Abstract Application 35th Annual NCoBC

to Accompany Abstract Submission



(must be completed)

Abstract Title:

Requested Category (please highlight or circle) (the NCBC reserves the right to re-assign the Category if necessary):

Category I: Breast Center Operations, Administration and Programs

Category II: Patient Care and Support

Category III: Breast Disease Diagnosis and Management

Subcategory:

(i.e. A. Nursing, 2. Innovative Nursing Roles)

Submission <u>Deadline: February 6th, 2026</u> (late submissions will <u>not</u> be accepted)

Definitions:

Abstract Submitter: The person submitting the abstract to the NCBC office. Abstract Primary Contact: The person whom the NCBC should contact concerning questions and scoring information about this abstract (if other than the Abstract Submitter).

Conference Representative: An author who will be attending the Conference and can present the poster based on the abstract at the Poster Session (if other than the Abstract Submitter)

The Abstract Submitter agrees that:

- 1. The authors own or otherwise have rights to the written summaries of research and/or observations ("Abstract") provided by you to the National Consortium of Breast Centers, Inc. (hereafter "NCBC").
- 2. The **Primary Contact** has the permission and authority to submit and make decisions on behalf of all authors and is identified on the abstract.
- 3. NCBC will not edit or modify the content of the Abstract without approval from the **Primary Contact** but may modify the format to fit the look and feel of the media on which it is displayed or distributed.
- 4. If accepted for presentation, the author(s) will create a poster based on the abstract to be displayed during the 35th Annual Interdisciplinary Breast Center Conference at the Huntington Convention Center in Cleveland, OH, from March 28– 30, 2026, and at least one of the authors (the 'Conference Representative") will attend the Poster Reception in the late afternoon/early evening on Saturday, March 28th, 2026, as the displaying author for this poster.
- 5. While not eligible for the category and trainee awards, abstracts reporting research conducted by commercial concerns may be submitted and, if accepted, will be presented in a designated section at the Poster Session. The abstract must describe original research that has not been previously published and must meet the deadlines listed above, and both the abstract and the poster must clearly indicate the source of the research being presented.
- 6. If the abstract is accepted and displayed at the Conference, the abstract and poster will be placed on the NCBC conference app.
- 7. To be eligible for poster display or to receive an award, at least one author must be a registered attendee for the conference by **February 28th**, **2026**.
- 8. This application will be sent in the same email as the abstract submission. The abstract must be submitted in a word document. Email to <u>NCBCabstracts@breastcare.org</u>
- 9. NCBC will identify 10-15 of our top peer reviewed submissions to be published in the European Journal of Breast Health. Click here to review and learn more about the journal https://www.eurjbreasthealth.com/

Abstract Submitter: If submitter is a trainee, please also complete the Fellow/Resident/Student Application below):

Please Identify Abstract Primary Contact (if other than submitter):

| Printed Name | Da | ate |
|---|------|------------------|
| Signature | | hone (work) |
| Email | _ Ph | none (work/cell) |
| Institution/Facility | | |
| City, State, Zip | | |
| | | |
| <u>Conference Representative (if other than submitter):</u> | | |
| Printed Name | | |
| Is this abstract being submitted by a commercial concern? | Yes | No |
| If Yes, name of company | | |
| | | |

Abstract and Poster Requirements can be viewed at <u>www.breastcare.org</u>.

Required Information

Initial here if you are open to the CHANCE to be published in the European Journal of Breast Health

**To have a poster at the NCoBC Conference you must be 21 years of age or be traveling with someone willing to be responsible to help get you checked into your hotel room. **

Check the box that you are in:

_____I am over the age of 21

_____ I am under the age of 21 but can confirm I will travel with someone at least 21 years of age.

Fellow/Resident/Student Award Application

The trainee whose abstract submission receives the highest score will be the recipient of the Fellow/Resident/Student Award.

Applicant Requirements:

- 1. Shall be a graduate student, medical student, resident, or clinical or postdoctoral fellow in an official training program at an academic institution and not a previous recipient of this award.
- 2. Shall follow all Abstract and Poster Requirements.
- If chosen as the winner of the Fellow/Resident/Student Award, will make a brief (3-5 minutes) presentation of the findings summarized in the abstract at the Poster Reception on Saturday March 28th, 2026 during the 34th Annual Interdisciplinary Breast Center Conference at the Huntington Convention Center in Cleveland, OH, from March 28– 30, 2026.
- 4. In addition to the Fellow/Resident/Student Award winner, up to three additional abstracts submitted by trainees may be selected for presentation at the Oral Abstracts Plenary Session.
- Will create a poster based on the Abstract to be displayed during the Conference from March 28– 30, 2026 and will attend the Poster Reception on Saturday, March 28th, 2026, as the displaying author for this poster.

Submissions:

1. Submit an "in-training" status letter from his/her program director with this form. This document, the "in-

training" letter and abstract must be sent in the same email. *The abstract must be submitted in a word document. Email to <u>NCBCabstracts@breastcare.org</u>.*

2. Submit an abstract by midnight PST on February 6th.

The Award Recipient:

- 1. Will receive Complimentary General Conference Registration; and
- 2. Will be presented a \$200.00 check at the conference to help offset traveling expenses.

Resident/Student Award Applicant:

| Printed Name | Date |
|--------------|-------------------|
| Signature | Phone (work) |
| Email | Phone (work/cell) |