All questions marked by an asterisk are required

**Event Name:**

2023 Research Day Qualitative Abstract Submission

This form is for those wishing to submit an abstract for a walking poster or oral presentations that pertains to a **qualitative** research project. If you are submitting quantitative or evidence-based practice abstracts, please use that specific form. ***Once you start filling out the online abstract submission, you CANNOT save it and return later. You must be prepared to complete the submission in one attempt.*** We recommend having all of the required information prepared ahead of time so you can copy and paste it into the form.

When submitted, this form will be sent to the Methodist Nursing Research Council for review. Abstracts will be saved and you will be contacted with invitations to present based on the focus of events, relevance of topic, and other considerations.

Questions regarding this form or process should be referred to pd@methodistcollege.edu.

Guidelines for **Qualitative** Abstract Submission

**You will need to provide the following information regarding your abstract:**
\* Clear Research Question (or hypothesis, consistent with purpose and aims)
\* Background and Significance (describe the knowledge base presenter is building on, importance of the study purpose, aims)
\* Design (state type of study)
\* Setting
\* Sample
\* Methods (method of data collection and method of data analysis)
\* Results (describe analytic findings; preliminary data analysis may be presented, though analysis should be completed and presented at the conference)
\* Implications for practice (describe the meaning of findings, practice implications/application, implementation for future research)
\* Minimum of three key references that support your project

\* Deadline to apply is June 12, 2023.

\*First Name:



\*Last Name:



\*Please provide your professional credentials. If none, type NA or none.:



\*Email Address (not a student/school email address):

\*Retype Email Address (not a student/school email address):

\*Please provide the name(s) and credentials for co-authors who will be presenting with you at Research Day. If none, type N/A.:



\*Preferred phone number.:



\*Discipline(s) of team members. Select all that apply.:

 Nurse
 Mental Health Practioner
 Social Worker
 Respiratory Therapist
 Pharmacist
 Sonographer/Radiology Technician
 Physician
 Therapy (OT, PT, Speech, Recreation)
 Other

\*Name of Facility Where Employed:



\*Is this presentation/poster a requirement of your educational program?

 Yes
 No

\*Was your research conducted through Methodist Health System as part of a master’s/doctoral program at another school?

 Yes
 No

\*What type of presentation are you applying for? An oral presentation is a 20-30 minute discussion of your poster/research. A poster is a 5-10 minute synopsis of your poster/research. Both will be scheduled and you will be expected to present at that time.

 20-30 minute IN PERSON oral presentation
 20-30 minute VIRTUAL oral presentation
 5-10 minute IN PERSON poster presentation
 5-10 minute VIRTUAL poster presentation


\*Abstract Title:



\*Clear Research Question (or hypothesis, consistent with purpose and aims):



\*Background and Significance (describe the knowledge base presenter is building on, importance of the study purpose, aims) :



\*Design (state type of study):



\*Setting:



\*Sample:



\*Methods (method of data collection and data analysis):



\*Results (describe analytic findings; preliminary data analysis may be presented, though analysis should be completed and presented at the conference):



\*Implications for Practice or Education (describe the meaning of findings, practice implementation/application, and implications for future research):



\*Please provide a minimum of 3 key references that support your project.:



Additional comments or information. Please provide any other information that would be helpful related to this project.:



Please disregard the "Save Information" checkmark box option below. It is valid *only* for course registration and **WILL NOT SAVE** your abstract.

Save Information:

  {Checking this option will save your information for future registrations}

 Click this link to fill out and SUBMIT your form! [Abstract Submission Website](https://reg.learningstream.com/reg/event_page.aspx?ek=0009-0021-48a3cee446b54a2d83d82c55d76c9cf0)