2014 Breast Cancer Symposium

September 4 – 6, 2014
San Francisco, CA

Cosponsored by the American Society of Breast Disease (ASBD), The American Society of Breast Surgeons, American Society of Clinical Oncology (ASCO), the American Society for Radiation Oncology (ASTRO), and the Society of Surgical Oncology (SSO)

Key Dates:
Abstract Submission Deadline: June 10, 2014, at 11:59 PM EDT
Abstract Notifications Sent to the First Author: Early July 2014
Late-Breaking Abstract Deadline: July 22, 2014
Abstract Withdrawal Deadline: July 22, 2014
2014 Symposium: September 4-6, 2014

ABSTRACT SUBMISSION GUIDELINES

Abstracts must be submitted online using the official 2014 Breast Cancer Symposium Abstract Submitter.

1. Call for Abstracts

- Summaries of new, ongoing, and updated research in the area of breast cancer are acceptable for submission and presentation.
- Case reports and abstracts on "trials in progress" or ongoing clinical trials are not suitable for submission to this Symposium.

2. **Submission Categories**

Authors must select one track and one subcategory that best fits the subject of their abstract. The Breast Cancer Symposium Program Committee reserves the right to recategorize an abstract.

- **Risk Assessment, Prevention, Early Detection, and Screening**
  - High Risk
  - General Screening
  - Genomics
- **Survivorship and Health Policy**
  - Survivorship
  - Health Policy
- **Systemic Therapy**
  - Advanced Disease
  - HER2+
  - Triple-Negative
- **Local/Regional Therapy**
  - Biology in Local/Regional Management
  - Ductal Carcinoma In Situ
  - Management of Node-Positive Disease

3. Submission Policies and Criteria

- **Prior Publication:** For a study to be eligible for acceptance to the Breast Cancer Symposium, the contents and conclusions of the abstract must not be presented at any scientific, medical, or educational meeting of 500 registrants or more, or be **published in a scientific, medical, or educational publication (in any medium), in whole or in part,** before the Symposium. The exception to this is presentation at the cosponsoring societies' Annual Meetings (please see section 9 for more information).
- **First Author Disclosure:** Author disclosure must be declared at the time of abstract submission. If the first author is employed by a company as defined by the CMSS Code for Interactions with Companies (see below), an alternate presenter who does not have a relevant employment relationship must be named if the abstract is selected for presentation in an oral abstract session.
    - **Company** as defined in the CMSS Code for Interactions with Companies, is, "a for-profit entity that develops, produces, markets, or distributes drugs, devices, services or therapies used to diagnose, treat, monitor, manage, and alleviate health conditions. This definition is not intended to include non-profit entities, entities outside of the healthcare sector, or entities through which physicians provide clinical services directly to patients."
- **Submission Fee:** A nonrefundable $60 administrative fee, payable at the time of submission, will be charged for all abstract submissions.
- **Abstract Change Deadline:** Following the abstract submission deadline, first authors may request corrections to rectify errors (e.g., typos, misspellings) within abstract submissions. Requests must be submitted to Breastcasymposium@asco.org by July 22, 2014. **Updates to original data will not be permitted, as changes are permissible only for the correction of errors.**
- **Abstract Withdraw Deadline:** If a first author chooses to withdraw his or her abstract for any reason, a request must be submitted by July 22, 2014, to Breastcasymposium@asco.org. Any abstract withdrawal request received after this date will be considered on a case-by-case basis and cannot be assured removal from the *2014 Breast Cancer Symposium Proceedings*.
- **Confidentiality Policy:** Submitted abstracts are considered both **CONFIDENTIAL** and **EMBARGOED** from the time of submission. For a study to be eligible for presentation, information contained in the abstract, as well as additional data and information to be presented about the study, may not be made public before the findings have been presented/published in compliance with the Embargo Policy. *The one exception to these policies applies to abstract information that has been previously made public through presentation at another meeting. In these cases, the confidentiality and embargo policies apply only to any updated information*.

  The Confidentiality and Embargo Policies require that, prior to the embargo being lifted, the first author, and coauthors of the research not
    - publish the information or provide it to others who may publish it,
    - release the findings to news media, or
    - use the information for trading in the securities of any issuer, or provide it to others who may use it for securities trading purposes.

  The first author is responsible for conveying this information to all parties.

4. Responsibilities of the First Author

- Verify that, if necessary for the work reported, the clinical research represented in the abstract was approved by an appropriate ethics committee or institutional review board and, if appropriate to this research, informed consent was obtained for all subjects.
- Verify that all coauthors are aware of the contents of the abstract and support its data.
- Agree, on behalf of all authors, to transfer copyright to ASCO.
- Agree to present the abstract if it is selected for presentation at the Symposium. This includes being present during the scheduled time of a poster session.
- Agree that the same contact information and email address will be used for each abstract if submitting more than one abstract.

- Identify the corresponding author. If you would like someone other than the first author to be contacted with any questions by the Scientific Review Committee, please designate within the abstract submitter. All other correspondence will be with the first author.
- Comply with ASCO's 2013 Policy for Relationships With Companies (J Clin Oncol. 2013 Jun 1;31(16):2037-42) and obtain and provide disclosure of all relationships with companies for all coauthors by the abstract submission deadline.
- For abstracts containing original research, for the first, last, and corresponding authors provide disclosure specific to the research sponsor on participation in a speakers' bureau, employment, and ownership interest. Original research means a systematic investigation designed for the purpose of expanding knowledge or understanding, including the analysis of data. For clarity, a clinical trial is original research under this definition, and a summary or review of prior knowledge is not original research under this definition.
- Comply with conflict of interest management decisions, including the potential for slide review prior to presentation. For more information on these procedures, see ASCO's Conflict of Interest Implementation Plan for CME Activities.

5. Instructions for Abstract Submission

Please make special note of the following when preparing your abstract:

- Describe the objectives and results of the research in the abstract so that the Program Committee can evaluate the quality and completeness of the abstract. Abstracts will be judged solely on the basis of the data in the submitted abstract.
- Organize the abstract according to four sections, identified by the following headers: Background, Methods, Results, and Conclusions.
- Do not use proprietary names in the title or body of the abstract. If necessary, you may include the proprietary name in parentheses directly after the generic name on first use in the body of the abstract.
- Do not refer to study results or conclusions in the title of the abstract. The title should objectively describe the study. The Program Committee reserves the right to edit conclusive titles.
- You may include one data table with the abstract. Do not include illustrations or graphics.
- Do not exceed 2,000 characters (approximately 300-350 words), not including spaces, for the total of your abstract title, body, and table.
- Individuals may serve as first author of more than one abstract.
- List no more than 20 individual authors for each abstract. Make sure that all coauthors meet the definition of authorship as stated by the International Committee of Medical Journal Editors in the "Uniform Requirements for Manuscripts Submitted to Biomedical Journals." In addition to the 20 authors, an authoring group may also be listed to indicate the remaining authors.
- Although clinical trial registration is not required for abstract submission, publication, or presentation, certain clinical trials are required to be registered by law and/or prior to journal publication. If a clinical trial is already registered, the first author will be asked to provide the name of the registry and the trial registration number during the abstract submission process. The clinical trial number will be included in the published abstract.

In order to successfully complete an online submission, authors will need to provide the following information:

- **First Author (Presenting Author):** The name, institution, telephone number, and email address of the first author is required. **The first author (presenting author) will receive all future correspondence from ASCO.**
- **Coauthor(s):** The name, institution, and email address of each coauthor. Academic degrees of coauthors are not needed.
- **Intent to Submit Late-Breaking Abstract**: This box must be checked (either yes or no). Abstracts lacking data in the Results section of the abstract will be considered for late-breaking abstract status only when this box is checked.
- **Disease Site/Topic Category**: Select the most appropriate disease site and topic category for the abstract, according to the list of topics online (which also appears above). Please note that the Program Committee has the authority to recategorize an abstract.
- **Disclosure Declaration:** Disclosure of all relationships with companies for the first author and all coauthors is required.

6. **Late-Breaking Abstracts**
   - The Breast Cancer Symposium late-breaking abstracts policy allows for the submission of late-breaking abstracts for important new developments from **phase I, II, and III clinical research trials** that will have an impact on practice or research **for which no preliminary data are available at the time of the abstract submission deadline** (June 10, 2014).
   - A preplanned analysis must be scheduled after June 10, but before July 22, 2014, the deadline for the final, updated late-breaking abstract. The policy is not a mechanism to allow for updated data to be submitted later when preliminary data are available by the abstract submission deadline.
   - At the time of the Breast Cancer Symposium Program Committee's initial review of late-breaking abstracts (after the June 10, 2014, deadline), three decisions are possible:
     - **Potential** presentation in a session (oral or poster)
     - Publication only in the *2014 Breast Cancer Symposium Proceedings*
     - Rejection
   - Note that a decision regarding **potential** presentation does not guarantee that the abstract will be selected for presentation after review of the updated data. **Final decisions regarding the selection of late-breaking abstracts will be made after the July 22, 2014, deadline.**
   - First authors of late-breaking abstracts have an opportunity to request that the abstract be withdrawn if the Committee deems it acceptable for publication only.

7. **Presentation Types**
   - **Oral Abstract Sessions:** Presentations will be approximately 10 to 15 minutes in length. Presenting authors may use slides to accompany their presentation. Those who have disclosed relevant employment relationships with companies as defined by the CMSS will be prohibited from presenting and must select an alternate presenter with no relevant employment relationships.
   - **General Poster Sessions:** Selected abstracts will be presented in poster sessions that are 1 to 2 hours long. First authors should be available throughout the poster session to informally answer questions from attendees regarding the information presented.

8. **Correspondence**

   Each first author (presenting author) will receive an email acknowledging receipt of the abstract after initiating a submission and after completing a submission. The first author (presenting author) will receive a letter of notification from the Program Committee regarding its decision by early July.

9. **Merit Awards**

   Based on funding availability at the time of the award, a limited number of Merit Awards will be given to fellows who submit high-quality abstracts. Merit Award recipients will receive a monetary stipend, as well as complimentary registration for the Symposium. Fellows who wish to apply for a Merit Award should check the box in the abstract submitter, indicating they wish to apply for a Merit Award. Applicants will be required to upload a letter of support from their Training Program Director and a two-page curriculum vitae. Individuals who are selected for a Merit Award will be notified of their award in early July.

10. **Policies Related to Abstract Submission Conflict of Interest Policy**

    In compliance with standards established by ASCO's 2013 Policy for Relationships With Companies(J Clin Oncol. 2013 Jun 1;31(16):2037-42) and the Accreditation Council for Continuing Medical Education (ACCME), ASCO strives to promote balance, independence, objectivity, and scientific rigor through disclosure of financial and other interests, and identification and management of potential conflicts. According to the Society's Policy for Relationships With Companies, the following relationships with for-profit health care companies must be disclosed: employment; leadership positions; stock ownership; honoraria; consulting or advisory activities; speakers' bureaus; research funding; patents, royalties, or other intellectual property interests; expert testimony; travel, accommodations, and expenses; and other relationships. The disclosure should include all relationships with health care companies, rather than just those related specifically to the subject matter of the abstract.

In addition to the general disclosures that will be provided by all authors, the first, last, and corresponding authors of abstracts that pertain to original research will be asked to provide information about participation in a speakers' bureau, employment, and ownership interest specific to any for-profit healthcare company that is the research sponsor of the abstract.

For more information on the 2013 ASCO Policy for Relationships with Companies, including a JCO Editorial on the Policy Implementation, the Background and Rationale for the Policy, and a list of Frequently Asked Questions, please visit ASCO's Policies and Safeguards for Relationships with Companies webpage.

11. Presentation at Other Cosponsoring Society Meetings

- **ASBD** - An abstract submitted for presentation at the 2014 Breast Cancer Symposium may also be submitted for presentation at the 2014 ASBD Annual Meeting.
- **The American Society of Breast Surgeons** – An abstract submitted for presentation at the ASCO 2014 Breast Cancer Symposium may not be submitted for presentation at the American Society of Breast Surgeons 2014 Annual Meeting.
- **ASCO** – An abstract submitted for presentation at the 2014 Breast Cancer Symposium may also be submitted for presentation at the 2014 ASCO Annual Meeting.
    - **Note:** If your abstract is to be considered for presentation at the ASCO Annual Meeting, you are encouraged to submit updated data. You will also need to resubmit your abstract using ASCO's 2014 Annual Meeting Online Submitter.
- **ASTRO** - Abstract submissions of papers presented at the Breast Cancer Symposium will be accepted for consideration in ASTRO's 2014 Annual Meeting Scientific Program.
- **SSO** – An abstract submitted for presentation at the Breast Cancer Symposium may also be submitted for presentation at the 2014 SSO Annual Meeting.