



Association for the Advancement of Restorative Medicine

93 Barre Street, Ste 1, Montpelier, VT 05602 • 866-962-2276 • www.restorativemedicine.org

Research Poster Abstract Submission Form

All fields are required. You may submit more than one poster abstract, but please complete a Submission Form for each one. Accepted abstracts will be published in the [Journal of Restorative Medicine \(JRM\)](#), which is an online journal. Please email completed Submission forms to Jen Palmer Jen@restorativemedicine.org

Contact Information (Supply additional author information if applicable):

First Author

Name: _____
Degrees: _____
Institution: _____
Department: _____
City: _____
State/Province: _____
Country: _____
Email: _____
Phone Number: _____

Second Author

Name: _____
Degrees: _____
Institution: _____
Department: _____
City: _____
State/Province: _____
Country: _____
Email: _____

Third Author

Name: _____
Degrees: _____
Institution: _____

Department: _____
City: _____
State/Province: _____
Country: _____
Email: _____

Topic Area of Poster (as listed in Areas of Interest in the Call for Posters)

Title (20 word maximum): _____

Three to Five Keywords: _____

Poster Abstract (250 word max)

Introduction:

Methods:

Results:

Discussion/Conclusions:

