

7th Annual FNA North Central Region Conference
The Role of the Nurse in Emergency Preparedness

Saturday, April 14, 2018
8:00 am to 4:15 pm

The Villages in Gainesville
8000 N.W. 27th Blvd
Gainesville, FL 32606

Call for Abstracts

Research or Evidence-Based Project Poster Presentation
Abstracts do not need to be theme related

Submission Guidelines

Author Information: Name(s) with credentials, Institution/Affiliation, short bio (150 words max), and contact information (e-mail, phone number, and address).

Project Information: Title, Purpose, Methods/Implementation, Results, and Conclusion/Implications.

Format: Maximum words 250, 1-inch margins, 12 point font.

Submit electronically: BIO/Conflict of Interest Form. Form can be downloaded from www.floridanurse.org under the resource tab. It is also the second page of this document.

Submit electronically to: Stacia Hays at staciamarie@bellsouth.net

Deadline for abstract submission: Saturday, March 10, 2018

Final acceptance notification: Friday, March 16, 2018

Poster Presenters must register for conference

For further call for abstract information contact Vicki Sumagpang
vsumagpang@floridanurse.org

Conference Registration

FNA Members: \$50

Non-Members: \$75

Students \$25

Registration at the door: Fee will increase by \$15 at the door.

Registration Fee: Includes 2 meals and 6 CE hours (provider # 50-3103). **Form and registration online at www.floridanurse.org on North Central Region page**

Biographical Data Form

Check One or Both

Planner

Presenter

Name:

Degrees & Credentials:

If RN, indicate degree(s) in nursing: Diploma ADN BSN Other:

Home Address *OR* Business Address:

Telephone:

Ext:

E-Mail Address:

Present Position (Title):

Employer:

Planners: Describe your familiarity with the target audience:

Presenters: Describe your expertise with the subject:

Conflict of Interests for Presenters

ALL PRESENTERS MUST DECLARE ANY CONFLICTS OF INTEREST ON THIS FORM

Having an interest in an organization does not prevent a speaker from making a presentation, but the audience must be informed of this relationship prior to the start of the activity. *(If the applicant already has special forms to identify this, it does not need to be repeated on the bio form. Include the applicant's copy of the completed forms declaring vested interest.)*

I recognize that I must follow all guidelines and criteria regarding conflict of interest. Any real or perceived conflict of interest for a conference participant must be disclosed. For this purpose a real or apparent conflict of interest is defined as having a significant financial interest in a product to be discussed directly or indirectly during the presentation; being or having been an employee of a company with such financial interest and/or having had substantial research support by an industry to study the product to be discussed at the presentation.

I have no real or perceived conflicts of interest that relate to this presentation.

I have the following real or perceived conflicts of interest that relate to this presentation:

Signature:

Date: