

MedPécs2024

Information on the form and content requirements of abstracts

Below you have the option to submit your abstract, which must meet the following formatting requirements. Please read them carefully:

- The body of the abstract (excluding the title, authors, and keywords) should be a minimum of 500 characters and a maximum of 2500 characters (without spaces). Before submitting it in the form, we recommend verifying the character count using Word's character counter.
- Please note that the reference list is included in the character count in this case.
- Each presenter can submit one oral presentation and/or one poster abstract for the conference.
- We kindly ask you to adhere to the following structure: Introduction, Objective, Method, Results, Conclusion.

The research work discussed in the abstract should be presented and structured according to the following aspects:

- If the abstract includes a reference list, please ensure it follows the guidelines provided in this document.
- Acknowledgements and grant details should be indicated in the “ Acknowledgements, if applicable ” section.
- The title and topic of the abstract must match the title and topic of the oral presentation/poster to be presented at the conference.
- Please note that tables, diagrams, images, and figures are not permitted in the abstract.

Keep in mind that a maximum of two abstracts can be uploaded per author (one for an oral presentation and one for a poster).

We inform the authors that failure to meet the formal and content requirements may result in the rejection of the submitted abstract. Therefore, please pay special attention to these guidelines!

Guidelines for preparing the reference list:

- To ensure a more uniform appearance of the abstract book, please adhere to the following citation guidelines when preparing the reference list:
- References in the text should be indicated by numbers in ascending order in the following format: [1], [2].
- Please note that only references cited in the text may be included in the reference list.
- For online sources, the date of access must also be provided.

BOOK:

[1] Fonyó A. Az orvosi élettan tankönyve. Budapest: Medicina; 2011. p. 72-7.

BOOK CHAPTER:

[2] Davoren JB. Blood Disorders In: McPhee SJ, Lingappa VR, Ganong WF, Lange JD, editors. Pathophysiology of Disease. 2nd Ed. Stamford (USA): Appleton & Lange; 1997. p. 98-123.

JOURNAL ARTICLE (1-6 AUTHORS):

[3] Penalzoa A, Melot C, Motte S: Comparison of the Wells score with the simplified revised Geneva score for assessing pretest probability of pulmonary embolism in Thrombosis Research 2011;127:81-4.

JOURNAL ARTICLE (MORE THAN 6 AUTHORS):

[4] Nolan JP, Soar J et al. European Resuscitation Council Guidelines for Resuscitation 2010 Section 1. Executive summary. Resuscitation 2010;81:1219–76.

ONLINE SOURCES:

[5] Ouellette, Daniel R. Pulmonary Embolism. Medscape Reference. [Internet] 2018, January 18. [cited 2013 Feb 15.] Available from: <http://emedicine.medscape.com/article/300901-overview>.