

Report of the 2013 Scientific Program Committee

The deadline for abstract submission (April 10, 2013) resulted in the science section receiving 7,693 abstracts, with over 5,000 abstracts arriving within 48 hours of the deadline. Of abstracts received, 67% were from outside North America. As in 2012, authors could suggest their preferred format of formal (paper) or informal (poster) presentation, with section chairs making the final choice based on their programming needs. Abstracts selected for alternate status were included in the program as accepted posters. The number of accepted abstracts was 2775 (36%) in 2012 compared to 3120 (41%) in 2013, of which 1839 were papers and 936 were posters. The reduction in the acceptance rate is due to the committee's decision to limit the number of abstracts selected for alternate status to two per session. In total, 1540 (56%) of the accepted abstracts were from outside North America, a decrease of 2% from 2012.

As in 2012, the scientific formal (paper) presentations were 7 minutes in duration and were followed by a 3 minute discussion period. These sessions were grouped by organ systems into 1-hour and 1.5-hour scientific sessions and were distributed throughout the week. The Integrated Science and Practice (ISP) sessions, which combined presentations of scientific abstracts and education on a given topic, were repeated this year. Each ISP session started with an invited lecturer, followed by proffered abstracts and many sessions concluded with a panel discussion on the subject. Each Scientific Session and ISP was moderated by one or two recognized experts in the field many of whom were members of the Scientific Program Subcommittees. In recognition of the growth of international participation in the annual program, we increased our efforts to include international members to serve as moderators for the scientific sessions. Session moderators were identified as Presiding Officers in the printed and on-line programs.

The scientific informal (digital poster) presentations were presented with each author requested to stand by their poster for 30 minutes to discuss their work and answer questions from registrants. During these one-hour sessions, *AMA PRA Category 1 CreditTM* was available. Volunteer session hosts, many of whom were members of the Scientific Program Committee, monitored activities in subspecialty communities and provided assistance as needed. The 2012 pilot program to provide additional afternoon CME discussion sessions on Monday, Tuesday, and Wednesday, from 5:00 – 6:00 PM was discontinued due to low attendance and feedback from faculty.

The Lakeside Learning Center, the home for scientific informal (digital poster) presentations and education exhibits, was relocated to Hall D (Level 3, Lakeside Center) across from the RSNA Services area. The Lakeside Learning Center was organized by subspecialties, as in past years. Contained within each subspecialty area were computer workstations that were used for individual or group viewing and discussions of electronic exhibits and scientific informal presentations.

Series Courses again provided combined research and education on related topics. Offered were half-day sessions in Breast, Cardiac, Chest, Gastrointestinal, Emergency, Genitourinary, Informatics, Musculoskeletal, Interventional, Vascular, and Neuroradiology, five half-day courses in Interventional Oncology, and two and a half days in Pediatric Radiology. It was felt by the Committee that Series courses are the best way to review state of the art in each specialty and that these courses serve to introduce the registrant to new research in each area.

Upon recommendation of the Scientific Program Committee, the Board of Directors committed resources to grant prizes to residents, physics trainees, fellows, and medical students to encourage interest in academic radiology. The name of the award is Trainee Research Prize with three categories (Resident/Physics Trainee, Fellow, and Medical Student) eligible for this award. All accepted abstracts from trainees were offered the opportunity to apply for the awards. Each subcommittee chair could award up to three prizes. The awards were announced and presented at the corresponding scientific session in which the recipient presented his/her abstract. Each winner was given the opportunity to be photographed with the Scientific Program Committee Chair.

In an effort to assure that each scientific session flowed smoothly, we continued with the Officer of the Day designation, a process which has been in place for a number of years. Primarily section chairs of the scientific program subcommittees serve in this capacity. An Officer of the Day, assigned to each building, ensured proper function of each room in their assigned building, and communicated with the central Program Office by a cell phone if last-minute problems arose.

The members of the Scientific Program Committee evaluate a large volume of abstracts within a relatively short period of time to construct a coherent and quality driven program which is pertinent to practicing radiologists and trainees in radiology. To aid the committee members with their evaluation and improve the quality of the information contained in the submitted abstracts, the ability to submit an image or tabular information along with the abstract was continued in 2013. We have expanded the number of members in the subcommittees so that more time can be devoted to carefully analyzing the submitted abstracts. It is our intent to continually monitor this situation to ensure the proper ratio of papers per committee member. Committee members deserve thanks from the RSNA for the time spent in preparing the annual Scientific Program. The names of the Scientific Program Committee are listed on www.rsna.org and in the RSNA Meeting Program.

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2013 Scientific Program Committee Chair