

Blinded Author Biography (Maximum of 50 Words)

## Pediatric Orthopaedic Practitioners Society Annual Conference May 7, 2024 • National Harbor, MD Podium or Poster Abstract Submission

Full Name:		Credentials:						
Mailing Addre	ess:							
Primary Phone Number:		Alt Phone:						
Affiliations:								
Position:		Email:						
Speaker Experience:		Local Regional National International						
Please List P	Previous Presented	d Topics (	Maximum of s	5):				
1								
2.								
3.						· · · · · · · · · · · · · · · · · · ·		
4.								
5.								
Educational Level of Audience: Novice Intermediate Advanced								
Presentation Format: Podium Presentation Poster Presentation								
Category:	Basic Science Neuromuscular	Special		es Foot Spine	Hand Sports	Hip Trauma	Lower Extremity Upper Extremity	
Permission fo	or Release of CD	Yes	No					

## **Abstract Submission**

Please submit all Abstracts via email to Megan Gorham, PA-C Email: mlomax@uams.edu



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Presentation Title:	<u> </u>	
Co-authors:		 
Learning Objectives (Must	Have 3):	
1.		 
2.		 
3.		 
Abstract (Maximum of 500	Words):	

**Abstract Submission** 

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Please submit a current curriculum vitae and the attached speaker disclosure form with all submissions.