## **Abstract Submission Example**

Presenter First Name: Joe

Presenter Last Name: Smith

**Presenter Title**: Joe Smith, MD, MPH, Associate Professor of Medicine, Northwestern University OR Joe Smith, MS, Program Manager, Northwestern University

Presenter Email: joesmith@example.edu

Institution/Organization Name: Northwestern University

**Additional Presenters' Names and Titles**: please follow this sample: Joe Smith, MD, MPH, Associate Professor of Medicine, Northwestern University OR Joe Smith, MS, Program Manager, Northwestern University

Abstract Title: Sample Title

Abstract Summary: (750 word limit)