

Abstract- Do's and Don't

Introduction

After reviewing SVU abstract submissions for the past few years, I've found common errors that, unless corrected, will most likely result in your abstract being rejected.

Student Submissions

The SVU encourages student participation in the abstract process. However, even if you have a completely novel and interesting case study, if it's not written in an appropriate abstract format, it will not be accepted. There are numerous resources on how to write a proper abstract, and you must use them. You should also read abstracts published in the Journal of Vascular Ultrasound (JVU) and "copy" that format.

Please remember that you're not telling a story. If you write this for your classmates, rather than for the journal, it will most likely be rejected.

This article addresses specific mistakes that persist in many submissions.

Here are some "student-specific" items:

If accepted, your 'readership', for the most part, will be experienced vascular sonographers and physicians, so keep that in mind. You're not writing a "book report" or a story for your fellow students. So **don't** write things like: "Bilateral carotid endarterectomies were performed to reduce the risk of stroke". The JVU readers know why endarterectomies are performed.

Here's another example taken from an abstract submission (slightly altered):

"A lower extremity venous duplex exam was performed utilizing a 5-7 MHz transducer to *obtain images of the veins....*". This is like saying "I went to MacDonald's and bought a hamburger to eat!"

An abstract is not a text message; you must write good sentences with nouns and verbs. If you're unsure of correct grammar, use a free online program like Grammarly.

Don't write: "No evidence of a AAA" (in Results).

Do write: "There was no evidence of an abdominal aortic aneurysm."

"Do's and Don'ts" of Abstract Writing.

All of the following "Don'ts" were from JVU earlier abstract submissions.

Don't write "When researching, I learned that..."

Don't write the reason for the exam as: "to determine the proper diagnosis..."

Don't write: "The patient presented with "some type of DVT symptoms",

Do write: be specific and describe the symptoms, e.g., lower leg edema, pain, etc.

Don't write: "According to the patient, he has no xxx...."

Do write: "There is no history of xxx"

Don't write: "The mass turned out to be the culprit..."

Do write: "It was thought that the mass contributed to the patients' symptoms."

Don't write: "A 70-year-old female came into our vascular lab.."

Do write: "A 70-year-old female presented with symptoms of..."

Don't write: "The vascular lab was called to the recovery room", really?

Don't start a sentence with a numeral, e.g., " 137 veins of 75 patients were identified..."

Do start a sentence with alphanumeric letters, e.g., "One hundred and thirty-seven veins of 75 patients were identified.... Correct.

Don't write: "The doctor ordered a venous duplex exam. Or a venous duplex ultrasound study "was ordered."

Do write: "A venous duplex ultrasound exam was performed..."

Don't write: "An exam was ordered to check for..."

Do write: "An exam was performed ..."

Don't use the phrase "We believe ..."

Don't write that the scan was performed with "B-mode with color and pulsed-wave spectral Doppler," just write "Duplex Ultrasound (DU) or Duplex Ultrasound Imaging (DUI).

Don't write that the exam was performed "on" a specific ultrasound system, it was performed WITH an ultrasound system, and don't use the word "probe", it's a transducer.

Don't write: "It is vital to monitor blood flow through the arteries..." This is Silly!

Don't write: The indication for this exam is to check patency and flow direction of the femoral arteries. That's not an indication. An indication is the symptom or condition that warrants the ultrasound evaluation, like "pain."

Don't write: "A 60-year-old male was brought to the ER by his sister.."

Do write: "A 60-year-old male presented to the emergency room with symptoms of ..."

Don't write: "Upon physical exam, it is seen that the..."

Don't write: "A 42-year-old male presented to our hospital to discover the etiology behind a stroke".

Do Write: "A 42-year-old male presented with (list the symptoms)."

Don't write: "The technologist performed the lower peripheral arterial test.."

Do Write: "A lower extremity peripheral arterial study was performed..."

Don't write: "Spectral and color Doppler was used to image the extracranial arteries to rule out stenosis... "

Comment: All duplex ultrasound systems have imaging, color, and spectral Doppler, so call it "duplex ultrasound" or perhaps "color duplex ultrasound."

Don't write: "She was sent for a CTA of the neck."

Do Write: "A CTA of the neck was performed and revealed a 2 x 2.5 x 3 cm mass."

Don't write: "An upper extremity venous duplex was ordered for the patient *due to...*"

Here's a weird one; "A vascular sonographer has the power to aid providers by revealing such findings even if they are outside of the vascular realm." Did they intend to write " This case illustrates the importance of recognizing incidental findings?"

Don't use or list references in the abstract; references are for the full article.

Do have your abstract reviewed by an acquaintance who knows good grammar, and/or someone who knows how to write an abstract.

Finally, the last sentence of the abstract should tell the reader the nature of the case presentation or study, so craft it carefully.

Review these final sentences from the JVU abstracts. What can you learn from each sentence? Can you get a good idea of what the abstract is about, *or not*? (there are some good ones and bad ones included below)

#1. The importance of duplex ultrasound in diagnosis and management is discussed.

#2. The variability and magnitude of these errors in estimating peak velocity values may render some linear array Doppler transducers unreliable for quantitating peripheral vascular disease.

#3. Noninvasive vascular laboratory studies can be used prior to direct arteriogram to help establish the diagnosis of HHS (hypothener hammer syndrome) and guide the therapeutic options for treatment.

#4. The preoperative and postoperative computed tomography images confirm these findings.

#5. This case study is confirmatory evidence that indirect sonographic techniques can reliably identify IA (innominate artery) occlusive disease.

(Hint: #1 and #4 are too vague for a last abstract sentence.)

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