

Call For Presentations, Posters, Papers and Corporate Symposia

Deadline for proposals is July 31, 2024

Please download this fillable PDF form and save it on your computer. Before completing, review the information on the “Call for Papers” info sheet, which contains details of formats and topics. Open the saved PDF form and complete it. Then re-save the form using “Save As” PDF. Email the completed PDF form as an attachment to: jom@pnpc.com
 For additional information visit bupe2024.com

Lead Presenter [Please include your academic credentials (MD, PhD, etc.) with your Last Name]

First Name		Last Name	
Position		Organization	
Address			
Email		Telephone	

Co-Presenters [Please include your academic credentials (MD, PhD, etc.) with your Last Name]

First Name		Last Name	
Position		Organization	
Address			
Email		Telephone	

First Name		Last Name	
Position		Organization	
Address			
Email		Telephone	

Additional Presenter Blocks on Last Page

Title <i>(Please specify)</i>	
Short Description <i>(Max. 50 words)</i>	
Abstract <i>(Max. 200 words)</i>	Each Abstract should include: <ul style="list-style-type: none"> ▪ Background/importance of research topic (very brief!): An introductory description of the science of the Project and/or the significance of the research area.

	<ul style="list-style-type: none"> ▪ Purpose/hypothesis (thesis or statement of problem): An introductory statement (thesis) explaining the reason for the research, or a statement of the problem or hypothesis. ▪ Procedures/Data/ Observations: Summary of procedures, emphasizing key points or steps, and the data you observed. Include results that made you revise procedures along the way. ▪ Conclusions/Applications: What was learned about the hypothesis and what it means to the world?
<p>Post-conference CME Questions (Presentations Only; Not for Posters)</p> <p><i>(Please include a minimum of five (5) post-conference CME test questions)</i></p>	<ol style="list-style-type: none"> 1. 2. 3. 4. 5.
<p>Goals, Objectives and Outcomes of Presentation</p>	
<p>Target Groups</p>	
<p>Topic</p> <p><i>See BUPE2024.COM for a full list of topics. Select the theme(s) covered or add your own.</i></p>	<ul style="list-style-type: none"> <input type="checkbox"/> Clinical application of buprenorphine in pain management and/or addiction medicine. <input type="checkbox"/> Where does buprenorphine fit on the ladder of analgesics? <input type="checkbox"/> Clinical utility of buprenorphine relative to other opioids, safer or not? <input type="checkbox"/> How does one rotate onto or from buprenorphine from other potent opioids? <input type="checkbox"/> Perioperative management of patients on long-term buprenorphine. <input type="checkbox"/> Buprenorphine in complex persistent opioid dependence. <input type="checkbox"/> Suboxone as an analgesic off-label. <input type="checkbox"/> The role of buprenorphine in addressing the opioid crisis. <input type="checkbox"/> Impact of buprenorphine on crime and legal issues. <input type="checkbox"/> Interpretation of urine drug screen results regarding buprenorphine. <input type="checkbox"/> How to manage patients on cannabis and buprenorphine? <input type="checkbox"/> Breakthrough pain management on buprenorphine. <input type="checkbox"/> Can patients overdose on buprenorphine? <input type="checkbox"/> Clinical application of buprenorphine in addiction medicine. <input type="checkbox"/> Ethical issues in the use of buprenorphine. <input type="checkbox"/> Impact of benzodiazepines in patients on long-term buprenorphine? <input type="checkbox"/> Rescheduling of buprenorphine to replace NSAIDS. <input type="checkbox"/> The nuances of buprenorphine PK/PD and its clinical relevance. <input type="checkbox"/> Comparison of buprenorphine delivery technologies. <input type="checkbox"/> Exploring the role buprenorphine plays in the US drug crisis. <input type="checkbox"/> The use of buprenorphine in managing pain in advanced illness. <input type="checkbox"/> Other: Please specify _____

Proposed Format <i>Please indicate your choice of format</i>	<input type="checkbox"/> Oral Presentation (10-15 presentations will be accepted), Time Requested: _____ <input type="checkbox"/> Poster (60-70 presentations of such format will be accepted – IN ENGLISH ONLY) * <input type="checkbox"/> Satellite Symposia (Non-CME) (please describe the content and format in the box below) <input type="checkbox"/> Supplemental Workshop (Sponsored/Non-Sponsored) (please describe the content and format in box below)
Workshop or Satellite Symposia Format Description	<i>Describe how your proposed workshop or training event will work, what the key objectives are, how you will make it exciting, interactive and enjoyable.</i>

Additional Co-Presenters *[Please include your academic credentials (MD, PhD, etc.) with your Last Name]*

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