

SUBMISSION GUIDELINES

INS Membership is not required for abstract submission. INS members will receive discounts on meeting registration.

- **The abstract submission deadline is March 4th 2022 at 11:59 pm.** Any submissions still in draft status at that time will not be considered. No late submissions will be accepted.
- **By submitting, authors commit to be available to present on the date and time they are assigned.** Accepted abstracts may be scheduled at any time during the three-day meeting at the discretion of the Program Chair.
- **There is no limit on the number of submissions, but authors are asked to use discretion because submitting multiple abstracts is likely to create scheduling problems.**
- **The body of submitted abstracts may not exceed 500 words.** Paper or Poster submissions must be organized under these headings: 1. Objective, 2. Participants and Methods, 3. Results, 4. Conclusions.
- All submissions must consist of original work. Abstracts submitted to other meetings or that have been previously published should not be submitted and will not be considered.
- All research, results, and conclusions must be final at the time of submission. Submissions that are promissory in nature will not be considered.
- Case reports may be submitted, but the abstract should clearly describe the uniqueness of the case and how it addresses critical knowledge gaps in the field.
- **Submissions will be published exactly as received.** Please proofread carefully before finalizing your submission. Once the deadline has passed, we reserve the right to decline to accommodate any requests for corrections to typos or other entry errors made by the author during submission.
- All submissions will be peer reviewed by the Program Committee. The Program Committee Chairs will make the final decision on all submissions.
- **Accepted abstracts must be presented by the presenting author or an officially designated representative. The corresponding author must formally communicate any changes in the presenting author to ins2022@gruporic.com.** Any author who plans to attend the meeting must register and pay the appropriate meeting registration fee.

AVAILABLE PRESENTATION FORMATS:

Authors may submit abstracts for **Poster or Paper** consideration, or a complete **Symposium Proposal**.

Special Note: All submissions accepted as posters, papers or symposia will be presented in person. All presenters will be informed of presentation location, day and time once these decisions have been finalized by the INS. There may also be a digital component and additional information and instruction will be sent once decisions are finalized.

1. Poster sessions: Posters have proven to be an effective and popular method for communication of scientific information, providing a more intimate forum for informal discussion than is permitted by regular platform presentations. Poster presenters should stay with their poster for the duration of the poster session (approximately 60-90 minutes) and accepted poster presenters are invited to upload a digital poster for the poster E-Gallery.

2. Paper sessions: Paper sessions are topical oral sessions that are arranged at the discretion of the INS Program Committee Chairs. Four to six outstanding abstracts are typically selected for each paper session. Each abstract is allotted approximately 12-20 minutes (depending on the number of presenters per session)

for oral presentation and audience discussion. A moderator is assigned to each session to introduce speakers, help solve any problems, encourage discussion, and keep the session running on time through strict adherence to stated time limits

3. Symposia sessions: Symposia are topical platform sessions dealing with specific issues in clinical neuropsychology. Symposia are submitted as integrated session proposals (each consisting of an overall proposal and 4-5 participating abstracts) that have been pre-organized by a single symposium chair. **Symposium proposals that do not meet the criteria listed below will not be considered.**

- **A complete symposium proposal** consists of an overall Symposium Proposal, plus four to five Participating Symposium Abstracts (submitted by the symposium chair or symposium participants).
- Symposium abstracts should be closely linked and integrated. Symposia are allotted approximately 90 minutes, so each participating abstract should be given approximately 15-20 minutes. Each symposium should include a review led by the symposium organizer or a discussant, as well as a dedicated question and answer period. In the case of a symposium that expresses divergent views on a controversial topic, two longer debate-style talks may also be appropriate.

The symposium chair is SOLELY responsible for submitting a complete symposium proposal as described.

Each abstract must be submitted under one of the categories listed below.

Submission Categories:

- Acquired Brain Injury (TBI/Cerebrovascular Injury & Disease - Adult)
- Acquired Brain Injury (TBI/Cerebrovascular Injury & Disease - Child)
- ADHD/Attentional Functions
- Addiction/Dependence
- Aging
- Assessment/Psychometrics/Methods (Adult)
- Assessment/Psychometrics/Methods (Child)
- Autism Spectrum Disorders
- Behavioral Neurology/Cerebral Lateralization/Callosal Studies
- Cancer
- Career Development/Education/Training
- Cognitive Intervention/Rehabilitation
- Cognitive Neuroscience
- Concussion
- Connectomics
- Dementia (Alzheimer's Disease)
- Dementia (Non-AD)
- Developmental Disorders
- Drug/Toxin-Related Disorders
- Emotion Regulation
- Epilepsy/Seizures
- Executive Functions/Frontal Lobes
- Forensic Neuropsychology
- Genetics/Genetic Disorders
- HIV/AIDS/Infectious Disease
- Inclusion and Diversity/Multiculturalism
- Language and Speech Functions/Aphasia
- Learning Disabilities/Academic Skills
- Medical/Neurological Disorders/Other (Adult)
- Medical/Neurological Disorders/Other (Child)
- Memory Functions

- MCI (Mild Cognitive Impairment)
- Movement and Movement Disorders
- Multiple Sclerosis/ALS/Demyelinating Disorders
- Neuroimaging
- Neurophysiology/EEG/ERP
- Neuropsychiatry
- Neurostimulation/Neuromodulation
- Other
- Schizophrenia/Bipolar
- Stroke/Vascular Cognitive Impairment
- Visuospatial Functions/Neglect/Agnosia

Should you need assistance, please contact ins2022@gruporic.com