUST be disclosed by the principal or named investigator even if that individual's institution receives the research grant and manages the funds.	If the financial relationship existed during the last 24 months , but has now ended, please check the box in this column.
		☐
		☐
		☐

☐ In the past 24 months, I have not had **any** financial relationships with any ineligible companies.

By signing, I attest that the above information is correct as of this date of submission.

Signature: _____ Date: _____

Biographical and Financial Relationship Disclosure Form

Section 1 - Biographical Data

Name with Credentials: _____

Address: _____ City: _____ St: _____ Zip: _____

Telephone: _____ E-Mail Address: _____

Title: _____ Employer: _____

Title of Activity: _____

Date & Location of Activity: _____

Role in Educational Activity: ☐ Content Expert (Presenter) ☐ Reviewer (Planning Committee) ☐ Nurse Planner

Section 2 – Qualifications

Please describe your expertise and/or experience in the subject matter:

Section 3 – Financial Relationships

Please disclose **all financial relationships** that you have had in the past 24 months with ineligible companies (see definition below). For each relationship, enter the name of the ineligible company and the nature of the financial relationship(s), regardless of the potential relevance of each relationship to the education. There is no minimum financial threshold. **The Standards for Integrity and Independence require that we disqualify individuals who refuse to provide this information.** For questions, please contact Willa Fuller at wfuller@floridanurse.org.

Enter the Name of Ineligible Company	Enter the Nature of Financial Relationship	Has the Relationship Ended?
An ineligible company is any entity whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients. For specific examples of ineligible companies visit accme.org/standards	Examples of financial relationships include employee, researcher, consultant, advisor, speaker, independent contractor (including contracted research), royalties or patent beneficiary, executive role, and ownership interest. Individual stocks and stock options MUST be disclosed; diversified mutual funds do not need to be disclosed. Research funding from ineligible companies MUST be disclosed by the principal or named investigator even if that individual's institution receives the research grant and manages the funds.	If the financial relationship existed during the last 24 months , but has now ended, please check the box in this column.
		☐
		☐
		☐

☐ In the past 24 months, I have not had **any** financial relationships with any ineligible companies.

By signing, I attest that the above information is correct as of this date of submission.

Signature: _____ Date: _____

Biographical and Financial Relationship Disclosure Form

Section 1 - Biographical Data

Name with Credentials: _____

Address: _____ City: _____ St: _____ Zip: _____

Telephone: _____ E-Mail Address: _____

Title: _____ Employer: _____

Title of Activity: _____

Date & Location of Activity: _____

Role in Educational Activity: ☐ Content Expert (Presenter) ☐ Reviewer (Planning Committee) ☐ Nurse Planner

Section 2 – Qualifications

Please describe your expertise and/or experience in the subject matter:

Section 3 – Financial Relationships

Please disclose **all financial relationships** that you have had in the past 24 months with ineligible companies (see definition below). For each relationship, enter the name of the ineligible company and the nature of the financial relationship(s), regardless of the potential relevance of each relationship to the education. There is no minimum financial threshold. **The Standards for Integrity and Independence require that we disqualify individuals who refuse to provide this information.** For questions, please contact Willa Fuller at wfuller@floridanurse.org.

Enter the Name of Ineligible Company	Enter the Nature of Financial Relationship	Has the Relationship Ended?
An ineligible company is any entity whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients. For specific examples of ineligible companies visit accme.org/standards	Examples of financial relationships include employee, researcher, consultant, advisor, speaker, independent contractor (including contracted research), royalties or patent beneficiary, executive role, and ownership interest. Individual stocks and stock options MUST be disclosed; diversified mutual funds do not need to be disclosed. Research funding from ineligible companies MUST be disclosed by the principal or named investigator even if that individual's institution receives the research grant and manages the funds.	If the financial relationship existed during the last 24 months , but has now ended, please check the box in this column.
		☐
		☐
		☐

☐ In the past 24 months, I have not had **any** financial relationships with any ineligible companies.

By signing, I attest that the above information is correct as of this date of submission.

Signature: _____ Date: _____