

AAPB 57th Annual Scientific Meeting 2027 - Call for Poster Presentations

Submit your poster abstract today!

Thank you for your interest in submitting your POSTER PRESENTATION for the AAPB 57th Annual Scientific Meeting (Louisville, KY) - May 12-15, 2027. Poster display and presentation will occur on Friday, May 14, 2027.

The deadline for first-round review consideration is February 1, 2027 at 11:59 pm ET.

Please address questions to AAPB: (800) 477-8892 or info@aapb.org.

The goal of this conference is to convene healthcare professionals (psychologists, clinicians, physicians, researchers, and mental health professionals) using biofeedback and applied psychophysiology to share information, research, concepts, and outcomes.

The system allows for you to request a copy of your completed submission at the conclusion of this online form, once you hit submit. Please have your submission ready before you start entering this form, as you will not be able to edit your responses after you hit the submit button. Once you submit, you will only be able to download a copy of what AAPB has received. Any changes needed? Contact michelle@aapb.org for special assistance.

PLEASE NOTE:

Symposia, Orals and Workshop abstracts are collected on a separate submission site.
Click here to access the Abstract Submission site.

We look forward to receiving your proposal! Thank you for your time.



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Primary Submission Contact

Please indicate one individual with whom we should communicate the poster status. Only the primary submission contact will receive information on the status of this submission. The primary submission contact is responsible to communicate with all presenters/authors.

* 1. Please complete the following information

First and Last Name	
Credentials	
Title/Institution	
Address	
City/Town	
State/Province	
ZIP/Postal Code	
Country	
Email Address	
Phone Number	

* 2. Is the primary submission contact also a presenter/author?

- ◯ Yes
- ◯ No

3. If yes, upload CV of the Primary Presenter here

Choose File Choose File No file chosen

* 4. In the past 12 months, has the submission contact/primary presenter had a financial relationship* with a commercial organization which produces healthcare products or services?

- ◯ Yes, I have financial interests to disclose
- ◯ No, I have no financial interests to disclose

5. If yes, please indicate the following information:

Commercial Interest	
Nature of the Relationship	



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Primary Presenter Information

Please include the contact information for the primary presenter, IF different from the primary contact associated with this submission.

* 6. Please complete the following information:

Name	
Credentials	
Title/Institution	
Address	
City/Town	
State/Province	
ZIP/Postal Code	
Country	
Email Address	
Phone Number	

* 7. Upload CV of Presenter here

Choose File | Choose File | No file chosen

* 8. In the past 12 months, has the primary presenter had a financial relationship* with a commercial organization which produces healthcare products or services?

- ◯ Yes, I have financial interests to disclose
- ◯ No, I have no financial interests to disclose

9. If yes, please indicate the following information:

Commercial Interest	
Nature of the Relationship	



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Primary Presenter Profession

* 10. Please indicate your discipline/field (check all that apply):

- [ ] Psychology
- [ ] Medicine
- [ ] Nursing
- [ ] Social Work
- [ ] Dentistry
- [ ] Counseling
- [ ] Physical Therapy
- [ ] Education
- [ ] Occupational Therapy
- [ ] Speech Pathology
- [ ] Chiropractic
- [ ] Sports Psychology
- [ ] Other (please specify)

* 11. Is the primary presenter a psychologist? (Please note: This question satisfies a specific APA CE sponsor requirements)

- ◯ Yes
- ◯ No



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Poster Information

* 12. Poster Title (80 characters max.)

* 13. Poster Synopsis (300 words max.) - Please include definitions for acronyms, if applicable:



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Poster Citations

Please provide NO LESS THAN FIVE scientific citations from current PEER-REVIEWED only publications/journals (research and/or theoretical) supporting the content of your presentation. Text book references do not qualify.
APA format is MANDATORY: Click here for examples.

e.g., Author, A. A., & Author, B. B. (Date of publication). Title of article. Title of Publication, volume number (issue number if available). URL http://www.someaddress.com/full/url/ or publication

Citations more than ten years old are NOT valid.

* 14. Please provide five scientific citations (research and/or theoretical) supporting the content of your poster:

1.
2.
3.
4.
5.



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Co-Authors

* 15. Does your poster have additional authors?

- ◯ Yes
- ◯ No



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First Additional Author

* 16. Please complete the following information:

Name	
Credentials	
Title/Institution	
Address	
City/Town	
State/Province	
ZIP/Postal Code	
Country	
Email Address	
Phone Number	

17. Is this author a psychologist?

- ◯ Yes
- ◯ No

* 18. Upload First Additional Author CV here

Choose File | Choose File | No file chosen

* 19. Does your poster have additional authors?

- ◯ Yes
- ◯ No

* 20. Does this presenter have any financial Interest to disclose?

- ◯ Yes
- ◯ No

21. If yes, please indicate the following information:

Commercial Interest	
Nature of the Relationship	



Second Additional Author

* 22. Please complete the following information:

Name	
Credentials	
Title/Institution	
Address	
City/Town	
State/Province	
ZIP/Postal Code	
Country	
Email Address	
Phone Number	

* 23. Upload Second Additional Author CV here

Choose File Choose File No file chosen

* 24. Is this author a psychologist?

- ◯ Yes
- ◯ No

* 25. Does this presenter have any financial Interest to disclose?

- ◯ Yes
- ◯ No

26. If yes, please indicate the following information:

Commercial Interest	
Nature of the Relationship	

* 27. Does your poster have additional authors?

- ◯ Yes
- ◯ No



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Third Additional Author

* 28. Please complete the following information:

Name	
Credentials	
Title/Institution	
Address	
City/Town	
State/Province	
ZIP/Postal Code	
Country	
Email Address	
Phone Number	

29. Is this author a psychologist?

- ◯ Yes
- ◯ No

* 30. Upload Third Additional Author CV here

Choose File | Choose File | No file chosen

* 31. Does this presenter have any financial Interest to disclose?

- ◯ Yes
- ◯ No

32. If yes, please indicate the following information:

Commercial Interest	
Nature of the Relationship	

* 33. Does your poster have additional authors?

- ◯ Yes
- ◯ No



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Fourth Additional Author

* 34. Please complete the following information:

Name	
Credentials	
Title/Institution	
Address	
City/Town	
State/Province	
ZIP/Postal Code	
Country	
Email Address	
Phone Number	

35. Is this author a psychologist?

- ◯ Yes
- ◯ No

* 36. Upload Fourth Additional Author CV here

Choose File | Choose File | No file chosen

* 37. Does this presenter have any financial Interest to disclose?

- ◯ Yes
- ◯ No

38. If yes, please indicate the following information:

Commercial Interest	
Nature of the Relationship	

39. If you have additional authors, please list them here, inclusive of credentials.



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Speaker Disclosure Form

- **In order to ensure independence, objectivity and scientific rigor in all activities and in accordance with the AMA and APA Standards for Commercial Support; all those in a position to control the content of an educational activity are required to disclose their relevant financial relationships. This includes indicating that you have nothing to disclose. Your disclosure will be distributed to the activity attendees.**

- **Government organizations and non-profits are NOT commercial organizations, so we are not interested in those relationships.**

- *** Financial relationships are those relationships in which the individual benefits by receiving a salary, royalty, intellectual property rights, consulting fee, honoraria, ownership interest (e.g., stocks, stock options or other ownership interest, excluding diversified mutual funds), or other financial benefit. Financial benefits are usually associated with roles such as employment, management position, independent contractor (including contracted research), consulting, speaking and teaching, membership on advisory committees or review panels, board membership, and other activities for which remuneration is received or expected. 'Contracted research' refers to research funding in which an institution receives a grant and manages the grant funds and an individual(s) is the principal or named investigator on the grant. Relevant financial relationships are those in which an individual (including the**

individual's spouse/domestic partner/business partner) has/has had a personal financial relationship (in any amount) occurring in the last 12 months with a commercial entity producing health care goods or services and that individual also has control over educational content (planning or presenting) about the products or class of products of the commercial interest.



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AAPB Commercial Bias Policy

Commercial Support is financial, or in-kind, contributions given by a commercial interest which is used to pay all or part of the costs of a Continuing Medical Education activity.

When there is commercial support there must be a written agreement that is signed by the commercial interest and the accredited provider prior to the activity taking place.

AAPB will not accept presentations that demonstrate ANY level of commercial bias or conflict of interest. AAPB strongly adheres to the commercial bias criterion as described by the Accreditation Council for Continuing Medical Education (ACCME), as stated in Standard 5:

-Standard 5.1 The content or format of any AAPB approved presentation or its related materials must promote improvements or quality in healthcare and not a specific proprietary business interest of a commercial interest.

-Standard 5.2 Presentations must give a balanced view of therapeutic options. Use of generic names will contribute to this impartiality. If the educational material or content includes trade names, where available trade names from several companies should be used, not just trade names from a single company.

Top 10 Actions Perceived by Health Care Professionals as Commercial Bias[1]

1. Focusing on one agent, device, or procedure when others exist
2. Not providing a balanced presentation of the benefits and adverse effects for all agents, methods, or procedures in an activity
3. Most of the faculty have relationships with the grantor sponsoring the activity
4. References to inappropriate studies (promotional, bad design, etc.)
5. Inconsistent use of brand names
6. Misleading title
7. Lack of appropriate scientific references
8. Misleading learning objectives
9. Misleading overview statement
10. Endorsement of a particular product or practice by a respected and well-known expert in the field

Based on: Cornish and Leist. JCEHP 2006; 26:161-7.

For more information on what constitutes commercial bias compared with the personal opinion of experts, click here.

* 40. Is this poster presentation free of commercial bias?

- ◯ Yes
- ◯ No



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Utility/Validity

* 41. Please list the limitations, severe risks, or most common risks (if any) found in the content of your presentation. If your presentation includes discussions of clinical assessments, treatments, or interventions, please describe the evidence of this information:

42. Your signature below will constitute a warranty that all materials provided for program presentation and handouts are your own original work; that it does not violate any copyright or other proprietary rights of others. The material is factually accurate and contains no libelous matter; and that you assign the Association for Applied Psychophysiology and Biofeedback (AAPB) the use of copyright therein for purposes of making this presentation and distributing handouts.

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Additional Details

43. Please use this space for anything else the Program Committee needs to know about this submission:



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Thank you for your submission! Please click below if you wish to receive a copy of your submission.