CALL FOR ABSTRACTS
DUE DATE EXTENDED: March 1, 2016 at 5 p.m.

Nurse researchers, educators, practitioners, administrators and students are invited to submit an abstract of your completed or research in progress for a poster presentation. Literature searches are not eligible for poster presentation. Poster presentations will be competitively selected on the basis of scholarship, scientific rigor, and relevance to the theme of the Symposium. One person may submit multiple abstracts.

GUIDELINES FOR ABSTRACT SUBMISSION
• Title: Limit to 150 characters; centered in uppercase.
• Only abstracts submitted as a Word document (doc, docx) will be reviewed
• Limit the body of the abstract to 350 words.
• Body Format: Single-spaced in Times New Roman 12 pt font, with margins set at 1.5" on the left and 1" on top, bottom and right. Please use only standard abbreviations and spell out the words on first use, followed by the abbreviation in parentheses. The abstract should be block formatted without paragraph indentations. All numbers, except those that start a sentence, should be in digits.

The abstracts should include the following
• Purpose
• Significance/Rationale
• Methods and Analysis
• Results
• Conclusions
• Implications

*See an example of a poster abstract below.

ABSTRACT SUBMISSION INSTRUCTIONS
• Abstracts (without identifiers) are due March 1, 2016 at 5:00 p.m. to Palmer_Symposium@luc.edu.
• Please also include a one-page attachment with abstract title, and author information including name, academic credentials, position, title, organization, city, state, email address and phone number.
• The primary presenter will be notified of acceptance by March 15, 2016.
SAMPLE ABSTRACT

Title: LIFE SATISFACTION ONE-YEAR AFTER SEVERE TRAUMATIC BRAIN INJURY
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Purpose: Primary aim was to describe self-reported life satisfaction for persons who recovered consciousness within one year after severe traumatic brain injury (sTBI). Secondary aim was to identify variables predictive of life satisfaction. Significance: Medical advances have improved the odds of surviving sTBI but knowledge about life satisfaction one-year post injury is lacking. Methods: Data of 322 adult participants who recovered consciousness within one year after sTBI were abstracted from the prospective TBI Model Systems study. The Satisfaction with Life Scale (SWLS) was used to measure life satisfaction. Data at time of injury and then one-year post sTBI were available from the Craig Handicap Assessment Reporting Technique (CHART), Functional Independence Measure (FIM), Glasgow Coma Scale (GCS), Glasgow Outcome Scale-Extended (GOS-E), and the Patient Health Questionnaire (PHQ-9). Analyses: Regression analysis was used to identify predictors of SWLS. Results: The sample consisted of mostly men (72%) who had been unconscious for an average of 44 days (SD = 19). Mean life satisfaction, on a scale of 4 to 24, was 17 (SD = 7) indicated a moderate level of perceived life satisfaction. A regression model including 1 year FIM, admission GCS, gender, age at injury and 1 year GOS-E indicated that these variables together significantly (p = .001) influenced self-reported life satisfaction. Findings also indicated that a limited amount of variance (R squared = .065) was explained with these combined variables. Conclusions: Findings suggest that life satisfaction was influenced by functioning at 1 year, injury severity, age, gender, and neurobehavioral status. While the findings are significant, the small amount of explained variance suggests that other variables not measured in this study may influence life satisfaction. Implications: A better understanding of the factors influencing life satisfaction will assist clinicians in tailoring more effective interventions for persons who have suffered a sTBI.