

Guidelines for Abstract Submission

General

Below are the guidelines for your abstract submission. Details are included in the form. Please ensure that your abstract submission follows these requirements.

Please make a note of the email and password you used to create your submission. If your submission is partial or you wish to revise before the deadline, you will need to use the login you created. Individuals may submit up to two abstracts as primary or presenting author.

Acceptance Categories and Information

Oral and Rapid Abstract Presentations

Clinical and Translational Research may be selected for oral presentation in either the Oral Abstract session or the Rapid Abstract session. If the lead author is unable to attend and present, a co-author may be designated to attend and present. All presentations are live in Boston to ensure that presenters are active in the session discussions. The presenter will be fully supported.

Trials in Progress (TIPS) Presentations

Clinical Trials in Progress may be selected for oral presentation in the TIPS session. If the lead author is unable to attend and present, a co-author may be designated to attend and present. All presentations are live in Boston to ensure that presenters are active in the session discussions. Trial presenters will have the option of providing a PDF poster to be displayed in our virtual poster gallery on the KCRS website. The presenter will be fully supported.

Poster Acceptances

Clinical and Translational Research may also be selected for Poster Acceptance. All accepted posters will be displayed in our PDF virtual poster gallery on the KCRS website. For those interested in attending the in-person meeting, you will have the option of providing a physical poster (24" x 36") for display and informally discussing your research during our Posters and Prosecco session at the end of the day on Thursday, July 11th. The meeting registration fee will be waived. Travel support is not available for poster acceptances.

Abstracts accepted for oral presentation and poster display will be published as a supplement in *The Oncologist* as well as included in KidneyCAN's abstract book to be maintained on the KCRS website.

Merit Awards

The selection of Merit Award recipients is made by the Abstract Committee based on scientific merit. Merit Award recipients will be recognized at the meeting and will be fully supported to attend KCRS24. The following Merit Awards will be made:

Track One: Basic Science

1. Highest Ranked Research from a Faculty Member
2. Highest Ranked Research from a Fellow
3. Highest Ranked Research from an Early Trainee (any stage below a fellow)

Track Two: Clinical

1. Highest Ranked Research from a Faculty Member
2. Highest Ranked Research from a Fellow
3. Highest Ranked Research from an Early Trainee (any stage below a fellow)

Applicants must meet the following criteria to be considered for a Merit Award:

- Be the First Author on the abstract submission and agree to present the abstract in person if selected for presentation at KCRS24
- If a Fellow or Early Trainee, provide the contact information of training program director, faculty advisor, or mentor who can confirm eligibility
- Provide a curriculum vitae

To be considered for a Merit Award, check the box next to “I would like my abstract to be considered for a Merit Award” under the “Are you applying for a Merit Award” question on the abstract submission form.

Deadline for Submissions

Deadline for submission: May 6, 2024.

Late breaking abstracts should also be submitted as a shell application by **May 6, 2024**, with final application including final data submitted by **July 1, 2024**. Applications will be reviewed and selected for presentation by the Abstract Committee.

Notifications will be sent by **June 7, 2024**, and for Late Breaking Abstracts by **July 1, 2024**.

If you wish to be considered for a Merit Award, please indicate and provide the requested information.

General Requirements

- Type the text unjustified without hyphenating words at line breaks.
- Use single line spacing. Use hard returns only to end headings and paragraphs.
- Abbreviations should be used as sparingly as possible and should be defined when first used.
- All abstracts must be in English. Spelling within any one abstract should be US English or UK English, but not a mixture.
- In most cases, Greek letters and other special characters will transfer from your word processing software via copy and paste functions. If you are unable to reproduce a particular special character, type out the name of the symbol in full.
- SI units should be used throughout (liter and molar are permitted, however.)

Title

The title must be entered exactly as it should appear and should be in sentence case. Do not put the title in quotes, underline it, or use punctuation. The title can be a maximum of 200 characters, including spaces.

Research Topic Category

All abstract submitters will be asked to indicate the primary category with which the abstract most closely aligns.

Kidney Cancer Research Summit 2024 will accept submissions in the following categories:

- Basic/Translational Research
- Clinical Research
- Trials in Progress
- Encore Presentation of Clinical Research

Abstract submissions with original data are preferred. One significant encore presentation may be selected for presentation. You have until the deadline on **May 6, 2024** to submit your encore abstract.

Submissions with late-breaking clinical data require a shell submission by May 6, 2024. The full submission for late-breaking abstracts is due no later than July 1, 2024.

Abstract Structure

The following is included in the abstract body and must not exceed 600 words total. One table, graph, or illustration is allowed and not included in the word count.

Background
Methods
Results*
Conclusions*

*For Clinical Trials in Progress, abstract submission results and conclusions are not required. Clinical Trials in Progress abstract submissions should include:

Trial Name and NCT number
Trial schema
Background
Significance and vision

Keywords

All abstract submitters will be asked to indicate keywords for their abstract.

Authors and Institutions

All authors and contact information must be listed in the correct order. The order in which authors will be listed in the author block of all publications is the order that they are entered.

Each author **MUST** indicate at least one institution affiliation. Affiliations should include Department, University, Town, State, USA OR Institution, Town, Country, for example.

There is no limit to the number of authors you can include.

Your submission needs to have a minimum of: one Corresponding Author, one Presenting Author, one Primary Author. These three roles may be fulfilled by the same individual. Each presenting author may submit no more than two abstracts.

The presenting author will need to submit Conflicts of Interest online. Usually a standard COI summary or a statement “No Relevant COI’s” will suffice but other information may be added to the submission form as needed.

The presenting author submitting an abstract must agree to the following:

- Serve as the contact for all correspondence about the abstract and inform co-authors about its status
- Confirm all authors are aware of and agree to the content and data presented in the abstract

- Verify the abstract is accurate and that permission has been obtained from all relevant parties
- Verify the abstract has not been published prior to KCRS24 or if previously published, contains significant new data, or is clearly labeled as “Encore Presentation.” TIPS which have been previously submitted at other meetings are acceptable.
- If this is Encore Clinical Data, indicate “Encore Presentation” in the Presentation Type question
- Agree to follow all media and press release policies set forth by KidneyCAN

Trial Registration

If applicable, abstracts related to clinical trials (RCTs) and Trials in Progress should include the trial registry along with NCT# or other unique identifying number.

Late-Breaking Abstracts

Late-breaking abstract submission is solely for abstracts with late-breaking data and not for abstracts submitted “late.” The late-breaking abstract deadline is not intended to be an extension of the general submission deadline. Late-breaking abstracts highlight novel and practice-changing studies, and only apply to data that would have not otherwise been presented as an abstract at KCRS24. Author’s request for consideration for late breaking data should document the reason.

Examples of acceptable late-breaking abstracts include the following (in each case, results were not available or significant by the regular abstract submission deadline):

- Results of a practice-changing prospective Phase III clinical trial
- Phase II study showing anti-tumor activity in a novel context
- An early clinical trial with novel proof-of-principle data

A shell abstract must be submitted by **May 6, 2024**, and submit a late-breaking abstract application by **July 1, 2024**. This application needs to include necessary abstract information (without results and conclusions) and incorporate the primary clinical endpoint for analysis, type of analysis, date of planned analysis, and planned statistical methods for analysis.

Contact

For further information, please contact:

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