



PRESENTER GUIDELINES – ELECTRONIC POSTERS

The following guidelines will provide you with valuable information about preparing and uploading your electronic poster file. Please read these carefully, as poster presentations not complying with these guidelines may not play properly.

All posters have to be prepared in PowerPoint format (.pptx) and uploaded to the BSIR ASM upload portal (access details were sent to the presenter by email). The upload deadline is Sunday, August 11, 2024, 23:59 BST.

We ask for your understanding that **posters sent by email cannot be accommodated in the system** and will be considered as not submitted. It is the responsibility of the poster presenter to upload their poster by the deadline. Kindly note that there will be no poster upload facilities at the congress centre. Please do not bring any printed posters to the congress centre, as no poster boards will be available.

After their release, electronic posters will be **viewable onsite and online as on demand content** for the attendees, given that at least one of the poster authors has a valid congress registration.

Onsite, an area with dedicated PCs will be at the attendees' disposal. All posters will be retrievable from each computer at any time throughout the congress. **Consequently, there is no specific time for poster authors to be available to present their posters.**

Given the presenter's agreement, all posters will be made available in the **CIRSE Library**, library.cirse.org, after the congress. If you do not agree with the publication of your poster, please notify BSIR and CIRSE in writing. In any event, you retain the copyright of the electronic poster.

Should you require assistance, please contact scientific@bsirmeeting.org.



PREPARING YOUR POSTER

Formal and technical requirements

1. **File size:** The **maximum file size** per poster is **16 MB**.
2. **Format:** Electronic posters will be accepted in MS PowerPoint (*.pptx) format only. Macintosh presentations (i.e. Keynote) cannot be accommodated.
3. **Videos:** If your poster contains videos, always remember to embed them directly into the PowerPoint file and save it as **.pptx**. Videos cannot be embedded in **.ppt** files.
4. **Language:** As the official congress language is English, all electronic poster presentations must be in **English**. If English is not your native language, we recommend that you have your poster proof-read by a native speaker if possible.
5. **Advertising:** Advertising of products is **prohibited**. Please make sure that your presentation provides objective information based on scientific methods generally accepted in the medical community, and is free of commercial bias.
6. **Patient anonymity:** Please make sure that no patient names or any other information allowing the identification of a patient appear in your presentation material. **Patient anonymity must be ensured** at all times.
7. Presenters at BSIR and CIRSE meetings must be sensitive to diversity and ensure that their presentations are **free from any content that may be perceived as discriminatory or derogatory**. BSIR and CIRSE reserves the right to exclude non-compliant speakers from presenting at future meetings.
8. **Copyright reserved material:** It is the author's responsibility to ensure that any part of the slideshow (figures, tables, images, etc.) is free of any third party right and/or cited correctly.
9. **Conflicts of interest:** According to the BSIR and CIRSE disclosure policy, all **poster presenters must disclose potential conflicts of interest** on the cover slide of their poster.
10. Please note that **macros should not be used** and **flash-animations are not supported**.
11. **File name:** The name of the presentation file should include the presenter's name and the paper number (max. 50 characters). To avoid any compatibility problems, please do not use special characters (e.g. «, Ö, Ø, ñ, ε, ®, ý, }, { etc.).

Slide design

1. **Aspect ratio** of your presentation should be **16:9 (landscape orientation)**.
2. **Fonts:** Do not use special fonts which are not part of the standard PowerPoint package, as this will cause problems while uploading your file.
3. **Text:** Your guiding principle should be **"As much as necessary, as little as possible"**. The text should be concise and to the point, key facts should be highlighted.
4. **Colours:** Colours should be used sparingly. Choose colour combinations that make your text easy to read (preferably dark background – light fonts; avoid red and green).
5. **Layout:** Keep data on the slides simple. Ensure a logical order of the content. A clear and well-structured arrangement is the most attractive and the easiest to read on the monitor.



6. Recommended slides per poster type:

Please don't exceed the below indicated numbers of slides per poster/section.

	Total number of slides	Mandatory / optional	Recommended number of slides per section
Scientific Poster	max. 12		
Title & Authors (incl. financial disclosure)		m	1
Purpose		m	1
Methods and Materials		m	2
Results		m	3-4
Conclusions		m	1-2
References		o	1-2

Educational Poster	max. 12		
Title & Authors (incl. financial disclosure)		m	1
Learning Objectives		m	1
Background		m	2
Clinical Findings / Procedure Details		m	3-4
Conclusions		m	1-2
References		o	1-2

Morbidity & Mortality Poster	max. 12		
Title & Authors (incl. financial disclosure)		m	1
Short case history		m	2
Intervention/complication		m	3-4
Outcome		m	1
Reflection (patient and complication) *		m	2
Classification of the complication**		m	1
Take-home points		m	1

*Reflection:

Patient:

- Was it the right patient for this treatment?
- Was the treatment the best option for this patient, what were the alternatives?
- Were these alternatives discussed with the patient?
- Was the patient discussed in a multi-disciplinary team?
- Was a safety checklist filled out?
- Was the patient informed about this possible complication?



Was the complication due to:

- Wrong indication
- Material failure or choice
- Insufficient training
- Unexpected
- Avoidable
- Other

****Did the patient suffer from this complication?**

- Complication during the procedure which could be solved within the same session; no additional therapy, no post-procedure sequelae, no deviation from the normal post-therapeutic course
- Prolonged observation including overnight stay (as a deviation from the normal post-therapeutic course <48 h); no additional post-procedure therapy, no post-procedure sequelae
- Additional post-procedure therapy or prolonged hospital stay (>48 h) required; no post-procedure sequelae
- Complication causing permanent mild sequelae (resuming work and independent living)
- Complication causing permanent severe sequelae (requiring ongoing assistance in daily life)
- Death