



# NAPCRG Annual Meeting Call for Papers Submission FAQ

## WHERE DO I SUBMIT MY PROPOSAL?

[submit.napcrg.org](http://submit.napcrg.org) to submit your presentation.

## HELP! I CAN'T LOG IN!

Go to [napcrg.org](http://napcrg.org), click Member Portal in the upper right corner and then Forgot Password to reset your password. After you have completed a password reset, return to napcrg.org and login to create your submission. If you're still having trouble, email [napcrgoffice@napcrg.org](mailto:napcrgoffice@napcrg.org).

## WHAT IS THIS SALESFORCE SCREEN, AND SHOULD I GRANT ACCESS?

Yes, the screen is safe. You will only be asked for this one time. It is required because our submission system runs through a different program, but it uses your member account (which is in Salesforce) to link your login.



## WHAT FIELDS ARE REQUIRED FOR A SUBMISSION TO BE COMPLETE?

Questions with a **red asterisk \*** must be answered for the submission to be considered complete. Incomplete submissions **WILL NOT** be reviewed and will not be considered for the conference.

## HOW DO I KNOW WHEN MY SUBMISSION IS COMPLETE AND READY FOR REVIEW?

Once you have submitted your proposal, your submission details will appear on the screen. Please review this carefully. **Be sure to confirm the "Submission Completed" status.**

**GOOD TO GO:** When all required fields have been completed, your submission will be shown as: **Submission Completed: True**

53rd NAPCRG Annual Meeting	
Submission ID:	7355
Title:	Test
Category:	Oral Presentation On Completed Research
Role(s):	SUBMITTER
<b>Actions:</b>	
View	Update Participants
Withdraw	Edit
Submission Completed: <b>True</b>	

**NOT GOOD TO GO:** When a required field is missing, your submission will be shown as:  
**Submission Completed: False**

53rd NAPCRG Annual Meeting

Submission ID: 7355  
Title: Test  
Category: Oral Presentation On Completed Research  
Role(s): SUBMITTER

Actions:

[View](#) [Update Participants](#) [Withdraw](#) [Edit](#)

Submission Completed: **False**



Click the blue pencil next to "Edit Submission" to complete the missing fields.

**You MUST complete the missing fields or else your submission will be considered incomplete and NOT reviewed for consideration.**

## HOW DO I ADD CO-PRESENTERS/AUTHORS?

Participants can be added to the presentation once your submission is completed. A link to share with other presenters/authors will be visible in the displayed blue box (see image).

Follow these instructions and provide the indicated information to other presenters/authors:

### Invite Co-Author(s) to Submission

Copy the text in the blue box and email it to the co-author(s) that you want to include on this submission. This text contains all required information needed for the invitees to join the submission.

Please follow the link <https://submit.napcrg.org/Presenter/AddParticipant?SubmissionId=7355> to add yourself to the 53 rd NAPCRG Annual Meeting submission "Test".

If you do not have an account you will need to create one by clicking "Create a New Account" on the login page. Once the account is created re-visit <https://submit.napcrg.org/Presenter/AddParticipant?SubmissionId=7355>

Once logged in you will be directed to select your role of "Co-Author" or "Lead Presenter" and complete a disclosure if it is not up to date.

**HOW DO I ADD, CHANGE, AND REORDER CO-PRESENTERS/AUTHORS?** Participants can be added to the presentation once your submission is completed. Log in to [submit.napcrg.org](https://submit.napcrg.org), find the appropriate submission and select Update Participants. Copy the unique link the blue box and email this link to presenters/authors (see image).

### Invite Co-Author(s) to Submission

Copy the text in the blue box and email it to the co-author(s) that you want to include on this submission. This text contains all required information needed for the invitees to join the submission.

Please follow the link <https://submit.napcrg.org/Presenter/AddParticipant?SubmissionId=7355> to add yourself to the 53 rd NAPCRG Annual Meeting submission "Test".

If you do not have an account you will need to create one by clicking "Create a New Account" on the login page. Once the account is created re-visit <https://submit.napcrg.org/Presenter/AddParticipant?SubmissionId=7355>

Once logged in you will be directed to select your role of "Co-Author" or "Lead Presenter" and complete a disclosure if it is not up to date.

**Please note:** All authors and presenters will need to create a NAPCRG account (if they don't already have one) to add themselves to the submission. Each presenter will need to fill out a disclosure form when adding themselves; therefore, the NAPCRG staff is unable to add authors to submissions.

**TO CHANGE ROLES:** Submitters will need to log in to submit.napcrg.org, find the appropriate submission, click on the update participant order box, remove the individual from the submission then request they add themselves to the submission with their correct role using the unique link.

**TO REARRANGE THE PARTICIPANT ORDER:** Submitters will need to log in to submit.napcrg.org, find the appropriate submission and click on the update participant order box. The NAPCRG staff recognizes the importance of the participant order; therefore we are unable to rearrange on behalf of the submitter.

## ROLE DESCRIPTIONS AND PERMISSIONS

**Submitter:** The individual entering the data into the submission system.

- Permissions: View/Edit/Withdraw the submission, update the participant order, remove a participant.

**Lead Presenter:** The individual leading the presentation at the conference.

- Permissions: View/Edit/Withdraw the submission, update the participant order.

**Co-author:** An individual who contributed to the submission or is co-presenting.

- Permissions: View the submission.

# Annual Meeting Submissions, screen by screen

These are some the screens you'll encounter on all submission forms as you go through the submission process:

## PAGE 1

### Select Submission Category

Conference: 53 rd NAPCRG Annual Meeting

Learn more about the submission categories here: <https://www.napcrg.org/conferences/annual/call-for-papers/>

There is a \$25 fee to submit

Select the Submission Category

- Select -

SAVE AND CONTINUE

CANCEL

## CATEGORY OPTIONS

### Select Submission Category

Conference: 53 rd NAPCRG Annual Meeting

Learn more about the submission categories here: <https://www.napcrg.org/conferences/annual/call-for-papers/>

There is a \$25 fee to submit

Select the Submission Category

✓ - Select -

Forum

Oral Presentation On Completed Research

Preconference Workshop

Workshop

Poster On Completed Research

Poster On Research In Progress



**YOU ARE ABLE TO SUBMIT  
YOUR PROPOSAL EVEN IF  
YOUR RESEARCH IS NOT  
YET COMPLETED.**

# PAGE 2

## Submission Role Definitions

**Submitter-Only:** Not a participant in the presentation. Used for submitting on behalf of someone. Submitter Only is NOT listed in conference materials.

**Submitter and Lead Presenter:** The lead in giving the presentation.

**Submitter and Co-Author:** A contributor to the submission.

## Select Your Role on Submission

- Select -

Title (125 characters including spaces - DO NOT use all capitals)

Chars Remaining 125

The abstract should be no longer than 2,500 characters in a single paragraph with the following subheadings: Context, Objective, Study Design and Analysis, Setting or Dataset, Population Studied, Intervention/Instrument, Outcome Measures, Results, Conclusions. See <https://www.napcrg.org/conferences/annual/call-for-papers> for more information. Include ONLY the abstract. Do not include title or author(s).

Abstract (2,500) characters including spaces

Chars Remaining 2500

**SAVE AND CONTINUE**

**CANCEL**

**\*PLEASE KNOW ALL SUBMISSION FORMS WILL  
ASK FOR A TITLE AND AN ABSTRACT BEFORE  
YOU ANSWER THE REST OF THE QUESTIONS.**

# PAGE 3

## Submission Created

Next Step: Create submission proposal. The submission proposal consists of category specific questions.

[CONTINUE SUBMISSION PROPOSAL](#)

### Submission Details

Conference: 53 rd NAPCRG Annual Meeting

Category: Oral Presentation On Completed Research

Submission Id: 7355

Title: Test

### Submission Abstract

Test Submission

# PAGE 4

Conference: 53 rd NAPCRG Annual Meeting

Category: Oral Presentation On Completed Research

Submission Id: 7355

Submission Title: Test

**Instructions:** Answer the questions below and then click on the Save and Continue button. Questions with a red asterisk MUST be answered or your submission will NOT be considered complete and, therefore, NOT considered for submission.

Notifications about whether or not your abstract has been accepted will be sent out in late June.

**Purpose:** Presentations in this category that are accepted will be grouped into sessions based on the selected Research Category (below). A limited number of high-impact, high-quality oral presentations will be selected for presentation in a special format as a "Distinguished Paper".

\* Please briefly describe what is uniquely interesting or impactful about your study? (Character limit including spaces: 150)

**Learning Objectives:** Clear and understandable learning objectives are REQUIRED to qualify for Continuing Education (CE) credit. Your submission will be excluded from CE credit if these are not clear. Please list two learning objectives using these guidelines:

- Clearly describe what you want learners to take away and implement after the session in active, measurable terms (e.g. - define, interpret, explain, apply).
- Each objective must be specific, concise, and limited to one sentence.
- Example - "On completion of this session, participants should be able to identify and describe the three primary tenets of the Patient Self-Efficacy Model."

\* First Objective: On completion of this session the participants should be able to... (Character limit including spaces: 300)

\* Second Objective: On completion of this session the participants should be able to... (Character limit including spaces: 300)



THE LEARNING  
OBJECTIVES ARE VERY  
IMPORTANT FOR  
CREDIT QUALIFICATION

## PAYMENT

After completing your submission form, you will be directed to a page for payment. Please enter your payment information then scroll down and click "Submit."

### Submission Payment

Please enter all the information below to pay the \$25.00 submission fee. If you do not pay the submission will not be reviewed. Visa, MasterCard and American Express are accepted.

Billing First Name

Billing Last Name

Billing Street Address

Billing City

Billing Zip Code

Credit Card Number

## CONFIRMATION

You will know that your submission is considered for the Annual Meeting when it is marked as "**True**." If you see it marked as "**False**," there is a question that was left unanswered. You can go back and edit your questions until the deadline.

### My Current Submissions

 [View All My Submissions](#)

**53rd NAPCRG Annual Meeting**

Submission ID: 7355  
Title: Test  
Category: Oral Presentation On Completed Research  
Role(s): SUBMITTER

**Actions:**

 [View](#)    [Update Participants](#)    [Withdraw](#)    [Edit](#)

Submission Completed: **True**  **Make sure this shows as "True"**

## ADDING CO-AUTHORS AND PRESENTERS

To add co-authors and presenters, you will first want to click on "Update Participants."

### My Current Submissions

[View All My Submissions](#)

53rd NAPCRG Annual Meeting

Submission ID: 7355  
Title: Test  
Category: Oral Presentation On Completed Research  
Role(s): SUBMITTER

Actions:

[View](#) [Update Participants](#) [Withdraw](#) [Edit](#)

Submission Completed: True

**To add co-authors, first click on "Update Participants"**

Then copy the blue instructions and share them with your colleagues you want to add to the submission. They will be able to follow the instructions to add themselves as co-authors or presenters. If you are experiencing difficulties, please email question to [conference@napcrg.org](mailto:conference@napcrg.org).

### Update Participants

Conference: 53 rd NAPCRG Annual Meeting  
Category: Oral Presentation On Completed Research  
Submission Id: 7355  
Submission Title: Test

#### Invite Co-Author(s) to Submission

Copy the text in the blue box and email it to the co-author(s) that you want to include on this submission. This text contains all required information needed for the invitees to join the submission.

Please follow the link <https://submit.napcrg.org/Presenter/AddParticipant?SubmissionId=7355> to add yourself to the 53 rd NAPCRG Annual Meeting submission "Test".

If you do not have an account you will need to create one by clicking "Create a New Account" on the login page. Once the account is created re-visit <https://submit.napcrg.org/Presenter/AddParticipant?SubmissionId=7355>

Once logged in you will be directed to select your role of "Co-Author" or "Lead Presenter" and complete a disclosure if it is not up to date.



**Share this information in blue with your colleagues to have them add themselves to the submission.**

# COMPLETE YOUR DISCLOSURE IF NEEDED

## Disclosure

Every presenter is required to fully disclose any relevant financial interest or other relationship with the commercial supporter(s) of this educational activity or with the manufacturer(s) of any commercial product(s) and/or providers of commercial services discussed in this educational activity including 1-year prior to and/or 1-year following conference presentation(s).

Every presenter is also required to fully disclose when an unlabeled use of a commercial product, or an investigational use not yet approved for any purpose, is discussed during an educational activity.

### Disclosure of Financial Relationships

**Part I:** Check either A or B. You must check only one button. **Required \***

- A. Neither I nor my immediate family has a financial relationship or interest in any commercial interest producing, marketing, re-selling, or distributing health care goods or services consumed by, or used on, patients
- B. I have or a member of my immediate family have a financial relationship or interest in any commercial interest producing, marketing, re-selling, or distributing health care goods or services consumed by, or used on, patients

**Part II:** If you checked B above, please list all entities and nature of relationship with each, e.g., research grants, stock or bond holdings, employment, ownership or partnership, consulting fees, other remuneration (honoraria, travel expenses, etc)

### Disclosure of Unlabeled/Investigational Uses of Products

**Part III:** Check either A or B. You must check only one button. **Required \***

- A. The content of my material(s)/presentation(s) in this CME activity WILL NOT include discussion of unapproved or investigational uses of products or devices.
- B. The content of my material(s)/presentation(s) in this CME activity WILL include discussion of unapproved or investigational uses of products or devices as indicated below.

**Part IV:** If you checked B above, please describe the unapproved or investigational uses of products or devices that you will discuss in your material(s)/presentation(s):

# DISCLOSER PAGE, CONTINUED

## Disclosure of Speakers' Bureau

**Part V:** Check either A or B. You must check only one button. **Required \***

- A. Neither I nor anyone in my immediate family is a member of a speakers' bureau for a proprietary entity producing health care goods or services.
- B. I am or a member of my immediate family is a member of a speakers' bureau for a proprietary entity producing health care goods or services.

**Part VI:** If you checked B above, please describe the involvement with the speaker's bureau. For example, did you or a member of your immediate family receive training, travel for this training, did the company provide audio visual material, did the company pay any expenses, did the company provide an honorarium, consulting fee, or any other type of compensation?

## Acknowledgement

**Part VII:** I have read the policy on full disclosure. If I have indicated a financial relationship or interest, I understand that this information will be reviewed to determine whether a conflict of interest may exist, and I may be asked to provide additional information. I understand that failure or refusal to disclose, false disclosure, or inability to resolve conflicts of interest will require us to identify a replacement.

Type your full name in the space below to acknowledge that you will comply with our disclosure policy.

**SAVE**

**CANCEL**