



PBRN Call for Papers Submission FAQ

WHERE DO I SUBMIT MY PROPOSAL?

submit.napcrg.org to submit your presentation.

HELP! I CAN'T LOG IN!

Go to napcrg.org, click [Member Portal in the upper right corner](#) and then Forgot Password to reset your password. After you have completed a password reset, return to napcrg.org and login to create your submission. If you're still having trouble, email napcrgoffice@napcrg.org.

WHAT IS THIS SALESFORCE SCREEN, AND SHOULD I GRANT ACCESS?

Yes, the screen is safe. You will only be asked for this one time. It is required because our submission system runs through a different program, but it uses your member account (which is in Salesforce) to link your login.



WHAT FIELDS ARE REQUIRED FOR A SUBMISSION TO BE COMPLETE?

Questions with a **red asterisk *** must be answered for the submission to be considered complete. Incomplete submissions WILL NOT be reviewed and will not be considered for the conference.

HOW DO I KNOW WHEN MY SUBMISSION IS COMPLETE AND READY FOR REVIEW?

Once you have submitted your proposal, your submission details will appear on the screen. Please review this carefully. **Be sure to confirm the "Submission Completed" status.**

GOOD TO GO: When all required fields have been completed, your submission will be shown as: **Submission Completed: True**

Conference: Practice-Based Research Network Conference 2022

Category: Oral Presentations Research Completed

Submission Id: 3290

Submission Title: TEST: Example Submission

Submission Completed: **True**

 [Edit Submission](#)

NOT GOOD TO GO: When a required field is missing, your submission will be shown as:
Submission Completed: False

Conference: Practice-Based Research Network Conference 2022

Category: Oral Presentations Research Completed

Submission Id: 3290

Submission Title: TEST: Example Submission

Submission Completed: **False**

 Edit Submission

 Click the blue pencil next to "Edit Submission" to complete the missing fields.
You MUST complete the missing fields or else your submission will be considered incomplete and NOT reviewed for consideration.

HOW DO I ADD CO-PRESENTERS/AUTHORS?

Participants can be added to the presentation once your submission is completed. A link to share with other presenters/authors will be visible in the displayed blue box (see image).

Follow these instructions and provide the indicated information to other presenters/authors:

Invite Co-Author(s) to Submission

Copy the text in the blue box and email it to the co-author(s) that you want to include on this submission. This text contains all required information needed for the invitees to join the submission.

Please follow the link <https://submit.napcrg.org/Presenter/AddParticipant?SubmissionId=5741> to add yourself to the Practice-Based Research Network Conference 2024 submission "Title".

If you do not have an account you will need to create one by clicking "Create a New Account" on the login page. Once the account is created re-visit <https://submit.napcrg.org/Presenter/AddParticipant?SubmissionId=5741>

Once logged in you will be directed to select your role of "Co-Author" or "Lead Presenter" and complete a disclosure if it is not up to date.

CAN I ADD OTHER PRESENTERS AFTER THE SUBMISSION DEADLINE?

Yes. You can add lead and co-presenters after the submission deadline. We recommend doing so as early as possible to ensure information is correct in our conference materials.

PBRN Submissions, screen by screen

These are all the screens you'll encounter as you go through the PBRN submission process:

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Select Submission Category

Conference: Practice-Based Research Network Conference 2025

Learn more about the submission categories here: <https://napcrg.org/conferences/pbrn/call-for-papers/>

Select the Submission Category

SAVE AND CONTINUE

CANCEL

CATEGORY OPTIONS

Select Submission Category

Conference: Practice-Based Research Network Conference 2025

Learn more about the submission categories here: <https://napcrg.org/conferences/pbrn/call-for-papers/>

Select the Submission Category

✓ - Select -

- Oral Presentations Research Completed
- Oral Presentations In-Progress
- Poster Presentations Research Completed
- Poster Presentations Research In-Progress
- Workshops

YOU ARE ABLE TO SUBMIT YOUR PROPOSAL EVEN IF YOUR RESEARCH IS NOT YET COMPLETED.

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Submission Role Definitions

Submitter-Only: Not a participant in the presentation. Used for submitting on behalf of someone. Submitter Only is NOT listed in conference materials.

Submitter and Lead Presenter: The lead in giving the presentation.

Submitter and Co-Author: A contributor to the submission.

Select Your Role on Submission

Title (125 characters including spaces - DO NOT use all capitals)

Chars Remaining 125

Abstract (maximum 2,500 characters including spaces)

The abstract should be no longer than 2,500 characters in a single paragraph with the following subheads: Background, Settings & Participants, Methods, Results, and Conclusions. See <https://napcrg.org/conferences/pbrn/call-for-papers/> for an example. Only include the abstract in this session. Do not include title or author(s).

Abstract (2,500) characters including spaces

Chars Remaining 2500

SAVE AND CONTINUE

CANCEL

Submission Created

Next Step: Create submission proposal. The submission proposal consists of category specific questions.

[+ CONTINUE SUBMISSION PROPOSAL](#)

Submission Details

Conference: Practice-Based Research Network Conference 2025

Category: Oral Presentations Research Completed

Submission Id: 7236

Title:

Submission Abstract

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Learning Objectives: Clear and understandable learning objectives are REQUIRED to qualify for Continuing Education (CE) credit. Your submission will be excluded from CE credit if these are not clear. Please List at least 2 learning objectives using these guidelines:

- Clearly describe what you want learners to take away and implement after the session in active, measurable terms (e.g. - define, interpret, explain, apply).
- Each objective must be specific, concise, and limited to one sentence.
- Example - "On completion of this session, participants should be able to identify and describe the three primary tenets of the Patient Self-Efficacy Model."

First Objective: On completion of this session the participants should be able to... *(Character limit including spaces: 300)

Second Objective: On completion of this session the participants should be able to... *(Character limit including spaces: 300)

Third Objective: On completion of this session the participants should be able to... (Character limit including spaces: 300)

**THESE ARE VERY
IMPORTANT FOR
CREDIT QUALIFICATION**

RELEVANCE STATEMENT: (In layman's terms, describe the relevance or "take home message" of this session to a patient, community member, or non-researcher) *(Character limit including spaces: 1500)

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Special Call!

We are looking for projects with a focus on access to primary care within PBRNs. Please select below if you would like to be considered for the special opportunity to present in a special session at the 2025 PBRN Conference.

Would you like your submission to be considered for the focus on access to primary care special presentation?*

Select Answer

Are you a first-time submitter for NAPCRG's PBRN Conference?*

Select Answer

The Author agrees that the materials they submit to NAPCRG or one of its affiliates for use in NAPCRG's program materials for NAPCRG's PBRN Conference, along with any presentation at the PBRN Conference, are: (a) works for hire, done for NAPCRG, within the meaning of the copyright laws; or (b) the Author is hereby assigning to NAPCRG the rights to prepare derivative works of the materials and presentation and to use, copy, publish, distribute, license, display, or publicly perform in any form and in any media the PBRN Conference materials and presentation.

The undersigned Author further represents they have the authority to grant the rights described in the above paragraph.*

Select Answer

CONFIRMATION

Submission Details

Your submission has been successfully submitted. To **add presenters** follow the instructions listed below under "Invite Presenter(s) to Submission".
[Return to the main dashboard](#)

Conference: Practice-Based Research Network Conference 2025

Category: Oral Presentations Research Completed

Submission Id:

Submission Title:

Submission Completed: True

 **Make sure this shows as "True"**

 [Edit Submission](#)

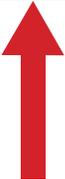
Invite Co-Author(s) to Submission

Copy the text in the blue box and email it to the co-author(s) that you want to include on this submission. This text contains all required information needed for the invitees to join the submission.

Please follow the link <https://submit.napcrg.org/Presenter/AddParticipant?SubmissionId=7236> to add yourself to the Practice-Based Research Network Conference 2025 submission "Test - Natalie".

If you do not have an account you will need to create one by clicking "Create a New Account" on the login page. Once the account is created re-visit <https://submit.napcrg.org/Presenter/AddParticipant?SubmissionId=7236>

Once logged in you will be directed to select your role of "Co-Author" or "Lead Presenter" and complete a disclosure if it is not up to date.


**Adding co-authors and
presenter instructions here**

COMPLETE YOUR DISCLOSURE IF NEEDED

Disclosure

Every presenter is required to fully disclose any relevant financial interest or other relationship with the commercial supporter(s) of this educational activity or with the manufacturer(s) of any commercial product(s) and/or providers of commercial services discussed in this educational activity including 1-year prior to and/or 1-year following conference presentation(s).

Every presenter is also required to fully disclose when an unlabeled use of a commercial product, or an investigational use not yet approved for any purpose, is discussed during an educational activity.

Disclosure of Financial Relationships

Part I: Check either A or B. You must check only one button. **Required ***

- A. Neither I nor my immediate family has a financial relationship or interest in any commercial interest producing, marketing, re-selling, or distributing health care goods or services consumed by, or used on, patients**
- B. I have or a member of my immediate family have a financial relationship or interest in any commercial interest producing, marketing, re-selling, or distributing health care goods or services consumed by, or used on, patients**

Part II: If you checked B above, please list all entities and nature of relationship with each, e.g., research grants, stock or bond holdings, employment, ownership or partnership, consulting fees, other remuneration (honoraria, travel expenses, etc)

Disclosure of Unlabeled/Investigational Uses of Products

Part III: Check either A or B. You must check only one button. **Required ***

- A. The content of my material(s)/presentation(s) in this CME activity WILL NOT include discussion of unapproved or investigational uses of products or devices.**
- B. The content of my material(s)/presentation(s) in this CME activity WILL include discussion of unapproved or investigational uses of products or devices as indicated below.**

Part IV: If you checked B above, please describe the unapproved or investigational uses of products or devices that you will discuss in your material(s)/presentation(s):

Disclosure of Speakers' Bureau

Part V: Check either A or B. You must check only one button. **Required ***

- A. Neither I nor anyone in my immediate family is a member of a speakers' bureau for a proprietary entity producing health care goods or services.**
- B. I am or a member of my immediate family is a member of a speakers' bureau for a proprietary entity producing health care goods or services.**

Part VI: If you checked B above, please describe the involvement with the speaker's bureau. For example, did you or a member of your immediate family receive training, travel for this training, did the company provide audio visual material, did the company pay any expenses, did the company provide an honorarium, consulting fee, or any other type of compensation?

Acknowledgement

Part VII: I have read the policy on full disclosure. If I have indicated a financial relationship or interest, I understand that this information will be reviewed to determine whether a conflict of interest may exist, and I may be asked to provide additional information. I understand that failure or refusal to disclose, false disclosure, or inability to resolve conflicts of interest will require us to identify a replacement.

Type your full name in the space below to acknowledge that you will comply with our disclosure policy.

SAVE

CANCEL