

Guidelines for AMWA 2022 Call for Proposals

Enhance the likelihood of proposal acceptance by following these guidelines for developing Proposals for Education Sessions, Roundtable Discussions, and Posters at the 2022 AMWA Medical Writing & Communication Conference.

Overall Tips for Writing a Description

- Create an attention-grabbing, but relevant, title. Determine what is important to potential attendees and use your title to convey the usefulness and specificity of your presentation.
- Focus on the practical benefits to attendees. Emphasize how the presentation will help them do their job better.
- Highlight the problem to be solved. Conference attendees love presentations that help them solve a problem.
- Do not include bulleted lists in descriptions of Sessions or Roundtables.
- Ensure your description accurately reflects what you will present.
- Make every word and phrase count; avoid filler words and phrases (eg, “In this presentation, speakers will...”).
- Use the active voice.

Proposals: Education Sessions

Session Formats

Education Sessions allow presenters to share their expertise on a specific topic of interest to medical communicators in a distinct professional setting or across settings. One speaker is preferred, but two speakers is acceptable. If a panel, each panelist (maximum of three) shares a different perspective on a single topic or issue. The session should end with 15 to 20 minutes of questions and answers.

Description of Proposed Session (No more than 150 words)

Audience. You have two audiences for this description. The Committee needs to know why the session is important enough to be selected. Attendees want to know how the session will help them work more efficiently or enhance their knowledge or skills.

Structure. In the first sentence(s), state the educational need for the session. Why is it important for medical communicators to know more about this topic? What's happening in the medical communication field (or setting) that creates the need for this education? End with what attendees will learn.

Style. Follow AMA style and use the tone, voice, and tense in the examples provided.

Writing. Your writing reflects your expertise and professionalism. The Annual Conference Committee will consider organization, clarity, and writing style in accepting proposals. Be sure to review your description and revise it until it is error-free.

See examples.

Learning Objectives

Learning objectives indicate what attendees will be able to do (or do better) after the session. Follow these best practices for creating effective learning objectives.

- Write each objective to represent a single learning point.
- Start each objective with a measurable verb. (Examples of measurable verbs: “discuss,” “define,” “identify,” “describe,” “classify”; avoid nonmeasurable verbs, such as “understand,” “learn,” “know,” “appreciate,” “improve.”)
- Focus on practical skills that attendees will be able to use when they return to their work.

See examples.

Example 1. Description of Education Session and Learning Objectives

Sources of influence are all around us. As a result, our behavior is often shaped by how others communicate with us and how we perceive them. If you are a leader or manager, are you aware of how you influence others? Influence also plays an important role in today’s approach to leadership, which has evolved from an authoritarian style to one that is collaborative and supportive. This collaborative style is the foundation of servant leadership, which embodies nine qualities that can energize employees by cultivating diverse perspectives and trust, facilitating meaningful work opportunities, fostering autonomy, and promoting professional development without compromising personal time. In short, it can create a work environment that is too good to leave. Learn how influence, when used wisely, is an important asset for leaders and how servant leadership can help pave the way.

Learning objectives

- Identify the level of influence leaders possess
- Define the principles of Servant Leadership
- Apply the principles of Servant Leadership

Example 2. Description of Education Session and Learning Objectives

Today, many of us work remotely, whether we are freelancers or full-time employees. While many love the flexibility that remote working provides, there are risks we all must manage, including the risk of being (or being perceived as) passive, indifferent, unavailable, or disconnected. Learn about the results of a survey asking medical communicators (both freelancers and full-time employees) what various communication solutions they have used to stay relevant, engaged, and perceived as “present” on projects and program teams despite not working onsite or directly with their counterparts. Attendees will be invited to comment and/or offer their personal perspectives and experience on the topic.

Learning objectives

- Recognize the need to communicate differently when working remotely from colleagues
- Use appropriate tools and communication methods as needed for various remote situations

Proposals: Roundtable Discussions

Types of Roundtable Discussions

Roundtable discussions are led by one person. Roundtable Discussions can be classified as either informational or participatory.

- **Informational.** The leader assumes a lecturer role and **informs** participants about the topic and allots time for interactive discussion on various points. Roundtable participants typically attend to learn more about a topic and ask questions.
- **Participatory.** The leader facilitates a discussion among participants who have knowledge of the topic. Because all participants are familiar with the topic, the roundtable is designed to be a forum for sharing best practices.

Description of Roundtable Discussion (No more than 100 words)

Audience. You have two audiences for this description: reviewers and potential roundtable discussion participants. Reviewers need to know why the roundtable discussion should be selected. Potential participants want to know how the discussion will help them work more efficiently or enhance their knowledge or skills.

Structure. Start the description with a simple statement of the need for the discussion. How does the topic affect medical communicators? Why should they care about this topic? What will participants learn or what issues will they discuss?

Style. Follow AMA style and use the tone, voice, and tense in the examples provided.

Writing. Your writing reflects your expertise and professionalism. The Annual Conference Committee will consider organization, clarity, and writing style in accepting proposals. Be sure to review your description and revise it until it is error-free.

Example 1. Roundtable Discussion (informational)

Writing manuscripts can be challenging. This discussion will focus on the primary reasons manuscripts are rejected from journals and how to improve one's chance of success when preparing manuscripts for publication. Learn practical tips for writing each section of a journal manuscript effectively and efficiently, helping to ensure acceptance. Also discussed will be strategies for dealing with manuscript reviews and responding to reviewers' comments.

Example 2. Roundtable Discussion (participatory)

The advantage of medical science communication in the 21st century is also sometimes its disadvantage. There are so many ways to source our information and then we have to be concerned—is it information or is it infomercial? How can we tell? Participants will share experiences and discuss platforms and services that work for them.

Proposals: Posters

Abstract for Posters (No more than 300 words.)

Audience. You have two audiences for the abstract: reviewers and potential poster visitors. Reviewers need to know why the poster should be selected. Potential visitors want to know how the information in the poster will enhance their knowledge or skills or help them work more efficiently.

Structure. If you are reporting on original research, write a structured abstract; otherwise, write a descriptive abstract. You do not need to have collected or analyzed all the data at the time of submission. In the Results section, note what outcomes you will be reporting on.

Style. Follow AMA style and use the tone, voice, and tense in the examples provided.

Writing. Your writing reflects your expertise and professionalism. The Annual Conference Committee will consider organization, clarity, and writing style in accepting proposals. Be sure to review your abstract and revise it until it is error-free.

Example 1. Structured Abstract (report on original research)

Introduction: While reading medical journals, one often sees basic writing errors. This study was conducted to quantify the frequency of grammar, punctuation, and word usage errors in articles published recently in peer-reviewed medical journals.

Methods: After identifying 4 leading anesthesiology journals based on impact factors (*Anesthesiology, Anaesthesia, Regional Anesthesia and Pain Medicine, European Journal of Anaesthesiology*), the last 3 issues of each journal published in 2018 were retrieved. Anesthesiology is the author's clinical specialty and was thereby chosen to eliminate misunderstanding scientific content as a potential confounding factor. The Introduction section of every original research or review article in each issue was reviewed for these predefined errors: *due to, singular/plural, if/whether, which/that, and misuse or nonuse of punctuation*. Other errors were also recorded. Only unambiguous errors were counted. The sample included 142 articles.

Results: Of the 142 Introduction sections, 125 (88%) contained at least 1 error. A total of 454 errors were identified, with 0 to 13 errors per article. The most common errors were related to punctuation (318; 70%), primarily misuse or nonuse of commas. The remaining errors were as follows: *due to*, 29; *singular/plural*, 25; *if/whether*, 8; *which/that*, 4; and *other*, 70. Common *other* errors included incorrect word usage, missing or extra words, and nonparallel lists. There was no clear relationship between the percentage of articles with errors and the journal or the primary language of the corresponding author's country (English vs other).

Conclusion: Basic writing errors were identified in almost 90% of analyzed articles from 4 peer-reviewed journals. This percentage is unexpectedly high, especially since only a small portion of

each article was evaluated. These results suggest the need for improved writing and editing in medical publications.

Example 2. Descriptive Abstract (not original research)

Achieving consistency in clinical documents such as clinical study protocols and study reports across different clinical development programs within a company is challenging for several reasons. First, medical writers, both new and established, have diverse backgrounds, creating the need for detailed guidance on medical writing requirements. Second, different reviewers may have different requests for clinical documents, including comments on writing style, which affects document consistency. Third, standard operating procedures (SOPs) are high level and, as such, do not provide sufficient guidance. Lack of consistency in clinical documents will affect document quality and impede efficiency of document preparation. To overcome these challenges, we have developed a comprehensive Medical Writing Operations Manual. The purpose of this manual is to supplement the SOPs and provide additional, detailed steps for medical writing processes, from initial drafting to finalization. Other considerations for content preparation are also included. This manual is intended to be a one-stop shop for procedures, templates, and style guides that are readily available for medical writers. In addition, this manual is a living document that allows for frequent updates to reflect changes in procedures, styles, or regulatory requirements. We will describe the development and implementation of the Operations Manual.