

## 2023 SEC FOR DERMATOLOGY CLINICAL POSTER ABSTRACT SUBMISSION FORM

Abstract should not exceed 200 words. See submission guidelines for additional instructions. Submit final abstract and poster to <u>uabdepartmentofdermatology@gmail.com</u>

## **Conflicts of Interest Statement**

In the interest of transparency, we ask you and all co-authors to disclose all relationships/activities/interests listed below that are related to the content of your abstract. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the abstract/poster. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

Please select **one** of the following:

 $\Box$  The authors have no conflicts of interest relevant to the work presented.

 $\Box$  The authors declare conflicts of interest relevant to the work presented. The COI form must be submitted with the abstract for any authors needing to disclose COI.

## **Patient Consent**

Please select one of the following:

□ The authors have obtained informed consent from patients for any identifiable photographs (i.e. containing elements of the face, tattoos, identifying jewelry)

 $\hfill\square$  The authors do not have identifiable photographs in their presentation

| Poster Abstract Category: Clinical |  |
|------------------------------------|--|
| Title:                             |  |
| Authors:                           |  |
| First Author Email:                |  |
| Background:                        |  |
| Objective:                         |  |
| Case:                              |  |
| Discussion:                        |  |