



University of Oklahoma – Tulsa
School of Community Medicine
Clinical Vignette Symposium 2026

Call for Abstracts & Conference Information

Sponsored by:
Office for Research Development and Scholarly Activity

ORDSA

Dear Colleagues,

On behalf of the OU School of Community Medicine, I am pleased to offer this call for abstracts for the 15th annual Clinical Vignette Symposium (CVS). CVS is an opportunity to present your case reports in a conference setting. CVS is also an opportunity to tell your story of great cases you have seen.

Case studies are a crucial part of exploratory scholarly activity. They disseminate new knowledge and allow for collaborative learning. Case studies play an important role in inspiring new research. We encourage abstracts based on unusual or exciting clinical cases you have been involved with during your education here at the OU School of Community Medicine.

This year, CVS will take place in March and the abstracts that are accepted will be presented at two poster sessions on ***Wednesday, March 11, 2026***, in the Learning Center's Founders Hall. Most will be in poster format, but we will choose two abstracts to be presented orally during the event. We also encourage authors to publish their work on the Open Science Framework, which allows other researchers around the world to view the posters and will be citable on their CV.

Please review the enclosed instructions. The deadline for all submissions is **Friday, January 16, 2026**. After reviewing, if you have any additional questions, please contact ORDSA@ouhsc.edu.

We look forward to reviewing your abstract and seeing you at our symposium.

Sincerely,



Martina Jelley, MD, MSPH, FACP

Professor and Vice Chair for Research, Department of Internal Medicine

Julian Rothbaum Chair in Community Health Research

Assistant Dean for Clinical Research

University of Oklahoma School of Community Medicine

Table of Contents

About the Conference	4
Important Dates and Deadlines.....	4
Abstract Submission Information.....	5
Guide for Authors.....	8
Poster & Day-Of Information	9
Sample Abstract.....	11
2025 Winners	12

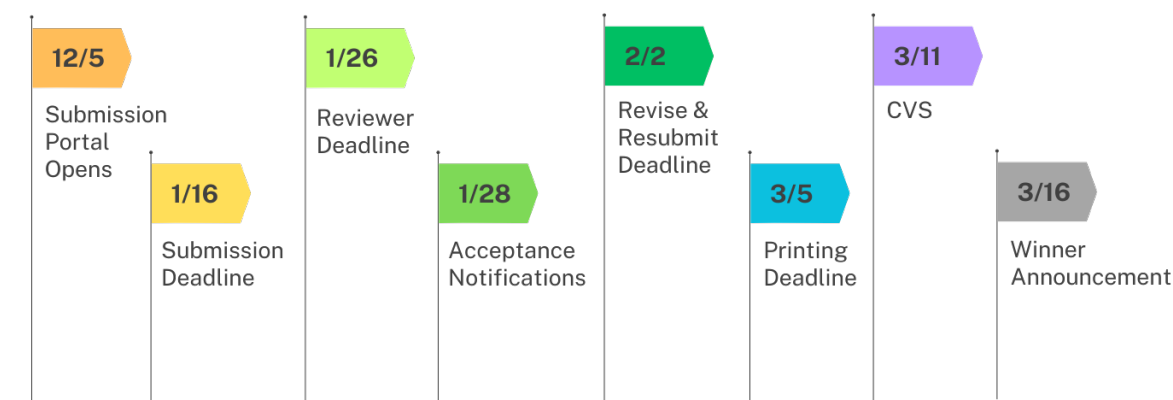
About the Conference

CVS will take place on Wednesday, March 11, 2026, from 4:00pm – 7:00pm. There will be two poster sessions. The first session will take place from 4:00 – 5:00pm and the second session will take place from 6:00 – 7:00pm.

All accepted posters will be displayed in the Learning Center's Founders Hall during the conference. Two selected abstract authors will also give oral presentations during the event. Authors will also be able to upload their accepted posters into the Open Science Framework to disseminate their work to a wider audience.

Important Dates and Deadlines

Abstract Submission Portal Opens	December 5, 2025
Abstract Submission Deadline	January 16, 2026
Abstract Review Deadline	January 26, 2026
Acceptance Notifications	January 28, 2026
Revise & Resubmit Deadline	February 2, 2026
Poster Printing & OSF Upload Deadline	March 5, 2026
Clinical Vignette Symposium	March 11, 2026
Winner Announcement	March 16, 2026



Abstract Submission Information

Accessing the Abstract Submission Site

You will submit your abstract at <https://cvs2026.exordo.com/>.

The submission deadline of **Friday, January 16, 2026**, is final. Late or incomplete submissions ***will not be accepted***.

Abstract Categories

- Emergency Medicine
- Family and Community Medicine
- Internal Medicine
- Obstetrics and Gynecology
- Pediatrics
- Psychiatry
- Surgery

Abstract Format Requirements

Abstracts are limited to 400 words.

Titles must be in title case and limited to 12 words. An example of title case:

Nasal **P**olyps **L**eading to **N**ewly **D**iagnosed **C**ystic **F**ibrosis in an **A**dolescent

Abstracts must be provided in a structured format: Introduction, Case Description, Discussion. Any concluding remarks on the case can be included in the Discussion section of the abstract.

All authors' names, affiliations, designations, credentials, and emails must be entered into the submission portal system. Please make sure you have this complete and correct information ready prior to abstract submission.

All abstracts should be reviewed by an OUSCM clinical faculty mentor and departmental research facilitator before submitting. Check with your department chair or faculty advisor if you don't know who your departmental research facilitator is.

*The presenting author must agree to be present during the duration of the Clinical Vignette Symposium. **Please do not submit an abstract if you know you are not available on March 11, 2026, from 4:00-7:00pm.** If an abstract has been accepted and a presenting author is unable attend CVS, the submission will be withdrawn from consideration prior to the event. If you have any questions or concerns, please contact ORDSA@ouhsc.edu.*

Abstract Review

Peer reviewers in a related field will review submissions to determine if they meet best practices for inclusion in the Clinical Vignette Symposium. You will be notified if the abstract has been accepted or rejected by **Wednesday, January 28, 2026**. This gives you time to prepare and print a poster, and to upload your presentation file to the Open Science Framework before the applicable deadlines. Review the “Important Dates and Deadlines” section (above) and if you think you might need more than the time allotted to prepare your poster, you can begin working on it as soon as you submit your abstract.

In addition to the two selected oral presenters, winners for first, second, and third place will be announced.

Authorship

“*Presenting Author*” is defined as the author designated with presenting the abstract at the Clinical Vignette Symposium. This individual is also responsible for providing the required information for all authors included in the submission. Only one presenting author can be selected per submission. If selected as a winner of CVS, travel or publication fee support will be awarded to the presenting author.

“*Corresponding Author*” is defined as an author responsible for receiving and responding to messages from the CVS planning committee and the ORDSA team regarding the submission and event information. We strongly encourage the presenting author and the corresponding author to be the same person, as most information is pertinent to presenting authors. However, more than one corresponding author can be selected per submission.

A presenting author may submit up to two abstracts. However, they may be listed as co-author on an unlimited number of other abstracts. If a presenting author has two abstracts accepted, they will be required to submit two posters and present at both sessions of CVS.

Preclinical medical students (MS1 and MS2) are permitted to present at CVS but must receive mentorship from both an OUSCM clinical faculty member and a research coordinator in the applicable SCM department on their presentation. We strongly encourage the inclusion of a care-providing resident who participated in the case to provide their clinical expertise on the submitted abstract.

A clinical faculty mentor ***must approve of the submission*** in addition to being listed as an author on the final submitted abstract. Please ensure that your mentoring clinical faculty is listed as an author on your submission. **ORDSA may contact the faculty mentor of a submitted abstract to confirm approval if necessary.**

It is the responsibility of the presenting author to ensure that all co-authors are aware of the contents of the abstract, and the submission is their own work in collaboration with the other authors listed. Incomplete author information may cause the abstract to be rejected. See the example below of how to list the affiliations of your co-authors.

Author and Affiliation Examples

Martina Jelley, MD, MSPH, FACP - University of Oklahoma School of Community Medicine, Department of Internal Medicine

Amy Hendrix-Dicken, PhD - University of Oklahoma School of Community Medicine, Department of Pediatrics

Nicholas Hollman, MPH – University of Oklahoma School of Community Medicine, Office for Research Development and Scholarly Activity

If you have any questions about authorship, please contact ORDSA@ouhsc.edu.

Guide for Authors

Reviewers will consider the following questions as they read through the abstract submissions:

- | | |
|------------------------------------|--|
| <u>Introduction:</u> | Does the introduction provide subject, purpose, and value of case report? |
| | Does it present background information and include evidence of literature review? |
| <u>Case Description:</u> | Does the case description provide a description of the case and include only information applicable to the case? |
| | Does it include results of physical exam, lab or diagnostic data, final diagnosis, and treatment of patient post-diagnosis? |
| <u>Discussion/
Conclusion:</u> | Does the discussion/conclusion review the treatment decisions, evaluate case for accuracy, validity, and rarity? |
| | Does it compare the case to the current literature, include recommendations, and present a clear teaching point or lesson learned from the case? |
| <u>Readability:</u> | How easy is it to understand the submission? |

Additional Resources

Information about Preparing a Clinical Vignette (Case Report) Abstract

<https://www.acponline.org/membership/residents/competitions-awards/acp-national-abstract-competitions/guide-to-preparing-for-the-abstract-competition/writing-a-clinical-vignette-case-report-abstract>

Race in Clinical Case Presentations

Recent literature recommends not including race in case descriptions unless it is relevant to the case. For this reason, consider omitting race from your abstract. For more information, see [this article](#).

Poster & Day-Of Information

Information about Preparing a Poster Presentation

<https://www.acponline.org/membership/residents/competitions-awards/acp-national-abstract-competitions/guide-to-preparing-for-the-abstract-competition/preparing-a-poster-presentation>

Poster Printing

Once your abstract has been accepted, presenters will need to follow the below instructions.

Presenters are encouraged to use a standardized poster template. You can access the template [here](#). You may also use your department approved poster template.

Information on pricing for poster printing services provided by the OU-Tulsa Schusterman Library can be found [here](#). Some departments help with the cost of printing. Check with your mentor for details. If the department is unable to help with your printing costs, you can visit any office or off-campus printing store for pricing. You may also contact ORDSA@ouhsc.edu for possible support and additional resources.

If you select to use the OU-Tulsa Schusterman Library to print your poster, please note the abstract must be submitted for printing by **Thursday, March 5, 2026, at 5:00pm**.

Posters wider than 48 inches WILL NOT be permitted due to the size limitation of our display boards.

Poster Upload to Open Science Framework

ORDSA strongly encourages accepted presenters to publish their poster on the [Open Science Framework](#). This allows other researchers around the world to view your poster and can be citable on your CV. Presenters will need to create an OSF account and publish their complete poster to their OSF profile. The deadline to upload your poster to OSF is **Friday, March 21, 2025, at 11:59pm**.

Instructions on how to create an account and how to publish your poster can be found on [ORDSA's tips and tricks for OSF](#). Also, a helpful video tutorial on publishing a poster can be found [here](#). If you have any questions about uploading your poster to OSF, please contact ORDSA@ouhsc.edu.

Day-Of Details and Judging Information

Clinical Vignette Symposium will take place in two poster sessions on Wednesday, March 11, 2026, from 4:00pm – 7:00pm. **You may hang your poster in Founders Hall**

that morning, from 9:00am – 11:00am. If you are not available during that time, you must find someone to hang your poster for you. Be prepared to provide the presenting author's name, the poster title, and/or the submission ID number when arriving to hang your poster. Velcro used to hang the posters will be provided.

Any accepted submission whose poster is not hung by 12:00pm on Wednesday, March 11, 2026, will be withdrawn from consideration.

You will be assigned to Poster Session 1, an oral presentation, or Poster Session 2. If you are presenting two posters, one poster will be assigned to Poster Session 1 and one poster will be assigned to Poster Session 2. The oral presentation component is by invitation only. Assigned reviewers will identify people for this portion of CVS.

The day will be structured as follows:

4:00 – 5:00pm	Poster Session 1
5:10 – 5:50pm	Oral Presentations
6:00 – 7:00pm	Poster Session 2

Notification of poster session will occur at least two weeks prior to the event.

The presenting author must be available for the entire duration of the poster session to which they are assigned. They should be prepared to make a short presentation for the judges (no more than three to five minutes). Judges may not be in your field of study so the presentation should be for a general audience.

As mentioned previously, a presenting author is permitted to submit up to two abstracts. If both abstracts are accepted, they will be required to be available for the duration of **both sessions** of CVS in order to present both posters.

If you have any questions about the day of the event, please contact ORDSA@ouhsc.edu.

Withdrawals

If you are unable to attend CVS and/or need to withdraw your submission for any reason, please e-mail ORDSA@ouhsc.edu with your name, poster title, and submission ID number.

Sample Abstract

Cardiac Arrest Secondary to Ventricular Fibrillation with Dual Sequential Electrical Defibrillation

Nicholas Stearns, DO - OU-TU School of Community Medicine, Department of Emergency Medicine

Eric Lee, MD - OU-TU School of Community Medicine, Department of Emergency Medicine

Joshua Gentges, DO - OU-TU School of Community Medicine, Department of Emergency Medicine

Introduction

Sudden cardiac death (SCD) is the leading cause of death in the United States with an estimated 350,000 out-of-hospital cardiac arrests (OHCA) and approximately 290,000 in-hospital cardiac arrests (IHCA) occurring annually (1). Within both cohorts, demographics and comorbidities are similar (2). However, IHCA carries a more favorable survival rate, 25% versus 10%, and a higher survival rate at 30 days and 1 year (1,2). Interventions including chest compressions, ventilation, early defibrillation, and rapid correction of reversible causes of arrest are critical in the management of cardiac arrest (1).

Case Description

A 49-year-old male with a past medical history of hypertension, hyperlipidemia, and CAD with prior stent placement in 2017 presented to the emergency department (ED) with substernal chest pressure with associated shortness of breath and nausea. Symptoms progressively worsened over 2 hours prior to arrival. A pre-hospital EKG demonstrated ST-segment elevation meeting STEMI criteria in the inferior leads. He received 324mg of aspirin, 3 sublingual nitroglycerin, and 1 L of normal saline en route to the ED. Initially, the patient was alert, oriented, and conversing with ED staff. Just prior to transfer from the EMS cot to the ED stretcher, the patient became unresponsive with agonal respirations and then went into cardiac arrest. High-quality CPR was immediately initiated. Defibrillator pads were placed with an initial rhythm of ventricular fibrillation (VF). He was immediately defibrillated, and resuscitation was continued. After a second defibrillation attempt, the patient was given a bolus of amiodarone and switched to dual sequential electrical defibrillation (DSED). He remained in recurrent VF despite these efforts; therefore, lidocaine was administered. After approximately 45 minutes of resuscitation which included high-quality chest compressions, 14 dual sequential defibrillation attempts, amiodarone, and lidocaine, return of spontaneous circulation (ROSC) was obtained. The patient went emergently to the Cath lab for definitive management, then admitted to the ICU. He was discharged from the hospital less than 72 hours later completely neurologically intact and ambulatory.

Discussion

ACLS is the current standard in the initial rapid resuscitation of patients in cardiac arrest secondary to ventricular arrhythmia. Over the past several years there have been other modalities, such as DSED and early initiation of ECMO that have demonstrated increased rates of survival to hospital discharge and favorable neurologic outcomes (3,4). As clinicians, it is our responsibility to remain current with resuscitation modalities and their utilization to provide our patients with the best chance of meaningful recovery.

2025 Winners

Thank you to everyone who participated in the 2025 Clinical Vignette Symposium. Congratulations to the following 2025 CVS winners and oral presenters:

1st Place

Cardiac Arrest Secondary to Ventricular Fibrillation with Dual Sequential Electrical Defibrillation

Winning Author: Nicholas Stearns, DO - OU-TU School of Community Medicine, Department of Emergency Medicine

Co-authors: Eric Lee, MD; Joshua Gentges, DO

2nd Place

Ovarian Tumor as a Cause of Vaginal Bleeding in a Prepubertal Child

Winning Author: Molly Bayless - OU-TU School of Community Medicine, MS-III working with the Department of Pediatrics

Co-author: Laura Chalmers, MD

3rd Place

A Rare Case of Gastropleural Fistula After Roux-en-Y Gastric Bypass

Winning Author: Brianna Taylor, MD - OU-TU School of Community Medicine, Department of Surgery

Co-authors: Logan Scott-Kirchen, MD; Jordan Williams, MD; Stacey Kubovec, MD; Geoffrey Chow, MD; Zhamak Khorgami, MD

Oral Presenters

From Strawberries to Encephalopathy: Can Thiamine Save the Day?

Winning Author: Bradley Gleason, DO - OU-TU School of Community Medicine, Department of Internal Medicine

Co-authors: Karli Shelton, MD; Pooja Mallipaddi, DO; Kevin Roddy, DO; Amanda Gibson, MD

and

Neurocysticercosis Causing Obstructive Hydrocephalus in a Patient with Endemic Exposure

Winning Author: Nathalia Papa Belini, MD - OU-TU School of Community Medicine, Department of Family & Community Medicine

Co-author: Jennifer Weakley, MD