



Paradox Sydney
13-14 August 2026

Call for Abstracts - **Surgical Plenary**

Abstract Submission – Deadline **12th April 2026**

Instructions: Please read carefully.

1. Abstract must be submitted in English. Abstracts should be submitted via email to admin@accsm.org.au. Abstracts should be limited to 500 words, excluding title and authors.
2. Abstracts may be for oral or poster presentations.
3. Presenting authors must attend in person, special teleconference presentations may be allowed at the discretion of the Scientific and Organising Committee of Cosmetex (SOCC).
4. CAPITALISE entire TITLE, then include author's name, institution or hospital, city and country. Underline author's name ONLY. Omit degrees, titles and full addresses.
5. Use of standard abbreviations is desirable. Place special or unusual abbreviations in parentheses after the full word, the first time it appears. Use numerals to indicate numbers, except to begin sentences.
6. Organise the body of the abstract as follows:
 - A statement of the purpose of the study;
 - A statement of the methods used;
 - A summary of the results;
 - A statement of the conclusions reached.
7. Studies involving human participants must state that appropriate ethical approval was obtained.
8. Applicants may withdraw an abstract at any time prior to approval.
9. Abstracts will be submitted to the Scientific and Organising Committee of Cosmetex (SOCC) for assessment. Inclusion in the conference will be at the discretion of the SOCC.

Contact Details - **Please print details clearly. Send abstract to:** admin@accsm.org.au

Email submissions must contain the following information, together with Conflict-of-Interest Form completed:

Name:			
Email:			
Mobile:			
Abstract Title:			
Signature:		Date:	

Conflict of Interest Declaration Form

The purpose of this form is for declarations to be made as required. Submissions will be managed on a case-by-case basis in line with the Conflicts of Interest Policy.

Before submitting your declaration, please read the Conflicts of Interest Policy.

Conflicts may be:

- Financial - any financial interests (ownership, investment, etc.) and/or commercial affiliations in cosmetic clinics, training companies, or product development relevant to ACCSM
- Professional affiliations – for example, serving on any other boards or educational panels or hold roles that may interact with ACCSM
- Personal relationships - personal or professional relationships that may intersect with ACCSM training or assessment
- Paid speaking or consulting roles - any paid or sponsored speaking engagements, consultancy roles, or training presentations involving industry or private entities
- Other - any other interests or potential conflicts not covered above

Personal Details

Name:	
Mobile:	
Email:	

Please outline the identified conflict of interest.

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Please list the parties involved and their relationship to you.

Please outline the proposed actions that will be taken, or recommendations, to resolve or manage the identified conflict of interest.

Is the conflict of interest actual, perceived or potential? (please tick all applicable boxes):

- Actual** conflict of interest (the conflict of interest is occurring or has occurred).
- Perceived** conflict of interest (it could be perceived, or appear to a reasonable person, that your personal interests could influence the performance of your duties and responsibilities).
- Potential** conflict of interest (a conflict of interest may arise in the future).

Declaration

I declare that to the best of my knowledge the information supplied in this form is complete and correct, and I will:

- Withdraw or exclude myself from involvement in discussions and decision making and/or from offering advice to decision makers on ACCSM's work with the interested third party, if applicable
- Notify the ACCSM contact and be cooperative in mitigating or eliminating any associated actual, potential, or perceived conflict of interest.

Name: _____ Date: _____ Signature: _____

Declarations must be submitted via email to admin@accsm.org.au