



ABSTRACT SUBMISSION FORM

Please complete all sections of this form to submit your abstract proposal.

1. PROJECT TITLE—Enter the title of your project.

2. AUTHORS AND CONTACT INFORMATION—List all authors, their roles, affiliations, and contact emails.

3. OBJECTIVES—List the primary goals and objectives of your project.

4. PRESENTATION DESCRIPTION—List the description of what this presentation will cover. Please describe in 400 words or less.

5. ADDITIONAL INFORMATION (OPTIONAL)—List any additional information relevant to your presentation. Attach any documents or supporting materials to APDVS@vascularsociety.org with your completed form.