MNRS Annual Research Conference Submission Site User Guide

Visit [http://mnrs.societyconference.com](http://mnrs.societyconference.com)

Click on the “Submissions” card and then clicking “login” will open the below pop-up window.

After logging in*, click "Access My Dashboard" below to begin!

*If you are an MNRS Member, an account has already been created for you using your login email for membership.

If you do not know your password, please click "Forgot your Password? Reset Password" and a new password will be emailed.
Select “Start a New Scientific Submission”

These are your current submissions. You can access the submission by clicking the title. If you were added to a presentation by someone else, that submission would appear here.
After entering the title, the system will autocorrect to title case. This is for Abstract and Program book purposes. Please review the title after correction.

If submitting a Preconference Workshop Select length & proposed level of workshop.
Add Participants to the submission, if necessary.

Search for a user by typing a full name or email. Please thoroughly search for a participant in the system before creating an account.

These icons can be used to check the status of your participants. You can also click the mail icon to send an individual email.
Complete the overall proposal information.

1. Name of Group/Organization submitting proposal

2. Workshop Description
   This statement will be used to promote your workshop and will appear as the description in all conference related materials, including the preliminary brochure.

3. Relevance of the session as it relates to nursing research.

4. Please list any prerequisites.

5. Workshop Attendance
   All pre-conference workshops must have a minimum of 25 attendees sign up prior to the 2019 Annual Meeting in order to occur. What measures have you taken to assure at least 25 people will attend?

6. Biosketch
   Please upload a copy of your biosketch (pdf/doc/docx).
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**Submission Details**

1. Name of Group/Organization submitting proposal

2. Session Description

3. Relevance of the session as it relates to nursing research

4. Please list any prerequisites

5. Biosketch
   
   As the organizer, please upload a copy of your biosketch (pdf/doc/docx).

   Upload
   
   max file size: 8 MB
As a presenter, enter your title and upload your biosketch.
Disclosures

As a presenter, please complete the following fields.

Financial Relationship

Financial relationships are those relationships in which the individual benefits by receiving a salary, royally, intellectual property rights, consulting fees, honoraria, promotional speaker's fees, ownership interest in, royalties, stock options or other ownership interest, and/or other financial benefits. Financial benefits are usually associated with roles such as employment, management position, independent contractor (excluding contract research), consulting, speaking, and teaching/membership on advisory committees or review panels, board membership, and other activities from which remuneration is received, or expected. ACCM considers relationships of the person involved in the CME activity to include financial relationships of a spouse or partner.

Conflict of research includes research funding where the institution gives the grant and manages the fund and the person is the principal or named investigator for the grant. There is no minimum dollar amount for relationships.

Definition of Commercial Interest

A commercial interest is an entity producing, marketing, redistributing or providing health care goods or services, and ownership interest in, control of, or payment of fees to the institution where the individual involved in the CME activity is an employee, officer, consultant, honoraria, speaker, advisory board, or board member, and other activities from which remuneration is received, or expected. ACCM considers relationships of the person involved in the CME activity to include financial relationships of a spouse or partner.

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Financial relationships include those in which the individual participates, advises, operates, consults, has a financial interest, or receives compensation (whether directly or indirectly) for services rendered or goods provided to the organization or entity that is conducting the CME activity. ACCM considers relationships of the person involved in the CME activity to include financial relationships of a spouse or partner.

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Disclosure

Yes, I (my spouse or other immediate family members) do have commercial interests to disclose.

No

Financial Relationship Details

Please list the name of the entity in the 'Commercial Interest' column. Examples of relationships include stock ownership, academic/medical advisory board member, corporate board member, consumer employee, nonemployee, patient.

Commercial Interest

Type of Financial Interest

Individual(s) Involved

I will not accept payments or reimbursements from a commercial interest (ami)/entity, marketing, re-

marketing, redistribution, or provision of health care goods or services consumed by an on, patient, employee, or my role in the planning and delivery of this CME activity. If I am approved by a commercial interest in this report, I will immediately notify this activity.

I agree.

All information on clinical or research involvement in a CME activity must be based on evidence that is accepted within the profession of medicine as evidence upon which medical judgment is formed and conclusions of the CME activity. ACCM considers relationships of the person involved in the CME activity to include financial relationships of a spouse or partner. Such recommendations must conform to the generally accepted standards of experimental design, data collection, and analysis. If I present, my presentation will not meet these standards, and if I am a planner, I will not approve any content that does not meet these standards. If I am a session chair or an abstract discussant, any contribution I make to discussion will meet these standards.

I agree.

Educational sessions that are a part of this activity, such as abstracts, discussion, and posters, cannot contain any advertising, promotion, or product endorsements, or advocacy-based information, or other commercial-type messages. If I am a presenter, my presentation will meet these standards, and if I am a planner, I will not approve any content that does not meet these standards. If I am a session chair and/or abstract discussant, any contribution I make to discussion will meet these standards.

I agree.

The content of the CME activity must not permit the proprietary interest of any commercial interest. If I am a presenter, I must not receive any honoraria, speaking fees, or other compensation unrelated to the CME activity. If I am a planner, I will not approve any content that does not meet these standards. If I am a session chair and/or abstract discussant, any contribution I make to discussion will meet these standards.

I agree.

The content of the CME activity must not be influenced by any commercial interest. If I am a presenter, my presentation will meet these standards, and if I am a planner, I will not approve any content that does not meet these standards.

I agree.

Employee Disclosure

Are you an employee, consultant, or disclose any financial interest in any commercial interest.

Yes

No

Signature

I certify that if I (or my immediate family member) still own or control any financial relationships (e.g., employment, consultation, ownership, or significant equity interest) for which the ACCM requires disclosure. Financial relationships to be defined as any income-source earning service within the last 12 months.

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Finalizing your submission.

When all presenters have completed their respective tasks the finalize Submission button will change to yellow. Click this to submit your proposal for review.