AACE CALL FOR SCIENTIFIC ABSTRACTS: AACE 2027 Annual Meeting

Join us May 14–6, 2027 for the AACE 2027 Annual Meeting in Marriott Marquis San Diego Marina, San Diego, CA.

The American Association of Clinical Endocrinology (AACE) invites you to submit an abstract and have the unique opportunity to showcase your work that will be reviewed by experts in the field of endocrinology. If accepted, your abstract will be published in a supplement to AACE's landmark journal, *Endocrine Practice*.

Please read this guide before beginning the submission process to become familiar with the guidelines and rules that apply to abstract submission.

The AACE Annual Meeting is structured to provide relevant clinical information for endocrine care professionals. The program will focus on information that will allow you to achieve the best solutions for the diagnosis and management of endocrine diseases.

AACE 2027 ABSTRACT TIMELINE AND KEY DEADLINES

All deadlines are stated in Eastern Time (ET). The dates and times published in this section constitute the official AACE 2027 abstract schedule.

Regular Abstract Submission

- Submission site opens: Monday, August 10, 2026
- Submission site closes: Friday, December 4, 2026, at 11:59 PM EST
- Deadline to edit or withdraw an abstract: Friday, December 4, 2026, at 11:59 PM EST. No exceptions.
- Abstract decision notifications: January 2027

Late-Breaking Abstract Submission

- Submission site opens: Monday, January 11, 2027
- Submission site closes: Monday, March 1, 2027, at 11:59 PM EST
- Deadline to edit or withdraw a late-breaking abstract: Monday, March 1, 2027, at 11:59 PM EST. No exceptions.
- Late-breaking abstract decision notifications: April 2027

ELIGIBILITY REQUIREMENTS

WHAT IS ELIGIBLE FOR SUBMISSION?

- **Abstract submissions must be an original contribution and not have previously been published or presented at any national/international meeting(s) in the same format at the time of abstract submission.**
- Abstracts describing original research, clinical trials, or case studies/series related to the area of endocrinology may be submitted.
- By submitting your abstract, you agree to present the abstract if it is selected for presentation during the Annual Meeting.
- Authors will be requested to sign Copyright Transfer, which transfers to AACE the copyright and all other rights of the material comprising the abstract upon acceptance. Authors will not be permitted to submit copyrighted abstracts to other national/international meeting(s). See Copyright Transfer Agreement for more information.
- If the abstract reports on the results of a clinical trial not yet approved by a regulatory agency, you will be required to identify the trial phase.
- Clinical trial abstracts should include the trial phase, registration number when applicable, study design, population, intervention or exposure, comparator, primary endpoint, and key safety findings. Research involving human participants, animals, or identifiable patient information must comply with applicable institutional review board, ethics committee, privacy, and consent requirements. Abstracts may be declined if required ethical approvals, consent, or trial registration information is missing or inconsistent with the submitted work.
- Authorship of multiple abstracts is permitted.

By submitting an abstract, authors affirm that the work is accurate, original, and prepared with appropriate human authorship and oversight. Abstracts must not contain fabricated data, manipulated results, plagiarism, undisclosed duplicate publication, or inappropriate image, text, or data generation. Artificial intelligence tools may not be listed as authors. If such tools are used to assist with writing, editing, translation, analysis, or figure preparation, the submitting author remains responsible for the accuracy, originality, confidentiality, and integrity of the submitted work.

WHAT IS NOT ELIGIBLE FOR SUBMISSION?

- The same study should not be submitted as multiple abstracts with overlapping content. Abstracts that represent different versions of a single analysis will be rejected. However, it is acceptable to submit multiple abstracts derived from the same study if they address distinct research aims or hypotheses.
    - For example, randomized trials often include multiple pre-specified outcomes. In such cases, it is appropriate to submit separate abstracts focusing on different outcomes or endpoints, provided each abstract represents a clearly differentiated analysis.
- **Abstracts previously published or presented at any national/international meeting are NOT eligible submissions.**

SUBMITTING AN ABSTRACT

All abstracts must be submitted using the online submission site at:
https://www.abstractscorecard.com/cfp/submit/loginSSO.asp?EventKey=TCKWWRYN

ABSTRACT CATEGORIES

Adrenal Disorders
Diabetes/Prediabetes/Hypoglycemia
Education/Quality Improvement
Lipids/Cardiovascular Health
Obesity/Nutrition
Parathyroid/Bone Disorders
Pediatric Endocrinology
Pituitary Disorders/Neuroendocrinology
Reproductive & Transgender Endocrinology
Thyroid
Endocrine Disorders in Pregnancy
Others (genetic syndromes, new innovation, etc.)

ABSTRACT FORMAT

CONTENT

- Prior to submitting the abstract, please ensure that it is proofread by an individual who speaks fluent English and can make recommendations as needed.
- Preliminary, incomplete, or pending data are not allowed. Abstracts must include final or sufficiently mature results that support the stated conclusion.
- Do not use new technical words, laboratory slang, words not defined in dictionaries, abbreviations, or terminology not consistent with internationally accepted guidelines.
- Define any abbreviations the first time they are used. Omit all names and geographical references in the body of the abstract.
- **Organize content as follows:**

TITLES

- Titles should be brief, clearly indicating the topic category (limited to 250 characters).
- Trial group names should not appear in the title.
- Enter the title in the "title" field only and **do not** enter the title in the body of the abstract.
- Author names and affiliations should **not** appear in the title.

Correct example: Long-Term Outcomes After Adrenal-Sparing Surgery in Pediatric Patients with Bilateral Pheochromocytoma

CHARACTER LIMITS

The abstract limit is 3,300 characters. The count excludes the title and author/co-author's information.

Original Research/Clinical Trial

- Objective: Background or Statement of Purpose – 400 characters
- Methods: Methods, materials, and analytical procedures used – 600 characters
- Results: Summary of the results in sufficient detail to support conclusion – 1,400 characters
- Discussion / Conclusion: Discuss the content and interpret the data – 900 characters

Results should include sufficient quantitative detail to support the conclusion, including sample size, relevant effect estimates, measures of variability or precision, and statistical significance when applicable. Abstracts should avoid vague statements such as “results will be presented” or “data are pending.” Conclusions must be supported by the results included in the abstract.

Case Study/Case Series

- Introduction: 400 characters
- Case description: 2000 characters
- Discussion / Conclusion: 900 characters

When laboratory values are included, authors should provide units of measurement and reference ranges when needed for interpretation. Use internationally recognized terminology and standard units whenever possible.

ABBREVIATIONS

- Use standard abbreviations. Place abbreviations in parentheses after the first time the full word appears. Do not abbreviate compounds in the title of the abstract. Use numerals to indicate numbers, except when beginning sentences.

USE OF ACRONYMS

- AACE will only publish commonly used acronyms included in the unified list of acronyms approved by the principal journal editors in the field of endocrinology. Please refrain from using all trial group acronyms in abstract titles. Acronyms may remain in the body of the abstract and in the author list.

TABLES AND GRAPHICS

Tables, images, and/or graphs **SHOULD NOT** be submitted.

AUTHORS

- **Submitting authors will be the main contact for all correspondence during the submission process. NO EXCEPTIONS.**
- The submitting author MUST also be the primary author.
- Do not list authors or commercial relationships in the body of the abstract.
- Please consult with your co-authors on how they would like their names to appear prior to the submission of the abstract. **We cannot make author changes after the December 4, 2026 submission deadline. Additionally, no edits or additions can be made to author names after**

abstract publication. The order in which authors are added to the submission is the same order they will be in the publication, if accepted. Authors need to check prior to submission.

- There is a limit of 15 authors that may be included in the author block.
- The primary/submitting author will be required to enter all co-author information (names, degrees, institutions) and their declaration(s) of interest. It's important they gather and confirm that information is correct before submitting an abstract.
- Authorship:

  The following information needs to be included for each author listed for an abstract:

  - First name
  - Last name
  - Email address
  - Credentials
  - Institution
  - Declaration(s) of Interest

NOTE: Changes to authorship will not be accepted after abstract submissions close on December 4, 2026. Please make sure all authors are included and listed correctly.

All authors must disclose relevant financial relationships, commercial support, and other declarations of interest through the submission system. Disclosures and sources of support should not be included in the abstract body. Abstracts must present data in a balanced, objective, and non-promotional manner. Product names should be avoided unless necessary for scientific clarity, and medications or devices should be identified by generic or nonproprietary names whenever possible.

DISCLOSURE OF INVESTIGATIONAL, UNAPPROVED, OR OFF-LABEL PRODUCT USE

AACE is committed to independent, objective, and balanced scientific programming. In accordance with accredited continuing medical education standards, authors must declare any discussion of a medical device, drug, biologic, or other medical product that is investigational, unapproved, not regulated or approved by a recognized health authority, or being evaluated or discussed for an unapproved, experimental, or off-label clinical indication.

If the abstract includes investigational, unapproved, or off-label product use, the submitting author must include this information when prompted during abstract submission. The author will be prompted to select whether the product is an investigational product, not approved by a recognized health authority, used for research or clinical trial setting, or used outside approved labeling. If abstract is selected for oral presentation, presenter must include disclosure on slide immediately following the title slide.

USE OF GENERATIVE AI AND AI-ASSISTED TECHNOLOGIES

AACE recognizes that generative AI and AI-assisted technologies may help authors organize content, improve readability, or survey the literature; however, these tools must not replace the authors' own critical thinking, expertise, interpretation, or accountability.

Authors must apply AI outputs under direct human oversight; verify the accuracy, completeness, neutrality, and attribution of any AI-generated text or references; and thoroughly edit and adapt AI-generated material so the final abstract reflects the authors' original ideas, interpretation, and analysis. Authors are also responsible for complying with the terms of service of any AI tool and safeguarding data privacy, intellectual property, and any patient or third-party rights.

All abstracts prepared with substantive assistance from AI tools will be prompted to disclose this information during the submission process. "Substantive assistance" includes language editing, rephrasing or shortening author text; formatting or organizing the abstract; summarizing author notes, data, or source material; literature searching; data analysis or statistical support. Basic grammar or spell-checking by AI does not require disclosure.

ABSTRACT PROCESSING FEE

AACE does not charge a processing fee for abstract submissions.

COPYRIGHT TRANSFER AGREEMENT

During submission, the author will be requested to agree to a copyright transfer should the abstract be accepted. The submitting author will agree to the terms of the copyright transfer on behalf of all co-authors. The Agreement transfers to AACE the copyright and all other rights of the material comprising the abstract upon acceptance. The American Association of Clinical Endocrinology, as holder of the copyright on the accepted abstract, reserves all right of reproduction, distribution, performance, display, and the right to create derivative works in both print and digital formats. No patient rights are assigned.

For general inquiries regarding abstract submission, email abstracts@aace.com.

ABSTRACT REVIEW

Each eligible abstract will be evaluated independently by three reviewers with relevant subject-matter expertise. Reviewers will not view author names or institutional information during the scientific review.

Reviewers must recuse themselves if they recognize a submission or identify a professional, institutional, financial, or personal relationship that could affect, or reasonably appear to affect, their objectivity. AACE may obtain an additional review or conduct adjudication when reviewer scores differ substantially or when a potential conflict is identified. Abstracts will be evaluated using criteria specific to the selected abstract type.

- Abstracts that are missing key sections, insufficient detail, lack of conclusions or interpretation, overly vague or general content will be considered "Incomplete" and will not be reviewed. To ensure the integrity of the review process, revisions to abstracts will not be accepted after the submission deadline – **NO EXCEPTIONS.**
- All abstracts will be reviewed without knowledge of the author(s) or institution(s) information (blind review).
- Accepted abstracts will be selected for publication only, e-poster presentation given in-person at the conference, or oral presentation also given in-person at the conference.
- Top scoring abstracts will be eligible for awards. The most outstanding abstracts will be considered for oral presentations.

- A complete list of awards will be available on the AACE Annual Meeting website. Original research and clinical trials will receive higher consideration for awards.

ABSTRACT AWARDS

Jeffrey R. Garber, MD Award

Honoring Jeffrey R. Garber, MD, FACP, MACE, whose career focus is practice innovation, patient education, and clinical endocrinology fellowship training. The fund provides awards to trainees whose research emphasizes clinical endocrinology practice innovation *(*e.g., cost-effectiveness, guideline implementation, multi-disciplinary approaches, clinical decision support*)*.

- This award includes a $500 honorarium, for up to 2 recipients.

Travel Grant Award(s)

The Abstract Review Subcommittee will also select travel grant awardees based on merit and significance to the science and practice of endocrinology.

Travel Grants to be awarded include:

- Up to one (1) International Non-Fellow Physician or Fellow-in-Training Travel Grant for $2,500
- Up to two (2) Domestic Resident-in-Training or Fellow-in-Training Travel Grant for $1,000

ABSTRACT NOTIFICATION

AACE will notify the submitter of the status of their abstract in January 2027. It is the submitters' responsibility to then notify all co-authors. AACE requests that all interested parties please refrain from directly contacting the AACE offices to obtain information regarding abstract status, notification distribution and/or publication dates. Please check the annual meeting website regularly for the most up to date information. **The submitter/primary author is the only author who will receive decision notifications from AACE.**

PUBLICATIONS

All accepted abstracts will be available on the AACE Annual Meeting website. They will be published in a supplement to *Endocrine Practice*.

E-POSTER PRESENTATIONS

E-Poster presentations are presented in-person at the conference. The term "e-poster" refers to digital posters presented on a large monitor in lieu of physical posters. Each presenter will be assigned a date, time, and numbered station.

ORAL PRESENTATIONS

A very limited number of abstracts will be selected for oral presentation sessions. Specific details regarding oral presentations will be sent to the primary authors of the selected abstracts.

PERMISSIONS

COPYRIGHT POLICY

The annual meeting is a private event. Programs presented at the meeting are for the education of attendees and purchasers of recorded presentations as authorized by the American Association of Clinical Endocrinology. The information and materials displayed and presented during this meeting are the property of AACE and the presenter and cannot be photographed, copied, photocopied, transformed to electronic format, reproduced, or distributed without written permission of the American Association of Clinical Endocrinology and the presenter. Any use of the program content for commercial purposes, which includes, but is not limited to oral presentations, audiovisual materials used by speakers, and program handouts without the written consent of AACE is prohibited. This policy applies before, during and after the meeting. AACE will enforce its intellectual property rights and penalize those who infringe upon it.

LOGOS

The names, insignias, logos and acronyms of AACE are proprietary marks. Use of the names in any fashion, by any entity, for any purpose, is prohibited without the express written permission of the American Association of Clinical Endocrinology. Attendees who have questions about AACE's copyright policy should contact the public relations department at media@aace.com.

MEDIA

Credentialed media attend the annual meeting to cover stories for consumer, trade and other media outlets, and are easily identified by their press ribbons. Media has access to all general sessions and limited access (at the discretion of speakers) to Meet the Professor and Workshop sessions. Media may use hand-held audio recorders and still cameras; moving video recording is also permitted with the permission of the presenter(s). The exception to this policy is that no photos or video are allowed in the Exhibit Hall. Press who would like general photos of the Exhibit Hall can obtain these after the meeting from AACE. Attendees who have questions about AACE's media policies should contact the public relations department at media@aace.com.

PHOTOGRAPHS AND VIDEO RECORDING POLICY

As a courtesy to our presenters, AACE policy does not permit photographs or recordings during educational sessions, including poster sessions. The only exception without prior consent from the presenter to this is for registered media, who should review their registration for more information.

ABSTRACT EMBARGO POLICY

All information contained in an accepted abstract is confidential and under embargo until 9:45 AM ET on Friday, May 14, 2027.

Before the embargo expires, authors, institutions, employers, study sponsors, funders, public relations firms, and other parties must not publicly release or distribute abstract findings through press releases, news media, websites, social media, investor communications, promotional materials, or other public channels.

Press materials may be prepared in advance but may not be publicly distributed before the embargo expires.

Data or analyses that extend beyond the information contained in the accepted abstract and will be presented during the AACE Annual Meeting are also under embargo until 9:45 AM ET on Friday, May 14, 2027, unless AACE communicates a different embargo time in writing.

Authors are responsible for notifying all coauthors, institutions, employers, sponsors, funders, communications teams, and other involved parties of the embargo requirements.

Embargo restrictions do not prevent authors from:

- Sharing information confidentially with co-authors and authorized study personnel
- Conducting required regulatory or safety reporting
- Providing information to AACE or *Endocrine Practice* as part of submission, review, and publication
- Meeting legally required disclosure obligations

Any public release required by law or regulation before the embargo expires should be communicated to AACE in advance whenever legally permissible.

Violation of the embargo policy may result in withdrawal of the abstract, removal from the scientific program, loss of eligibility for awards, restrictions on future submissions, notification of the author's institution or sponsor, or other action determined appropriate by AACE.

REVISIONS

Authors are responsible for proofreading all abstract content and verifying author information before the submission deadline. Accepted abstracts will be published as submitted.

Authors may return to the submission system to revise an abstract until 11:59 PM ET on December 4, 2026. After the submission deadline, changes to the title, abstract body, results, author list, author order, or institutional affiliations will not be accepted except when AACE determines that a correction is necessary to address a significant factual, ethical, legal, or publication concern.

Failure to submit complete and accurate information by the deadline may result in rejection or withdrawal of the abstract.

WITHDRAWING YOUR ABSTRACT

Primary authors may withdraw a submitted abstract before **December 4, 2026 at 11:59 PM ET** by emailing abstracts@aace.com with the subject: AACE 2027 Withdraw Abstract - "Abstract Title". In the email, the submitting author must confirm that all co-authors have been notified of this abstract being withdrawn.

AACE LATE-BREAKING ABSTRACTS

The late-breaking abstract category allows for the submission of truly late-breaking, high-impact scientific research for which results were not available at the time of the regular abstract submission deadline. Late-breaking abstracts should present research that is ground-breaking, impactful and innovative. Abstracts will be ineligible for consideration if 1) they were not accepted in the regular abstract submission or 2) if preliminary data were available at the time of the regular abstract submission deadline. **Case reports are not considered appropriate for this category.**

SUBMITTING A LATE-BREAKING ABSTRACT

The late-breaking abstract submission site will open on Monday, January 11, 2027, and close on Monday, March 1, 2027, at 11:59 pm Eastern Time. Submitters will not have access to the submission site after the submission deadline.

AACE ANNUAL MEETING 2027 IMPORTANT SCIENTIFIC ABSTRACT DATES

Abstract submission site opens ..... Monday, August 10, 2026
Abstract submission site closes at 11:59 PM EST ..... Friday, December 4, 2026
Last day to make any changes or withdraw an abstract.....Friday, December 4, 2026
Late-breaking abstract submission site opens ..... Monday, January 11, 2026
Late-breaking abstract submission site closes at 11:59 PM EST..... Monday, March 1, 2027
Last day to make any changes or withdraw a late-breaking submission..... Monday, March 1, 2027
Supplement Publication Available..... June 2027