

SGH 25th Annual Scientific Meeting (ASM) Abstracts Resubmission Guide

Step 1:

Click on Resubmission of an abstract with changes to be made if you have already submitted an abstract previously for the SGH 25th ASM and would like to make changes to your abstract.

SGH 25th Annual Scientific Meeting (ASM) Abstracts Submission Form

1. Are you submitting a new abstract or resubmitting again with changes in your abstract?

- Submission of a new abstract
- Resubmission of an abstract with changes to be made

Submit now

Step 2:

After you have clicked on Resubmission of an abstract with changes to be made, the rest of the fields will appear. Tick the boxes for the fields that you have changes to be made. You may tick more than 1 change. Proceed to make changes only in the fields that you have selected. For areas with no changes to be made, please indicate N.A. in these fields.

1. Are you submitting a new abstract or resubmitting again with changes in your abstract?

- Submission of a new abstract
- Resubmission of an abstract with changes to be made

2. Changes of abstract submission to fields in:

You may tick more than 1 change.

Please proceed to make changes only in the fields that you have selected.

For areas with no changes, please indicate N.A. before submitting.

- Abstract Name
- Abstract Category
- Main Author's Information
- Co-Authors' Information
- Aims
- Methods
- Results
- Conclusion

Step 3:

Indicate the Original Abstract Title, Submitter's Name, Phone number and Email in separate lines in the text box for verification purposes.

3. Resubmission of abstract (Original Abstract Title and Contact Details of Submitter)

Please indicate Original Abstract Title, Submitter's Name, Phone number and Email in separate lines so that we can verify on the resubmission.

Step 4:

If there are changes to be made to the Abstracts Category, please indicate accordingly. If not, please select N.A. from the drop down selection.

3. Abstracts Category

- N.A.
- Best Poster Award - Allied Health
- Best Poster Award - Basic/Translational Research
- Best Poster Award - Clinical Research

Step 5:

If there are changes to be made to the Main Author's First Name and Last Name, please indicate accordingly. DO NOT include any degrees or professional titles (i.e. Prof, A/Prof, Dr. etc.)

If not, please indicate N.A. in the text box.

Do note that the Main Author would be the Presenting Author for the Oral and Poster Competitions. Kindly communicate with your team on who would be the Presenting Author before resubmitting the abstract.

4. Main Author First Name

The main author would be the presenting author.

Please DO NOT include degrees or professional titles (i.e. Prof, A/Prof, Dr. etc.).

5. Main Author Last Name

The main author would be the presenting author.

Please DO NOT include degrees or professional titles (i.e. Prof, A/Prof, Dr. etc.).

Step 6:

If there are changes to be made to the Main Author's Phone Number, please indicate accordingly.

If not, please indicate N.A. in the text box.

6. Main Author Phone Number

Step 7:

If there are changes to be made to the Main Author's Birthday, please select from the calendar accordingly.


If there are NO changes to the Main Author's Birthday, please indicate today's date (i.e. the date that you are resubmitting the abstract).

Do note that if you are resubmitting for Young Investigator's Award, the Main Author's age criteria would need to be 35 years or below on the first day of the meeting (i.e. 12 April 2024).

7. Main Author Birthday

If you are submitting for Young Investigator's Award, do note that the main author's age criteria would need to be 35 years or below on the first day of the meeting i.e. 12 April 2024.

For resubmission of abstracts, please indicate today's date (i.e. the date that you are submitting new changes) if there are no changes to the Main Author's Birthday.

12/04/1989 

Select a date ×

April ▼ 1989 ▼ < >

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23	24	25	26	27	28	29
30	1	2	3	4	5	6

Today

ent of Cardiology instead of Cardio Dept).

al Hospital instead of SGH)

Step 8:

If there are changes to be made to the Main Author's Email Address, please indicate accordingly. If not, please indicate N.A. in the text box.

8. Main Author Email Address

Step 9:

If there are changes to be made to the Main Author's Department, please indicate accordingly.
If not, please indicate N.A. in the text box.

Department name should be indicated in full (i.e. Department of Cardiology instead of Cardio Dept).

9. Main Author Department

Please indicate your department name in full (i.e. Department of Cardiology instead of Cardio Dept).

Step 10:

If there are changes to be made to the Main Author's Institution, please indicate accordingly.
If not, please indicate N.A. in the text box.

Institution name should be indicated in full (i.e. Singapore General Hospital instead of SGH).

10. Main Author Institution

Please indicate institution name in full (i.e. Singapore General Hospital instead of SGH)

Step 11:

If there are changes to be made to Co-Author 1's Name, please indicate accordingly.
If not, please leave the text box blank.

DO NOT include any degrees or professional titles (i.e. Prof, A/Prof, Dr. etc.)

11. Co-Author Name 1 (optional)

Please DO NOT include degrees or professional titles (i.e. Prof, A/Prof, Dr. etc.).

Step 12:

If there are changes to be made to Co-Author 1's Email Address, please indicate accordingly.
If not, please leave the text box blank.

12. Co-Author Email Address 1 (optional)

Step 13:

If there are changes to be made to Co-Author 1's Department, please indicate accordingly.
If not, please leave the text box blank.

Department name should be indicated in full (i.e. Department of Cardiology instead of Cardio Dept).

13. Co-Author Department 1 (optional)

Please indicate your department name in full (i.e. Department of Cardiology instead of Cardio Dept).

Step 14:

If there are changes to be made to Co-Author 1's Institution, please indicate accordingly.
If not, please leave the text box blank.

Institution name should be indicated in full (i.e. Singapore General Hospital instead of SGH).

14. Co-Author Institution 1 (optional)

Please indicate institution name in full (i.e. Singapore General Hospital instead of SGH)

Step 15:

If there are changes to be made to information for Co-Author 6 and more, select “Yes” to change more Co-Authors’ information.

If not, select “No”.

Repeat Steps 11 – 14 as necessary for any changes to information for Co-Author 6 and more.

31. Do you have more Co-Authors to add?

For re-submission, please select "Yes" if you have changes to be made for more Co-Authors' information. Otherwise, please select "No".

<input type="radio"/> NO	<input checked="" type="radio"/> YES
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32. Co-Author Name 6 (optional)

Please DO NOT include degrees or professional titles (i.e. Prof, A/Prof, Dr. etc.).

33. Co-Author Email Address 6 (optional)

Step 16:

If there are changes to be made to Aims, Methods, Results and Conclusion, please state them accordingly in the respective text boxes.

If not, please indicate N.A. in the respective text boxes accordingly.

Do note that the combined word count for the 4 areas should not exceed 350 words of text.

Do check through that all your symbols are correct before resubmission.

32. Aims

State Aim(s) of study.

Do note that the combined word count for Aims, Methods, Results and Conclusion should not exceed 350 words of text.

Do check through that all your symbols are correct before submission.

33. Methods

State Method(s) and subject used, as relevant.

Do note that the combined word count for Aims, Methods, Results and Conclusion should not exceed 350 words of text.

Do check through that all your symbols are correct before submission.

34. Results

Summarise Result(s) obtained.

Do note that the combined word count for Aims, Methods, Results and Conclusion should not exceed 350 words of text.

Do check through that all your symbols are correct before submission.

35. Conclusion

State Conclusion(s) reached. It is not satisfactory to state, "The result will be discussed."

Do note that the combined word count for Aims, Methods, Results and Conclusion should not exceed 350 words of text.

Do check through that all your symbols are correct before submission.

Step 17:

Tick the “I agree” box to indicate that the work is original and performed in the SGH Campus and has not been published at other meetings prior to the SGH 25th ASM.

If the work has been presented at other meeting, indicate the name of the meeting in the text box.
If the work has NOT been presented at other meeting, indicate N.A.

36. The work is original and performed in the SGH Campus and has not been published at other meetings prior to the SGH 25th ASM.

I agree

37. If the work has been presented at other meeting, please indicate the name of the meeting. If the work has NOT been presented at other meeting, please indicate N.A.

Step 17:

Tick the “I agree” box to consent accordingly for Questions 38 - 40.

Check through your information again before clicking on the “Submit” button.

38. I am working in the SGH Campus at the time of submitting my work

(*SGH Campus refers to SGH, NCC, NDC, NHC, NNI SGH Campus, SNEC, OCH, Outram Polyclinic and Duke-NUS GMS)

I agree

39. I agree to assign the copyright of the above paper to the SGH 25th ASM for publication purposes.

I agree

40. I agree to the Secretariat of SGH 25th ASM in collection, usage or disclosure of my personal data in compliance with SingHealth Personal Data Protection Act (PDPA) and all subsidiary legislation for the purpose of the conference, subsequent registration to and all other actions necessary in relation to the event.

I agree

Submit now