

# Photo Competition

1. Requirements for Eligibility to Submit
  - A. Attending physicians, fellows, residents and graduated residents, medical students, and transitional students are eligible to submit.
  - B. AAEM or AAEM/RSA membership is not required to submit. If invited to present at Scientific Assembly, the presenters must register themselves for the conference. Conference registration is free for AAEM and AAEM/RSA members.
2. There is no fee for submitting an abstract. All abstracts must be submitted and presented in English.
3. Previous Presentations of Abstracts: Abstracts presented or published as an article on or before September 6, 2022, may not be submitted. Abstracts that have been presented at the national meetings of other organizations may not be submitted. Abstracts that have been presented at international meetings may be submitted. You may submit this abstract to future conferences and publications. Abstracts currently under consideration for other conferences or publications may be submitted.

## Submission Instructions

Photo submissions must include the following:

1. At least one, but no more than three images. Photographs of patients, pathology specimens, Gram stains, EKGs, and radiographic studies or other visual data may be submitted. Your submission should depict clear examples of findings that are relevant to the practice of emergency medicine or findings of unusual interest that have educational value.
2. Chief complaint (max 25 words)
3. History of present illness (max 150 words)
4. Pertinent physical exam (max 100 words)
5. Pertinent laboratory data (max 100 words)
6. Two or three clinical questions (max 15 words) and answers (max 25 words).
7. A brief discussion of the case, including an explanation of the findings in the photo. (max 300 words)
8. Two or three take-home points or “pearls” (max 50 words)

## Tips for Writing a Great Photo Case

- Do not give away the diagnosis or pertinent finding in your poster title or the HPI. The case should be a mystery until you reveal the diagnosis or pertinent finding in the questions & answers section or the case discussion.
- Check for spelling, punctuation, and grammatical errors.
- Include the patient’s age and gender in the history.
- CT and ultrasound images are preferred over image modalities that require interpretation by radiology or another specialist. Multiple imaging modalities are preferred.
- When images are unclear, add arrows or asterisks with labels to the findings.

- For labs, include units and reference ranges.
- Use of abbreviations: The use of standard abbreviations is desirable. A special or unusual abbreviation should be placed in parentheses after the first appearance of the full word it represents. Numerals rather than words should indicate numbers, except to begin sentences.
- Use of drug names: Each time a proprietary drug name is used in the abstract, the first letter is capitalized. Nonproprietary (generic) drug names are preferred and are not capitalized.
- Use captions on images. If you refer to specific images in your case discussion, please number the images in your captions, e.g., Image 2: Follow up EKG showing improvement of T wave inversion.
- Clinical questions should require some thought for a trainee to answer. In addition to asking for the diagnosis/pertinent finding or initial management steps, consider asking the viewer to identify the underlying condition, risk factors, the patient populations that are high risk, pitfalls for a physician in diagnosing or treating the condition, why a particular imaging modality was indicated, what adjuncts can be used if initial management fails, what potential life- or limb-threatening complication could arise, etc.

### Photo Scoring Criteria

The Competition Work Group will consider the below criteria when reviewing Photo Competition case submissions.

<b>Clinical Value of Case</b>	
This case is particularly dramatic or shows a relatively uncommon disease or disease presentation. Image(s) directly relate to the case and are required to make a clinical diagnosis. More than one imaging modality provided.	5
	4
This case is somewhat interesting. The image relates to the case but is not required for diagnosis. Single imaging modality provided.	3
	2
This is a typical presentation of a typical disease process. Image is only indirectly related to the case.	1
<b>Quality of Image(s)</b>	
A striking clinical finding immediately apparent with minimal additional information; requires immediate EM physician interpretation to make diagnosis.	5
	4
Adequate but suboptimal image, requires arrows or circles to see the clinical finding. The finding may be identified by an experienced EM physician, but will occasionally be missed by trainees.	3
	2
Hard to understand the value of this image. Image is unclear or poorly labeled. Image modality is outside the scope of EM practice and requires interpretation by Radiology or another specialist.	1

<b>Usefulness of Clinical Questions</b>	
The questions challenge trainees. They are well thought out and cause the learner to put some thought into developing an answer. They highlight essential clinical knowledge.	5
	4
The answers to the questions are not obvious, but require only a little thought to answer. There is moderate educational value to trainees.	3
	2
The answers to the questions are obvious and do not require more than a reflex response. Little to no added educational value for trainees.	1