

# Society of Pediatric Nurses 36<sup>th</sup> Annual Conference

**A Brighter Future Starts Here**

**Call for Abstracts**

## Timeline

Call opens: June 17, 2025

Deadline for abstract submissions: October 3, 2025

Applicants Notified of Status: November 26, 2025

## Tracks

**Abstracts are scored based on the criteria noted in the review form below; review these criteria prior to submission. Pre-licensure students are judged under a separate student track.**

**Clinical Practice:** This track describes new approaches to care, unusual cases, patient and/or family education, or literature reviews of best practices with a summary of the evidence.

**Education:** This track describes innovative strategies used in educating nurses, in either academia or the practice setting.

**Evidence-based Practice (EBP):** This track describes the process and outcomes resulting from the critical appraisal and use or translation of the best and most relevant research evidence related to a clinical question that directly influences pediatric nursing practice.

**Quality Improvement (QI):** This track describes the process improvements and clinical quality outcomes resulting from the use of improvement science methodology that directly influences pediatric nursing practice.

**Research:** This track describes systematic investigations designed to create new pediatric knowledge.

**Leadership and Management:** This track describes innovative projects or initiatives related to management of nursing staff or transformational leadership at all levels of nursing.

**Information Technology:** This track describes the application of systems for storing, retrieving, and sending information as applied to pediatric nursing.

**Advocacy:** This track describes new approaches to promote and improve health and healthcare for all children and their families through advocacy.

## Scoring

All abstracts are evaluated on a 48-point scale in a blinded review process. Review the rubric for each track on pages 4-9 of this document before submitting a proposal.

## Submission Types

Abstracts may be submitted for a 15-, 30- or 60-minute podium presentation (concurrent session), or a poster presentation.

## Guidelines

Spell out abbreviations, acronyms or initials with first use.

Proofread the submission carefully to ensure correct spelling and grammar; points are deducted for misspelled words and incorrect grammar.

While a study may be in progress at the time of abstract submission, it must be complete prior to podium presentation at the SPN conference. For posters, data analysis must be complete by February 1, 2026 in order for findings to be placed on poster prior to submission deadline.

## Instructions

You will be asked to enter the following information into the online submission form. SPN recommends first typing this information into a Word document and then pasting it into the form, to avoid browser time-outs and incomplete submissions.

- To submit an abstract, you must be a member of SPN or have a free guest account on the website. Visit <https://spn.memberclicks.net/login#/login> to create a free account.
- Enter the following information into the form for your abstract:  
**\*Abstract Reviews are blinded. Do not include any identifiers of authors or institutional affiliations within the title, abstract or objectives. If any identifiers are found in the abstract, the presentation will be disqualified.\***

### Step 1:

1. Track: Clinical Practice, Education, Evidence-based Practice, Quality Improvement, Research, Leadership and Management, Information Technology, Advocacy
2. Session title: (100-character limit, including spaces, or roughly 10-15 words)
3. Session Type: Podium (15-, 30-, 60-minute) or Poster
4. Indicate if you would like your podium submission considered for a poster presentation if not accepted
5. Indicate if you would like your podium submission to be considered for a virtual presentation in addition to in-person
6. Abstract: (2,210 character limit, including spaces, or roughly 300 words)
7. Session Description (for podium presentations): type a brief (500-character limit, including spaces, or roughly 100 words) description of your session, to be published in the conference brochure should your abstract be accepted.
  - This short, compelling description describes what participants should expect by attending your session.
8. Podium Submissions Only - Session Description: (500-character limit, including spaces, or roughly 100 words)
9. Literature References (provide 3-5 references):
  - i) Examples: evidence-based practice/peer review journals, clinical guidelines, best practices.
  - ii) Current (no older than 5 years) unless classic/seminal works such as: Benner, P. (1984). *From novice to expert: Excellence and power in clinical nursing practice*. Menlo Park, CA: Addison-Wesley.
  - iii) Contain complete publication information in format such as APA.
  - iv) Resource for formatting references: <http://owl.english.purdue.edu/owl/resource/560/05/>
  - v) Literature references are not counted towards the abstract character limit.
10. Indicate if you have received a grant or sponsorship from SPN for the abstract.

11. Indicate if you are submitting the abstract on behalf of a SPN committee, taskforce or project.
12. Indicate if you are a member of SPN.
13. Indicate if you or any of the primary presenter(s) or author(s) of your abstract are pre-licensure nursing students.
14. Indicate if your submission is consistent with the SPN Mission.
15. Indicate if this will be your first time presenting.
16. Outcome Statement: indicate the anticipated outcome of your presentation by completing this sentence: This session will enable the learner to: \_\_\_\_\_ . (255 character limit, including spaces, or roughly 55 words)
17. Indicate what audience level would best benefit from this presentation.
18. Indicate if this submission has a DEI component (This will not affect your review score).
19. Explain what DEI component your submission has (1,000 character limit, including spaces, or roughly 150 words)

#### Step 2:

20. Enter the following information for each session presenter:

\* The primary presenter will be the main point of contact for all correspondence with the SPN National Office. All concurrent session and poster presenters and co-presenters, including students, are required to register for the full conference by February 2, 2026. If a contributor to your abstract is not attending conference, do not list them as a presenter on the abstract submission form.

- i) Full names with correct and completed credentials, institutions, and email addresses are required for each presenter.
- ii) The “Bio” field for each presenter should be a 3-5 sentence introduction that will be used, if accepted, to introduce each speaker at the beginning of the session. The speaker’s expertise, relevant to the presentation topic, and qualifications should be stated.

#### Step 3:

22. Each presenter must indicate and describe, if applicable, any relevant financial relationships.

#### Step 4:

23. Read and agree to the SPN terms of submission and click OK to submit your proposal.

### Post-Submission Information

Submitters will be notified by the SPN Program Planning Committee of their submission’s status by November 26, 2025.

Accepted abstracts will be assigned to a presentation day and time, which will be determined in Early Spring 2026. Poster presenters will be notified of their poster numbers by the end of March 2026.

**All concurrent session and poster presenters and co-presenters, including students, are required to register for the full conference by February 2, 2026. Failure to register by this date may result in forfeiture of invitation to present at conference.**

Only a presenter listed in the abstract submission process is eligible to present an abstract. If your presentation is accepted and one of the presenters listed on the abstract is unable to attend, please notify the SPN National Office immediately. Any presenter not registered for the conference by February 2, 2026 may be disqualified from presenting.

### Questions

Please contact the SPN National Office: [speakers@pedsnurses.org](mailto:speakers@pedsnurses.org) or (312) 321-5154.

## Clinical Practice Scoring Rubric

**Description:** This track describes new approaches to care, unusual cases, patient and/or family education, or literature reviews of best practices with a summary of the evidence.

**For Categories 1,2, and 4: Yes is worth 4 points and No is worth 0 points. No score of 1,2,3 is possible.**

Category 1: Content consistent with the track (if no, email SPN immediately for reassignment) ☐Yes ☐No

Category 2: Commercial content present? (If yes, describe in comments, for this question – Yes is worth 0 points, No is worth 4) ☐Yes ☐No

Category 4: Content consistent with the SPN Mission (if no there is immediate disqualification) ☐Yes ☐No

**Literature References:** For Category 3 (Literature References), a five-year timeframe is any year between and including 2020 and 2025. Score category 3 as 4 if all references are within a 5-year timeframe (unless classical/seminal works); as 3 if 1 reference is not within a 5-year timeframe (unless classical/seminal works); as 2 if 2 references are not within a 5-year timeframe (unless classical/seminal works); or as 1 if 3 or more references are not within a 5-year timeframe; (unless classical/seminal works).

Category 5: Introduction: Context, relevance, importance clearly described	1	2	3	4
Category 6: Background or History (leading to new approaches to care, prompting literature review, gap addressed by patient/family education or patient history for unusual cases)	1	2	3	4
Category 7: Clinical findings delineated (actual or potential; of topic/condition of interest – i.e. what should the pediatric nurse be looking for)	1	2	3	4
Category 8: Plan of care delineated (May include diagnostic testing and pertinent results/anticipated findings; medications, nursing interventions, etc.). For patient/family education, includes patient/family responsibility for care management	1	2	3	4
Category 9: Patient/family response/outcome described (actual or anticipated in relation to nursing interventions)	1	2	3	4
Category 10: Implications for pediatric nursing practice (may include lessons learned, summary of evidence)	1	2	3	4
Category 11: Relevance to pediatric nursing in the current healthcare environment (based on reviewer's expertise and needs assessment data provided)	1	2	3	4
Category 12: Abstract well written (organized, correct grammar, spelling, etc.)	1	2	3	4
Total Points (max of 48)				

## Education Scoring Rubric

**Description:** This track describes innovative strategies used in educating nurses, in either academia or the practice setting.

**For Categories 1,2, and 4: Yes is worth 4 points and No is worth 0 points. No score of 1,2,3 is possible.**

Category 1: Content consistent with the track (if no, email SPN immediately for reassignment) ☐Yes ☐No

Category 2: Commercial content present? (If yes, describe in comments, for this question – Yes is worth 0 points, No is worth 4) ☐Yes ☐No

Category 4: Content consistent with the SPN Mission (if no there is immediate disqualification) ☐Yes ☐No

**Literature References:** For Category 3 (Literature References), a five-year timeframe is any year between and including 2020 and 2025. Score category 3 as 4 if all references are within a 5-year timeframe (unless classical/seminal works); as 3 if 1 reference is not within a 5-year timeframe (unless classical/seminal works); as 2 if 2 references are not within a 5-year timeframe (unless classical/seminal works); or as 1 if 3 or more references are not within a 5-year timeframe; (unless classical/seminal works).

Category 5: Background: Describes gap in knowledge, skills or practice addressed by educational intervention (include method of needs assessment for interventions in the practice setting)	1	2	3	4
Category 6: Audience: Identifies target audience of the educational intervention	1	2	3	4
Category 7: Planning process: Delineates educational planning or design process (outcome identification, content development, etc.)	1	2	3	4
Category 8: Engagement strategies: Describes educational strategies for learner engagement	1	2	3	4
Category 9: Evaluation: Includes evaluation of educational intervention beyond participant satisfaction (changes in knowledge or behavior, impact on nursing practice or organizational outcomes)	1	2	3	4
Category 10: Implications: Describes lessons learned and implications for practice (academic or nursing professional development practice)	1	2	3	4
Category 11: Relevance to pediatric nursing in the current healthcare environment (based on reviewer's expertise and needs assessment data provided)	1	2	3	4
Category 12: Abstract well written (organized, correct grammar, spelling, etc.)	1	2	3	4
Total Points (max of 48)				

## Evidence-based Practice (EBP) Scoring Rubric

**Description:** This track describes the process and outcomes resulting from the critical appraisal and use or translation of the best and most relevant research evidence related to a clinical question that directly influences pediatric nursing practice.

**For Categories 1,2, and 4: Yes is worth 4 points and No is worth 0 points. No score of 1,2,3 is possible.**

Category 1: Content consistent with the track (if no, email SPN immediately for reassignment) ☐Yes ☐No

Category 2: Commercial content present? (If yes, describe in comments, for this question – Yes is worth 0 points, No is worth 4) ☐Yes ☐No

Category 4: Content consistent with the SPN Mission (if no there is immediate disqualification) ☐Yes ☐No

**Literature References:** For Category 3 (Literature References), a five-year timeframe is any year between and including 2020 and 2025. Score category 3 as 4 if all references are within a 5-year timeframe (unless classical/seminal works); as 3 if 1 reference is not within a 5-year timeframe (unless classical/seminal works); as 2 if 2 references are not within a 5-year timeframe (unless classical/seminal works); or as 1 if 3 or more references are not within a 5-year timeframe; (unless classical/seminal works).

Category 5: Background: clinical issue or nursing practice issue identified	1	2	3	4
Category 6: Audience: Identifies target audience of the Evidenced Based Practice	1	2	3	4
Category 7: Synthesis of literature: briefly describes the current evidence	1	2	3	4
Category 8: EBP model or Conceptual framework: describes the EBP model or conceptual framework used to guide adoption of practice change	1	2	3	4
Category 9: Implementation Strategies: describes how changes were implemented	1	2	3	4
Category 10: Evaluation If complete: states outcomes of project, barriers identified, lessons learned and implications for pediatric nursing practice. If incomplete: describes plan for evaluation	1	2	3	4
Category 11: Relevance to pediatric nursing in the current healthcare environment (based on reviewer's expertise and needs assessment data provided)	1	2	3	4
Category 12: Abstract well written (organized, correct grammar, spelling, etc.)	1	2	3	4
Total Points (max of 48)				

## Quality Improvement Scoring Rubric

**Description:** This track describes the process improvements and clinical quality outcomes resulting from the use of improvement science methodology that directly influences pediatric nursing practice.

**For Categories 1,2, and 4: Yes is worth 4 points and No is worth 0 points. No score of 1,2,3 is possible.**

Category 1: Content consistent with the track (if no, email SPN immediately for reassignment) ☐Yes ☐No

Category 2: Commercial content present? (If yes, describe in comments, for this question – Yes is worth 0 points, No is worth 4) ☐Yes ☐No

Category 4: Content consistent with the SPN Mission (if no there is immediate disqualification) ☐Yes ☐No

**Literature References:** For Category 3 (Literature References), a five-year timeframe is any year between and including 2020 and 2025. Score category 3 as 4 if all references are within a 5-year timeframe (unless classical/seminal works); as 3 if 1 reference is not within a 5-year timeframe (unless classical/seminal works); as 2 if 2 references are not within a 5-year timeframe (unless classical/seminal works); or as 1 if 3 or more references are not within a 5-year timeframe; (unless classical/seminal works).

Category 5: Background: clinical nursing practice or system issue identified	1	2	3	4
Category 6: Purpose: states aim of the project	1	2	3	4
Category 7: Methods: describes setting, practice change or system improvement being implemented, outcome measures and evaluation method	1	2	3	4
Category 8: Implementation Strategies: describes the use of improvement science methodology to implement changes	1	2	3	4
Category 9: Outcomes – Describes results, barriers identified and lessons learned. If not complete, describes plans to assess outcomes	1	2	3	4
Category 10: Implications for pediatric nursing practice (If in process, describes potential implications)	1	2	3	4
Category 11: Relevance to pediatric nursing in the current healthcare environment (based on reviewer's expertise and needs assessment data provided)	1	2	3	4
Category 12: Abstract well written (organized, correct grammar, spelling, etc.)	1	2	3	4
Total Points (max of 48)				

## Research Scoring Rubric

**Description:** This track describes systematic investigations designed to create new pediatric knowledge.

**For Categories 1,2, and 4: Yes is worth 4 points and No is worth 0 points. No score of 1,2,3 is possible.**

Category 1: Content consistent with the track (if no, email SPN immediately for reassignment) ☐Yes ☐No

Category 2: Commercial content present? (If yes, describe in comments, for this question – Yes is worth 0 points, No is worth 4) ☐Yes ☐No

Category 4: Content consistent with the SPN Mission (if no there is immediate disqualification) ☐Yes ☐No

**Literature References:** For Category 3 (Literature References), a five-year timeframe is any year between and including 2020 and 2025. Score category 3 as 4 if all references are within a 5-year timeframe (unless classical/seminal works); as 3 if 1 reference is not within a 5-year timeframe (unless classical/seminal works); as 2 if 2 references are not within a 5-year timeframe (unless classical/seminal works); or as 1 if 3 or more references are not within a 5-year timeframe; (unless classical/seminal works).

Category 5: Background: synthesizes literature	1	2	3	4
Category 6: Purpose: delineates research aim, question or hypothesis	1	2	3	4
Category 7: Methods: describes study design, setting, sample, data collection	1	2	3	4
Category 8: Results If complete: Describes data analysis method and findings If not complete: Describes plans for data analysis	1	2	3	4
Category 9: Discussion If complete: Describes limitations and relevance of results If not complete: Describes limitations	1	2	3	4
Category 10: Implications If complete: Describes implications for research, education and pediatric nursing practice If not complete: Identifies plans for completion prior to conference	1	2	3	4
Category 11: Relevance to pediatric nursing in the current healthcare environment (based on reviewer's expertise and needs assessment data provided)	1	2	3	4
Category 12: Abstract well written (organized, correct grammar, spelling, etc.)	1	2	3	4
Total Points (max of 48)				

## Leadership and Management

**Description:** *This track describes innovative projects or initiatives related to management of nursing staff or transformational leadership at all levels of nursing.*

**For Categories 1,2, and 4: Yes is worth 4 points and No is worth 0 points. No score of 1,2,3 is possible.**

Category 1: Content consistent with the track (if no, email SPN immediately for reassignment) ☐Yes ☐No

Category 2: Commercial content present? (If yes, describe in comments, for this question – Yes is worth 0 points, No is worth 4) ☐Yes ☐No

Category 4: Content consistent with the SPN Mission (if no there is immediate disqualification) ☐Yes ☐No

**Literature References:** For Category 3 (Literature References), a five-year timeframe is any year between and including 2020 and 2025. Score category 3 as 4 if all references are within a 5-year timeframe (unless classical/seminal works); as 3 if 1 reference is not within a 5-year timeframe (unless classical/seminal works); as 2 if 2 references are not within a 5-year timeframe (unless classical/seminal works); or as 1 if 3 or more references are not within a 5-year timeframe; (unless classical/seminal works).

Category 5: Background: practice or leadership issue identified	1	2	3	4
Category 6: Audience: Identifies target audience of the Leadership and Management	1	2	3	4
Category 7: Synthesis of Literature: briefly describes the current evidence supporting the project or initiative or the need for change	1	2	3	4
Category 8: Implementation Strategies: identifies primary stakeholders, actions to obtain support and how changes were implemented	1	2	3	4
Category 9: Evaluation: describes measurable outcomes of project or initiative, (1 – no outcomes included, 4 – sustainable measurable outcomes demonstrated)	1	2	3	4
Category 10: Implications: identifies implications for pediatric nursing practice	1	2	3	4
Category 11: Relevance to pediatric nursing in the current healthcare environment (based on reviewer's expertise and needs assessment data provided)	1	2	3	4
Category 12: Abstract well written (organized, correct grammar, spelling, etc.)	1	2	3	4
Total Points (max of 48)				

## Information Technology

**Description:** This track describes the application of systems for storing, retrieving, and sending information as applied to pediatric nursing.

**For Categories 1,2, and 4: Yes is worth 4 points and No is worth 0 points. No score of 1,2,3 is possible.**

Category 1: Content consistent with the track (if no, email SPN immediately for reassignment) ☐Yes ☐No

Category 2: Commercial content present? (If yes, describe in comments, for this question – Yes is worth 0 points, No is worth 4) ☐Yes ☐No

Category 4: Content consistent with the SPN Mission (if no there is immediate disqualification) ☐Yes ☐No

**Literature References:** For Category 3 (Literature References), a five-year timeframe is any year between and including 2020 and 2025. Score category 3 as 4 if all references are within a 5-year timeframe (unless classical/seminal works); as 3 if 1 reference is not within a 5-year timeframe (unless classical/seminal works); as 2 if 2 references are not within a 5-year timeframe (unless classical/seminal works); or as 1 if 3 or more references are not within a 5-year timeframe; (unless classical/seminal works).

Category 5: Background/History: Leading to novel use of technologies and/or opportunity for solutions to patient care challenges (gaps in patient safety, response to evidence driving clinical initiatives etc.)	1	2	3	4
Category 6: Introduction: Context, relevance, importance clearly described	1	2	3	4
Category 7: Technology-Clinical project delineated: (Order sets, guidelines, pathways, dashboards, clinical decision support) How does information technology support clinical care?	1	2	3	4
Category 8: Methods: (Workflow analysis, design, validation, education, and implementation)	1	2	3	4
Category 9: Patient/family clinical or staff outcomes described: (Study outcomes, satisfaction, project turn around, patient length of stay, appropriate/timely interventions, resource use)	1	2	3	4
Category 10: Implications for individual and population health: (interprofessional collaboration, expansion to broader groups/disease states/clinical settings)	1	2	3	4
Category 11: Relevance to pediatric nursing in the current healthcare environment (based on reviewer's expertise and needs assessment data provided)	1	2	3	4
Category 12: Abstract well written (organized, correct grammar, spelling, etc.)	1	2	3	4
Total Points (max of 48)				

## Advocacy

**Description:** This track describes new approaches to promote and improve the health and healthcare for all children and their families through advocacy.

**For Categories 1,2, and 4: Yes is worth 4 points and No is worth 0 points. No score of 1,2,3 is possible.**

Category 1: Content consistent with the track (if no, email SPN immediately for reassignment) ☐Yes ☐No

Category 2: Commercial content present? (If yes, describe in comments, for this question – Yes is worth 0 points, No is worth 4) ☐Yes ☐No

Category 4: Content consistent with the SPN Mission (if no there is immediate disqualification) ☐Yes ☐No

**Literature References:** For Category 3 (Literature References), a five-year timeframe is any year between and including 2020 and 2025. Score category 3 as 4 if all references are within a 5-year timeframe (unless classical/seminal works); as 3 if 1 reference is not within a 5-year timeframe (unless classical/seminal works); as 2 if 2 references are not within a 5-year timeframe (unless classical/seminal works); or as 1 if 3 or more references are not within a 5-year timeframe; (unless classical/seminal works).

Category 5: Background: health policy or advocacy issue identified	1	2	3	4
Category 6: Purpose: states goals of the project or initiative	1	2	3	4
Category 7: Synthesis of literature: briefly describe the current evidence supporting the project or issue	1	2	3	4
Category 8: Implementation Strategies: identifies actions including primary stakeholders, how to obtain support and how changes were implemented	1	2	3	4
Category 9: Evaluation: describes measurable outcomes of project or initiative	1	2	3	4
Category 10: Implications: Clearly articulates implications for pediatric nursing practice, recommendations and alternatives to address policy/advocacy issue	1	2	3	4
Category 11: Recommendations for taking action on policy or advocacy issue	1	2	3	4
Category 12: Abstract well written (organized, correct grammar, spelling, etc.)	1	2	3	4
Total Points (max of 48)				