Abstract should contain/address the following section:

Background: Address the scientific background and rationale for the study as well as the public health significance of the subject. Because of the anticipated diversity of the reviewers and those attending the conference, do not assume that everyone will be familiar with your research topic. Explain why your study is important and what question(s) it will answer. Market your topic.

A clearly stated background sets the stage and describes the objective of the study. For example

i) An outbreak of a disease is detected and a study is requested to respond to one or all of the following: identify etiologic agent, determine means of propagation or transmission, and establish appropriate control measures.
ii) Data from a surveillance system suggests the need for field study or further analysis.
iii) A survey is conducted to determine risk factors or population affected by given public health problem (for example: dengue, tobacco use, prevalence of illness, access to prevention intervention).
iv) Public, politicians or media concern with specific health problem. Previous studies suggested the need for further investigation of health-related problem.

Public health significance is commonly determined by the following criteria:

i) Severity of the problem (for example: high mortality rate, case fatality rate, years of potential life lost, disability adjusted life years)
ii) Frequency (for example: high morbidity rate, high morbidity or risk factor prevalence rates among special populations)
iii) Epidemic potential (for example: known to be high, or new disease with unknown potential)
iv) Preventability (for example: whether effective interventions are available or existing ones could be applied to new risk factors or disease)
v) New disease, risk factor, or intervention

Methods: State the scientific rationale and describe the methods selected for the study. Essential points to be included in this section are:

i) Study design (for example: prevalence survey, case-control, cohort, analysis of surveillance data, ecologic study)
ii) Study setting (for example: community, clinic, hospital, care centre)
iii) Study population and means of selection to study (for example: target population, case definition, sample strategies, inclusion or exclusion criteria if relevant)
iv) Analytic and or intervention techniques

Results: Present only the major quantitative and qualitative epidemiological findings (positive or negative) of the study that are directly related to the study objectives and conclusions. This section does not include discussion of the results, conclusion, or recommendations. Essential points to be included in this section are:

i) Description (for example: time, person, and place distribution of variables under investigation)
ii) Measures of risk (for example: rates) and measures of association (for example: odds rations, risk ratios, or measures of population impact such as attributable and prevention fraction)
iii) Include confidence intervals or level of significance of statistical tests (as appropriate for important measures of association)

Conclusion: Discuss the result of your study and their consistency (or lack thereof) with findings from other studies. Show how your conclusions are directly derived from the discussion of your study results and the scientific basis of your recommendations. Do not restate data included in the results. To enrich the discussion section of your study, you can

i) Read the scientific literature of your topic and reports of studies similar to your study
ii) Copy your report and discuss your study result with subject matter experts
iii) Make an oral presentation to your peers and experts before preparing and submitting your abstract

Report on the public health actions that are recommended and/or have been implemented as a consequence of the study, such as

i) Initiating or enhancing prevention or other public health program activities (for example: increase immunization coverage, introduce a new vaccine, outreach)

Formatting

Use Microsoft Word, Times New Roman font size 12. Abstract may not exceed 2,300 characters (with spaces) in length. This character count includes the subheadings of the structured abstract (Background, Methods, Results, Conclusions) but does not include the title, author list and information in the heading (the identification block) or key words. A word count is easily obtained by selecting the appropriate text of the abstract and then choosing the “Word Count” command in the “Tools” menu of Word.

Save each abstract as a separate file and use the following naming for each of the files: Last Name_abs.doc (e.g: william_abs.doc). If you are submitting more than one abstract (such as two abstract and disclosure forms), use your last name, the appropriate characters, and a number to distinguish the various files (such as white_abs1.doc, white_abs2.doc, etc).

No graphics can be accepted.

Typing

1. Identification: block-type the following, left aligned, single-spaced

- Presenter’s / first author’s name (last name, first name, middle initial), degrees, complete mailing address (institution), complete office telephone number and email.
- Number of abstract submitted: ___ If more than one, priority of this abstract: ____

- If you are submitting more than one abstract, indicate the priority of each one (such as first, second, etc)

2. Authors names: type flush left
   - First author (presenter). Type full first name and middle initial, if any, before the last name (such as: Stephen W. White)
   - Co-authors: List each co-author in order of contribution by typing one initial followed by the last name (such as: W. Black, M. Previte)
   - First author's and co-authors' organizational affiliation
3. Abstract title: type flush left, in bold font
   - Be brief. Avoid subtitles if possible
   - Capitalize major words only. Capitalize the second component of hyphenated terms
   - Do **NOT** use abbreviations or acronyms in the title of your abstract(s)
   - Give geographic location (country, state, or city) and dates of study or investigation. Do not abbreviate geographic locations; separate them from the rest of the title by an "en" dash, such as **"Rubella Outbreak – Uganda, 2007"**
4. Body of the abstract
   - Double-space text in the body of the abstract
   - Justification: left-aligned only
   - Structure the abstract, using the following subheadings to identify each section: Background, Methods, Results, Conclusions. Each subheading should be typed flush left, in bold font, and followed by a colon.
   - The Background section addresses both 1) the subject, and 2) the scientific background and rationale for the study
   - Since an abstract is a citable document, the Results section must contain data. It should not include such statements as "Data will be discussed." If considerable work is needed before the conference, state in the abstract that result are preliminary.
   - Changes cannot be made to the final abstract after it is submitted. You may find, however, the results and conclusions of the study do change based on data analysis done after submission of the abstract. If your abstract is accepted and significant changes have been made after submission of the abstract, highlight the changes in your presentation.
5. Key words:
   - Include 4 – 6 words. Use terms listed in the Medical Subject Headings (MeSH) from the Index Medicus (www.nlm.nih.gov/mesh/meshhome.html)

Style Guidelines

- Define all other abbreviations upon first use in the abstract, such as oral contraceptives (OC), except for those used in standard measurements, such as 25 mg/L.
- Use an en dash" – " with no spaces between characters for a dash, such as "providers in the area–physician, nurse …"-
- Spell out numbers fewer that 10 except in the case of standard measurements such as time, dose and temperature such as "two patients," but "2 cc" and "9 p.m."

- Use metric units. Show conventional terms, if desired, in parentheses, such as "0^{o}C (32^{o}F)"
- Use standard "ml," "cm," etc. Exception: use "L" for liter.
- Use "%" with specific measurements, such as "2%," but use "percentage" in stating a generality or category, such as "The percentages reflect …."
- When a percentage is given in addition to a numerator and denominator, the percentage should directly follow the numerator and be enclosed in parentheses, such as "18 (86%) of 21 patients developed …."
- When presenting confidence intervals, state the confidence level and confidence coefficient in the upper and lower limits, such as (95%CI=1.32–13.3)