



17th Annual Brain Injury Conference

February 7, 2025 | Beanfield Centre, Exhibition Place

Toronto Rehabilitation Institute's 17th Annual Brain Injury Conference Poster Abstract Submission Form

Due Monday November 15, 2024 (11:59 PM Eastern)

Author Information

**Primary Author
Full Name**

Title / Position

Credentials (e.g. BSc)

Organization / Affiliation

Mailing Address with Postal Code

Email Address

Phone Number

Biography *max 1,000 characters (includes spaces)*

Is the Primary Author listed above also the presenting author?

Yes

No (if no, please complete the following information for the presenting author)

Presenting Author

Full Name

Title / Position

Credentials (e.g. BSc)

Organization / Affiliation

Mailing Address with Postal Code

Email Address

Phone Number

Biography *max 1,000 characters (includes spaces)*

Please use the next section to include up to 5 additional authors. Any additional authors beyond 5, please email their information with your submission.

Additional Author 1

Full Name

Title / Position

Credentials (e.g. BSc)

Organization / Affiliation

Email Address

**Additional Author 2
Full Name**

Title / Position

Credentials (e.g. BSc)

Organization / Affiliation

Email Address

**Additional Author 3
Full Name**

Title / Position

Credentials (e.g. BSc)

Organization / Affiliation

Email Address

**Additional Author 4
Full Name**

Title / Position

Credentials (e.g. BSc)

Organization / Affiliation

Email Address

**Additional Author 5
Full Name**

Title / Position

Credentials (e.g. BSc)

Organization / Affiliation

Email Address

Additional Authors *please provide any additional author information here.*

Abstract Information

Abstract Title *max 400 characters (includes spaces)*

Abstract Theme *select one*

Mild TBI / Concussion

Mild - Moderate Brain Injury

Moderate - Severe Brain Injury

Topic of Interest *select all that apply to your abstract*

Best Practices

Innovation Profession Specific (e.g. OT, PT, SLP, Neuropsychology etc.)

Clinical Interventions

Clinical Research

Basic Research

Knowledge Translation

Applied Research

Other

Abstract Details

Purpose of Project *max 400 characters (includes spaces)*

Methods, Procedure, Results/Outcome, Conclusion *max 2,500 characters (includes spaces)*

Consent to Post on Website

Should your abstract be accepted at the conference for a Poster Presentation, do you consent to having your abstract made available on the conference website?

Yes

No

Terms and Conditions

Please read through the following information and confirm that you have read and understand all the conditions of submitting your abstract for the 17th Annual Brain Injury Conference for consideration.

Attendance and Expenses

At least one of the authors must be a paid registrant at the conference. Any author who wishes to attend or present must be a paid registrant.

Abstract authors are responsible for all expenses associated with creating and delivering your presentation including registration costs and any travel expenses.

Notification of Acceptance and Sharing of Materials

Those who have been selected for the 17th Annual Brain Injury Conference will be notified by email with further details. Accepted abstracts will be featured on the conference website and/or in the program book provided to all delegates. An electronic version of your presentation and/or handouts will be shared on the conference website with your consent.

Marketing of Products

The marketing of products through the 17th Annual Brain Injury Conference is prohibited.

I have read through and agree to the above terms and conditions.

Yes

No

Thank you for completing the abstract submission form. Please save the completed form to your device and send as an attachment, along with any additional author information, to conferences@uhn.ca.

If you have any questions or concerns about this form or the submission guidelines, please contact Conference Services at conferences@uhn.ca.