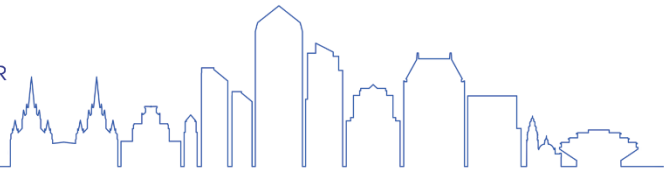
IADR GENERAL SESSION

SAN DIEGO, CA, USA · MARCH 25-28, 2026

104TH GENERAL SESSION & EXHIBITION OF THE IADR
55TH ANNUAL MEETING OF THE AADOCR
50TH ANNUAL MEETING OF THE CADR



# CALL FOR ABSTRACTS

**Important Dates and Deadlines:**

- July 14, 2025–Abstract Submission Site Opens
- October 27, 2025 11:59 p.m. PT–Abstract Submission Site Closes
- Mid-December 2025–Abstract Notifications Emailed to Presenters
- January 15, 2026–Presenter Registration Deadline
- Late-January 2026– Final Presentation Numbers Emailed to Registered Presenters

## To Submit your Abstract:

Click the Submit your Abstract button wherever it appears online on the official 2026 IADR/AADOCR/CADR General Session web site, https://www.iadr.org/2026iags, to be redirected through the IADR Member Portal to the ScholarOne Abstracts submission platform.

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# WELCOME!

The International Association for Dental, Oral, and Craniofacial Research will host its 104th General Session & Exhibition in conjunction with the 55th annual meeting of the AADOCR and the 50th annual meeting CADR in San Diego, CA., USA, March 25-28, 2026. The IADR/AADOCR/CADR General Session will provide scientists and researchers throughout the world with the opportunity to present, discuss, and critique their investigations. If you are involved in dental, oral, and craniofacial research, we urge you to submit an abstract for presentation consideration. We expect more than 4,000 delegates to attend the meeting in person. Oral sessions and poster sessions will be designed from accepted abstracts. Please note that delegates attending the IADR/AADOCR/CADR General Session are eligible to receive CE credit hours through the ADA Continuing Education Recognition Program (CERP); see page 21 for more information.

# ABSTRACT RULES AND GUIDELINES

1. Individuals may present **only one abstract** in any given scientific program (excluding Symposia, Hands-on Workshop, Lunch & Learning Session and Keynote Speakers).
2. Projects being submitted must be original research.
3. Submitters may NOT split one study into several papers, as they may be asked to combine for review.
4. Individuals can co-author multiple abstracts.
5. Presenter must disclose any personal or co-author potential conflict of interest and agree to the **IADR Policy on Full Disclosure** along with the **IADR Abstract Licensing Policy** during submission.
6. IADR will not accept research funded by tobacco companies as outlined in the **IADR and AADOCR Policy Statement on Tobacco Funded Research.**
7. Abstracts previously published (in print or electronic formats), previously presented or accepted for presentation at another meeting at the time of abstract submission are not allowed.
8. Abstracts based on manuscripts posted or submitted to a non-commercial preprint server are not considered previously published.
9. Abstracts should not be submitted on material that will also be presented at a symposium/hands-on workshop held at the same meeting.
10. Authors of presentations later proven to contain previously published or presented material will be sanctioned and may be prohibited from presenting at future meetings.
11. Group Program Chairs (GPC) and the Annual Session Committee (ASC) reserve the right to reclassify submitted abstracts into the most appropriate area of review.
12. Abstracts must be submitted through the online abstract submission site. Faxes, photocopies, or emailed copies will not be reviewed.
13. You must receive the approval of all co-authors before putting their names on the abstract.
14. There will not be an option for Late-Breaking News Abstracts.
15. There will not be an abstract replacement/revision period.
16. **Abstracts are reviewed as submitted by the abstract deadline of October 27, 2025. Abstracts in Draft will not be reviewed for inclusion in the scientific program. Presenters are not permitted to modify their abstracts after this date for purposes of review.**

## Presenter Agreement

All presenters must agree to the following conditions when submitting an abstract:

1. Affirm that any work with human or animal subjects reported in the abstract complies with the guiding principles for experimental procedures found in the Declaration of Helsinki of the World Medical Association, and this research project has been duly cleared by my Institutional Review Board (IRB) or Institutional Ethics Committee or an equivalent ethical body.
2. Affirm that the work has **not** been published (in print or electronically) or presented elsewhere prior submission to the IADR/AADOCR/CADR General Session Meeting.
3. Agree that if the abstract is accepted, IADR has permission to publish the abstract in printed and/or electronic formats.
4. Agree to register for the meeting and pay the appropriate registration fee by the presenter registration deadline of **January 15, 2026**.

   **Failure to register by January 15, 2026, will result in the following:**

   - The abstract will be automatically withdrawn from the scientific program.
   - Submitter will not be allowed to present his/her abstract at the meeting.
   - The abstract will not be citable as being part of the Special Issue of the *Journal of Dental Research*.
5. Agree to participation in the recorded components of the General Session to include recording of presentations to be available on an IADR approved platform 90 days post meeting and all requirements related to Continuing Education.

## IADR Abstract Licensing Policy

By submitting an abstract to IADR, and in consideration for the opportunity to be included in IADR's presentations, the author of the abstract hereby provides to IADR a non-exclusive, irrevocable, worldwide, royalty-free license to use the abstract in IADR's publications and materials. To the extent that IADR incorporates an abstract in a collection or compilation of materials, including but not limited to any publication of meeting abstracts or an online, searchable collection of abstracts, the author acknowledges and agrees that IADR shall own all right, title and interest in and to such collections and compilations including any copyrights to said collections and compilations. Notwithstanding the foregoing, U.S. Government Works, as defined under the Copyright Act found under Title 17 of the U.S. Code, are exempt from any copyright transfer contemplated herein, and any purported transfer of the copyright to a U.S. Government Work pursuant to this subsection shall be of no force or effect.

## IADR Full Disclosure Policy

IADR seeks to provide participants in its education sessions with current, scientifically based information relevant to dental, oral, and craniofacial research, the practice of dentistry and the oral health of the public. Once a presenter is selected for a particular topic, IADR makes no attempt to control the content of the presentation or the content of any submitted abstract. Therefore, in submitting an abstract for presentation and publication, a presenter represents and warrants to IADR that any intellectual property associated with or contained in the content of the abstract or presentation is owned by the presenter or the presenter is authorized to use said content along with any applicable intellectual property associated with the content.

A presenter may be required by IADR to provide adequate written assurance that the presenter is authorized to use the content of the abstract or presentation. In the event IADR requests such written assurance and the presenter fails to provide the requested documentation, the presenter may be denied the ability to make the presentation. For any abstract or presentation, the presenter and any applicable co-authors of the content

must be identified by full name and any affiliation. The presenter also has received the approval from the co-author(s) to have their name(s) associated with the abstract and its content prior to submission.

The presenter further agrees to indemnify and hold harmless IADR from any and all claims of third parties regarding the content of the abstract or presentation, including but not limited to any claims of infringement of intellectual property or misappropriation of proprietary or trade secret information.

In order to ensure fairness to the audience and the public, however, IADR requires each presenter and co-authors to disclose:

1. Any financial relationship between the presenter and co-authors and
    a. A company that manufactures or distributes a product discussed in the presentation, or
    b. A company whose product competes, or may compete, with a product discussed in the presentation must be disclosed to the IADR upon approval on the abstract form and must be disclosed to the audience at the beginning of the presentation.

    As used in this document, "financial relationship" includes a consulting arrangement or the conduct or research for the company by the presenter or co-author or a member of the presenter's or co-author's immediate family. It also includes ownership of stock or other interest in a company by the presenter or co-author, and/or a trust of which the presenter, co-author, or a member of the presenter's or co-author's immediate family is a beneficiary, to the best knowledge of the presenter.
2. All presentations must be made in a professional manner, without disparaging colleagues, companies or products. Unnecessarily demeaning comments and attacks on colleagues, companies or products are unacceptable.

Failure to adhere to these guidelines may result in sanctions as deemed appropriate by the IADR, including denial of permission to present at future IADR meetings.

## Presenter Changes

If you are unable to attend the meeting and wish to name a substitute presenter, please use the following guidelines:

- The Presenting Author is the only author that may request a presenter change.
- Substitute presenter must be a co-author.
- Substitute presenter must **NOT** be presenting another abstract at the meeting.
- Substitute presenter must be able to present abstract in assigned presentation mode, in-person or virtual.
- After the abstract submission deadline of October 27, 2025, all requests for presenter changes MUST be made using the Presenter Change/Withdraw Form (link to be made available after the abstract deadline). Requests made using this form will be reviewed by IADR Global Headquarters before processing.
- Substitution requests must be made PRIOR to the meeting.
- All Presenter Changes must be communicated through the required online form and approved by the IADR Global Headquarters prior to scheduled presentation.
- Failure to follow the above procedures may result in the presenter being charged the full registration fee and/or not being allowed to present at a future meeting.

## Withdrawal of Abstracts

The following are the guidelines for withdrawing abstracts:

- You may withdraw your abstract at any time until October 27, 2025, without notifying IADR, using the instructions provided in the abstract submission site.
- Abstracts withdrawn after October 27, 2025, must be withdrawn using the official Abstract Withdraw/Presenter Change form. Requests not submitted via this form will not be considered.
- Withdrawal requests must be received PRIOR to the start of the meeting.
- All withdrawal requests must be communicated through the required online form to the IADR Global Headquarters.
- Lack of travel funds is **NOT** an acceptable excuse for withdrawing an abstract from the meeting.
- Failure to follow the above procedures may result in the presenter being charged the full registration fee and/or not being allowed to present at a future meeting.

**PLEASE NOTE:** Any submitted abstract that does not contain actual text, or is still in draft, will be withdrawn automatically after October 27, 2025. It is imperative the submitting author ensures the accuracy of the content of the abstract by utilizing their co-authors and, if applicable, their advisors prior to the abstract's submission for review. **No changes to abstract text including typos, incorrect data, etc. will be permitted after October 27, 2025.**

# PREPARING TO SUBMIT AN ABSTRACT

All abstracts must be submitted online via the IADR online abstract system. Each completed submission is peer-reviewed for its scientific content by Scientific Group/Network Abstract Reviewers and Group Program Chairs.

## Important Submission Elements

1. **Abstract Submission Fee:** In order to complete submission of an abstract a non-refundable $25 USD fee must be paid when prompted. This is a one-time processing fee for each abstract which partially covers the expense of the abstract submission and peer-review system. Should the abstract need to be returned to draft for edits prior to the submission deadline the fee will not be re-charged.

2. **Scientific Group/Network:** All abstracts must be submitted to an appropriate Scientific Group/Network category for review based on the scientific content of the abstract. A large majority of abstracts are transferred each year. If you select the appropriate area, you are more likely to be graded by peers with similar interests and who are familiar with you and your research topic. See the appropriate section below for a complete listing of Scientific Groups/Networks.

3. **Titles:** Abstract titles are required to be 10 words or less. The title should be dynamic and conclusive, rather than descriptive, and should be entered in title case format, AP format. In general, you should capitalize the first letter of each word unless it is a preposition or article. Do italicize scientific names of organisms such as *streptococci* or *candida.* Titles should not be bold.

4. **Authors:** Each author should be added separately to the submission to ensure proper listing. Enter first (given) name, and last (family/surname) name for each author plus institution/affiliation. Please do not list the department/branch in the institution/affiliation field. The order of the authors can be modified at any time prior to the abstract deadline. IADR will not list each author's department in the program materials. One person must be identified as the Presenting Author. It is imperative to provide an accurate long-term email address for the Presenting Author. **Presenting Authors are required to login to the ScholarOne Abstracts submission site to confirm the accuracy of their information after the abstract is successfully submitted.**

5. **Abstract Text:** All abstracts should be 300 words or less. When composing your text, be sure to use a word processor in order to save your abstract in advance. Use the formatting functions available in the submission system to add in special characters. Do not include your title or authors in the abstract text — these items will be collected separately. Do not include references. If the abstract is based on research that was funded entirely or partially by an outside source, then be sure to enter the appropriate information (funding agency and grant number if applicable) when prompted during submission. You do not need to re-enter the information with your abstract text. However, all external funding **MUST** also be included in the presentation if accepted. Tables are permitted but should be simple and concise. Graphics/images are not recommended unless they are integral to the abstract and should be limited to no more than one or two.

6. **Special Characters:** Special characters in the title or body of the abstract or in the co-author's names or affiliations should be entered into the system using formatting functions in the submission system to avoid formatting errors.

7. **Content of the Abstract:** Titles, authors and authors' affiliations are not included in the 300-word limit (references are not collected by IADR). The abstract must contain a brief statement of:

    a. The objectives of the investigation,

    b. Experimental methods used,

    c. Essential results, including data and, where appropriate, statistics,

    d. Conclusion

8. **Other Items:** the following information should be submitted:

    - **Brief 1-Sentence Abstract Summary:** IADR will require a concise one sentence summary of abstracts to assist reviewers and Group Program Chairs determine abstract placement if accepted.
    - **Keywords:** All abstract submissions may select up to five keywords from a list. Two keywords are required. Keywords should be selected from Medical Subject Headings (MeSH) to be used for indexing of articles. See: http://www.nlm.nih.gov/mesh/MBrowser.html for information on the selection of key words.
    - **Educator/Clinician Track:** IADR will ask if your research fits well into one of the tracks created by the ASC. Selecting the **Educator track** indicates content would be of most interest to educators. Selecting the **Clinician track** indicates content would be of most interest to clinicians.
    - **Awards/Competitions (optional):** Please be sure to select any applicable awards or competitions during the abstract submission process and complete any additional required questions. Clicking on the details & conditions for each award will reveal additional information for each award.
    - **Contact Information: IADR will only correspond with the presenting author listed on the abstract regardless of who may have submitted the abstract.** Successful participation in the 2026 IADR/AADOCR/CADR General Session is contingent on the correct email address being provided for the Presenting Author. It is imperative to include a correct, long-term email address/phone number for the presenting author. If the presenting author relocates before the 2026 IADR/AADOCR/CADR General Session, please be sure to notify the **Meetings Department** with the new information.
    - **Chair Opportunities:** All presenting authors of abstracts accepted into the scientific program will be evaluated by Group Program Chairs and IADR Headquarters staff for invitation to serve as an oral session or poster session chair.

## English Language Assistance Program (ELAP)

IADR is pleased to offer an English Language Assistance Program (ELAP) to assist our abstracts submitters with English Language, through the generous support of our IADR colleagues who have agreed to volunteer. This program is designed to assist non-native English-speaking abstract submitters during the abstract submission process.

Individuals who are interested in applying for the IADR ELAP and intend to submit an abstract for the 2026 IADR/AADOCR/CADR General Session, need to complete the **online form** by **September 29, 2025**. Individuals will be matched with our volunteers based on their expertise, geographic location, and availability.

Once the match has been conducted, both the individual and the volunteer will be notified. It is the abstract submitter's responsibility to contact the volunteer and submit his/her abstract for the language review. **Please note that this program is by no means a review of the scientific content of the abstract or a guarantee of acceptance for presentation.** Volunteers will only review the abstract for the language content and will propose necessary suggestions for the corrections to ensure that the submission has used proper English language.

Once program volunteers have communicated with the submitter about the document and the suggested corrections have been made, it is the submitter's responsibility to submit the revised abstract to IADR by the proposed deadline for consideration for presentation. Please visit the IADR/AADOCR/CADR General Session website at https://www.iadr.org/2026iags to learn more about the abstract submission information.

Please note that individuals in the IADR ELAP are required to submit their abstracts twice — once to the program for editing and matching with a volunteer, and again to the IADR/AADOCR/CADR General Session abstract submission site after English language editing has been completed.

To ensure that the submitter and volunteer communicate in a timely manner, IADR will follow up with both individuals. Any problems with a volunteer match can be communicated to IADR at **ELAP@iadr.org**.

We hope that this program will encourage individuals to submit abstracts for IADR meetings by facilitating the improvement of English language skills within the research community.

Please contact IADR at **ELAP@iadr.org** if you have any further questions about this program.

## Systematic Review Abstracts

IADR will accept the submission of Systematic Review Abstracts. Systematic Reviews are defined as, "a review of a clearly formulated question that uses systematic and explicit methods to identify, select and critically appraise relevant research, and to collect and analyze data from the studies that are included in the review. Statistical methods (meta-analysis) may or may not be used to analyze and summarize the results of the included studies. The aim is to ensure a review process that is comprehensive and unbiased. Findings from systematic reviews may be used to determine research priorities and/or provide the scientific basis for clinical treatment."

## Common Abstract Submission Mistakes

- Failure to state objective and conclusion.
- Failure to state sample size and data.
- Excessive use of abbreviations.
- Excessive use of commercial product names.
- Typographical errors (authors can't change any text after the abstract deadline).
- Writing your abstract at the last minute.
- Work that is duplicative is not well received and you will only be asked to combine with another abstract or your abstract may not be accepted.

**Make sure to show your abstract to a colleague prior to submission to avoid making common mistakes, or if you feel you may benefit from English language assistance please submit your abstract for the ELAP program.**

## Group-author Abstracts

Some research collaborations with large numbers of investigators, operating under a single group name, request the inclusion of the group name as an author, distinct from the individual authors. Group authors may also be known as Collaborative-, Corporate- or Collective-authors. Group-authors would include individuals who contributed to the research that led to the abstract but are not named individually as authors. A common example in dental research would be a practice-based research network. Group-authorship is not meant to acknowledge the University, Institution or Corporation under whose auspices the research was conducted. If your abstract does have a Group-author that includes individuals who contributed to the research that led to the abstract but are not named individually as authors, the name of the Group-author must be added along with the City, State/Prov. and Country for each individual person. The Group-author listings will be included in the Author/Co-author Index online and the Program Book.

The Group-author Abstracts section of the abstract submission system should not be used to list out individual co-authors. Individual co-authors must be entered as instructed in the online system to be included in the author listing.

## Word Limit Help

- Always hyphenate when possible (e.g., use “composite-resin restorations”, rather than “composite resin restorations”), and string together complicated phrases with hyphens.
- Abbreviate extensively [i.e., introduce abbreviations quickly and use them. Do not say hybrid zone but rather introduce hybrid zone (HZ) and then use HZ from that point onward].
- Always close spaces between numbers and units (e.g., instead of 30 mm, say 30-mm or 30mm; never leave spaces between numbers & standard deviations; and replace “30 ± 5” with “30±5”).
- Always use tables for the presentation of information when possible. Put units in headers and omit them from the rest of the matrix.
- Make sure that there is no inadvertent ‘dangling punctuation’ in the text, such as a comma or period that is not immediately adjacent to a word.
- Eliminate as many “articles” (a, an, the, …) as possible.
- String together all of the steps in the Materials & Methods section so that you are not starting and stopping individual sentences with separate subjects, verbs, and adjectives [e.g., “The samples (n=10/gp) were etched (37% H3POO4), washed (15s), stored (37°C, 7d), conditioned (25°C, 10m), tested (0.1mm/m), and statistically analyzed (ANOVA, Tukey’s, $p<0.05$).”].
- Replace statements with equations [e.g., Instead of “10 samples were tested for each group” insert “(n=10)” into an appropriate sentence].
- Report all statistical differences with superscripts on results that can be attached rather than requiring separate statements.
- Construct tables to minimize the number of necessary cells.

## Special Requests

If you have any special requests (i.e., religious, academic, travel or personal conflicts) or if you wish to request that abstracts be scheduled in a specific order, please enter this information in the “Special Request” box when entering your abstract online. IADR will not change your presentation if you neglect to include any details regarding your request when submitting your abstract. If you book your travel arrangements prior to receiving your abstracts notification email, please book your return flight for the end of the meeting (late Saturday, March 28, 2026). IADR will **NOT** change presentation dates/times to accommodate your travel schedule or requests made after submission. Please note that all special requests cannot be accommodated but the Group Program Chair will do his/her best when scheduling the applicable abstracts.

# IADR/AADOCR Awards

Add an Award to your abstract submission! The list of Awards for which you can apply when submitting your abstract is as follows:

**IADR/AADOCR Awards**

AADOCR Bloc Travel Grant
AADOCR Hatton Competition
AADOCR NSRG 411 Rapid Research Competition
AADOCR NSRG Rising Researcher Poster Competition (RRPC)
AADOCR Travel Award for New Clinical Investigators

IADR Centennial Travel Award for New Investigators
IADR Colgate Research in Prevention Travel Award
IADR John Greenspan Travel Award
IADR Joseph Lister Award for New Investigators
IADR Lion Dental Research Award for Junior Investigators
IADR Newell W. Johnson Travel Award

There are many other Scientific Group/Network Awards available and information on each can be found on the IADR website.

Abstracts must be submitted to the specific Scientific Group/Network category in the ScholarOne Abstracts system to eligible for the corresponding Scientific Group/Network award. For example, selecting the Dental Materials Scientific Group/Network at the time of submission in ScholarOne Abstracts makes the abstract eligible for IADR Dental Materials Group award applications only.

# SUBMISSION INSTRUCTIONS

Clicking the Submit your Abstract button where it appears online will direct you to login and provide you with step-by-step instructions for submitting your abstract online.

# CRITERIA FOR ABSTRACT ACCEPTANCE

Presentations will be selected for the program on the basis of the scientific quality of the work as judged from the abstract. An impartial panel of reviewers (a minimum of three persons per Scientific Group/Network) will evaluate the content of each abstract. Selection of the abstracts will be made by these reviewers and by the ASC, whose decision is final.

The following are the evaluation criteria used in the review of abstracts. This is provided to call your attention to points that will be considered. In the final analysis, it will be the reviewers' judgment of the value of any abstract that will determine whether the abstract should appear on the program. Since the abstracts are published and become part of the world's scientific literature, it is important that the content be scientifically sound and grammatically correct. Each abstract is reviewed so that high standards can be ensured.

**Common reasons for rejection are:**

1. Abstract is not original research.
2. The research is not innovative in its approach to the stated problem (methodology or data collection or analysis or data interpretation).
3. Nature of problem not explicit from either title or abstract.
4. Material too closely related to another abstract submitted by the same co-authors; should have been combined into a single paper.
5. Abstract has been presented at other meeting(s) or previously published. Abstracts based on manuscripts posted or submitted to a non-commercial preprint server are not considered previously published.
6. Abstract poorly organized and/or not complete. Required information not given in abstract:
    a. Objective
    b. Methods
    c. Results – data and statistical analysis, or
    d. Conclusions
7. Methods of obtaining data not appropriate with respect to the stated problem for the following reasons:
    a. Methods not sufficiently precise to permit the measurements to be accurate, i.e., variations are within the error limits for the method.
    b. Sampling method contains inherent discriminatory factors not recognized.
    c. Size of sample insufficient to show significant conformity or differences.
    d. No well-defined criteria given for evaluation of variables.
    e. Choice of controls questionable.
    f. No control groups reported.
8. Significance of results related to the nature of the problem being studied is not stated.
9. Conclusions do not necessarily follow as a consequence of the method of analysis applied to the data.
10. Conclusions not adequately qualified, i.e., conclusions have greater limitations than implied by the author.
11. Correlations suggested may be fortuitous insofar as no plausible cause-and-effect relation has been suggested, and none is obvious.
12. Abstract is not in English.
13. Abstract is over word count.

# SUBMISSION CATEGORIES BY SCIENTIFIC GROUP/NETWORK

Abstracts are submitted to topic areas as defined by the IADR Scientific Group/Networks. The following are brief descriptions of the topic areas as defined by the corresponding Scientific Group/Network to assist submitters in selection of the best fitting category for their abstract.:

**Behavioral, Epidemiologic and Health Services Research:** Abstracts should be submitted to this category if they are related to behavioral studies and other studies involving pain and anxiety, utilization of dental services, professional education, provision of care, clinical decision analysis, cost-effectiveness analysis, comparative-effectiveness research, reimbursement mechanisms or delivery systems and their effect on oral health. Studies that address the following topics are also appropriate: anthropology, psychology, sociology, health education and promotion, economics, finance and public health. Check the “epidemiological methods” box for papers that include important and timely issues pertaining to the design and conduct of human research studies. Descriptive epidemiology papers should be submitted to the Group corresponding to the topic area of the abstract.

**Cariology Research:** Abstracts should be submitted to this category if they are related to dental caries or dental erosion — specifically their etiology, prevention, diagnosis and treatment. Research approaches could include; epidemiology, clinical studies, or laboratory and animal experimentation. Studies that are concerned with caries, but where the major emphasis is related to microbiology, salivary glands or dental materials, should be considered by those particular Groups. The following submission options will be available: Demin/Remineralization; Erosion; Fluoride and Ca-based Products; Detection, Risk Assessment and Others; Microbiological Studies/Biofilm; and Clinical and Epidemiological Studies.

**Clinical & Translational Science Network:** Abstracts should be submitted to this category if they are related to clinical and translational research in dentistry, as well as to promote research in areas important for the development of this research, for example in the fields of research methodology, clinical study design, biostatistical and epidemiological methodology, informatics as it relates to clinical and translational studies, and integrative approaches to overall human health with a focus on dental connections and sequelae. A strong goal of the network is to integrate clinical and translational research interests across all IADR research groups and among dental academic and research institutions throughout the world, and to break down barriers to inter-institutional and interdisciplinary clinical and translational research.

**Craniofacial Biology:** Abstracts should be submitted to this category if they are related to a broad array of basic science and clinical studies dealing with the normal growth, development and maintenance of the craniofacial tissues and the consequences of physiological and pathological variations and challenges on these processes. Please submit papers for the craniofacial biology program based on the following division of topics: **(I) Molecular**—molecular aspects of craniofacial genetics, development, and cell biology; or **(II) Other studies**—including teratology, oral physiology, population studies, orthodontics, oral biology and temporomandibular joint function.

**Dental Anesthesiology and Special Care Research:** Abstracts should be submitted to this category if they are related to either of the following two areas. **1) Dental anesthesiology**: Abstracts related to clinical and/or basic research of the methods and techniques for relief of anxiety and pain control. These scientific areas may focus on local anesthesia, analgesia, sedation and general anesthesia for the systemic management of dental patients, an in particular medically compromised patients, and include the necessary precautions for the treatment of medical emergency cases. **2) Special Care dentistry**: Abstracts should relate to clinical and/or basic scientific research in Special Care dentistry (SCD). SCD concerns those individuals with an activity restriction, a health condition and/or a disability that directly or indirectly affects their oral health, within the personal and environmental context of that individual. This population may include patients of all ages, medically compromised patients, persons with disabilities, mental health, prison populations, refugees, homeless persons, persons with dental anxiety, etc.

**Dental Materials:** All scientific aspects of dental materials are appropriate for this category. This includes laboratory, clinical, and animal testing of materials and their components, as well as instruments and equipment. The interactions of materials and the oral environment are also included. The development of new materials, testing methods, and protocols is of particular interest. Please submit papers for the dental materials program based on the following division of topics**: I) Ceramic-based Materials:** Properties, characteristics, composition and performance of ceramics (except resin bonding), sintered ceramics, machined ceramics, ceramo-metal systems, and implants. **II) Polymer-based Materials**: Properties, characteristics, composition and performance of polymers and resin-containing dental materials, including unfilled polymers, composite sealants and restoratives, prosthetic resins and elastomers (excluding adhesives). **III) Metal-based Materials and Other Materials:** Properties, characteristics, composition and performance of amalgam, mercury, cast alloys, shape memory alloys, wrought wires and metallic implant materials as well as other materials-based topics specific to orthodontic, endodontic, operative, laboratory and preparatory materials. **IV) Adhesion - Bonding and Sealing:** Bond strength testing of all types of dental restorative materials, cements and sealants, microstructural analysis of adhesive interfaces, adhesive surface analysis, and assessment of margin sealing and leakage at bonded interfaces. **V) Biocompatibility, Bioengineering and Biologic Effects of Materials:** Biocompatibility tests, properties and characteristics of antibacterial/anticariogenic materials and therapy, bio-active materials, regenerative therapy, interactions with oral environment and tissues. **VI) Instruments and Equipment:** Curing light units, cutting, finishing and polishing instruments, endodontic posts, and their mechanical properties, safety and efficacy, new microscopic and analytical techniques, CAD/CAM equipment, 3-D printers and other devices applied to materials. **VII) Color and Appearance (Esthetics):** Optical properties of all dental materials (color, translucency, gloss, fluorescence, opalescence, surface texture), in-vivo and in-vitro tooth whitening, instruments and equipment. **VIII) Clinical Trials:** Human studies involved with clinical performance for all materials.

**Diagnostic Sciences:** Abstracts should be submitted to this category if they are related to the detection and measurement of the severity and progression of all oral diseases. Equipment and techniques include, but are not limited to, methods such as radiography, optical, sound, nuclear medicine and magnetic resonance imaging. The subject area also includes evaluation of the accuracy and reproducibility of diagnostic methods as well as studies in clinical decision-making.

**Digital Dentistry Research Network:** Abstracts should be submitted to this category if they are related to the use or testing of digital technology in: treatment planning, diagnostics, intra-operative treatment, intra-oral and extra-oral scanning, operative accuracy and efficiency, machine learning, CAD/CAM milling, 3D printing, digitally fabricated material properties, and interdisciplinary coordination.

**e-Oral Health Network:** The newly created e-Oral Health Network is inviting submissions on eHealth, Telehealth and ICT applications in dentistry and oral health care. Through these activities we aim at bringing together perspectives and insights not only from academics, but from a diverse audience and speakers from government, industry, oral health professional, special interest sectors, and leading experts from around the world to present and share recent achievements and developments in the eHealth field. We encourage IADR members to submit presentation abstracts that focus on practical experiences from clinicians, care providers, patients, insurance and health care funding arrangements, or public health perspectives, or that focus on research outcomes showing clinical, oral health and health benefits, economic benefits, quality of life benefits, etc. In particular, the network encourages submissions providing evidence for the efficiency, effectiveness and user acceptance of tele-dentistry and eHealth applications in oral health.

**Education Research:** Abstracts should be submitted to this category if they are related to research affecting all facets of education in the field of dentistry and oral health. Areas include but are not limited to: educational practice; teaching and learning dynamics; teaching evaluation, curriculum design, program evaluation, and outcomes evaluation at all levels (professional and public); competency evaluation (validity and reliability); applications of new technologies, methodologies, teaching and research approaches, characteristics of

institutions, educators, and students, licensing and certification, quality assurance, continuing competence, and professional development, as well as cross-professional interaction.

**Evidence-based Dentistry Network:** Abstracts should be submitted to this category if they are related to all the aspects in the development and practice of evidence-based Dentistry. Submissions will be reviewed for validity, importance, and application of methods and techniques for developing, teaching and implementing knowledge distillation and transfer.

**Geriatric Oral Research:** Abstracts should be submitted to this category if they are related to research in the basic mechanisms of aging, the prevalence and characteristics of diseases and disorders in the aged, and their prevention and treatment. This includes general biomedical research, oral medicine, patient management, clinical techniques, and delivery systems, as well as the psycho-social and economic aspects of treating the older adult.

**Global Oral Health Inequalities Research Network:** Abstracts should be submitted to this category if they are related to global oral health inequalities research, including — though not restricted to: research focused on Global Oral Health Inequalities, particularly with the wider health community; interdisciplinary research; research focused on developing standard reporting criteria; implementation research; research that emphasizes the significance of social determinants of oral health, including exposure to environmental risk factors; research based on upstream prevention, with an emphasis on early health promotion at critical stages of the life course.

**Implantology Research:** Abstracts should be submitted to this category if they are related to the basic and clinical science aspects of the implantation of materials and/or biological analogues into the orofacial complex for the augmentation, replacement, or regeneration of body tissues, excluding tooth restoration. The properties of both the natural tissues being replaced and the synthetic/biological substitutes are of interest. The subject area includes; structural and property studies on natural and synthetic materials, biological investigation, tissue/material interfaces, and systematic clinical evaluation of implant materials and designs.

**Lasers & Bio-photonics Group:** Abstracts should be submitted to this category if they are related to lasers and general photonic devices regarding the clinical use, research, development, mechanisms of action, laser-assisted treatments, or for any pre-clinical and clinical use, either as a means of diagnostics or treatment to improve health or esthetics, or to facilitate the procedure in any way in the craniofacial, oral, and dental areas.

**International Network for Orofacial Pain and Related Disorders Methodology:** Specific goals include establishing a working consortium of multi-national clinical centers having the capability to conduct interdisciplinary basic, translational and clinical research on an international and collaborative level into the etiology, diagnosis, prevention and management of TMDs and orofacial pain conditions, and developing comparable evidence-based diagnostic criteria through research collaboration into all acute and chronic dental and orofacial pain conditions. The Research Diagnostic Criteria for Temporomandibular Disorders (Dworkin and LeResche, 1992; RDC/TMD) has become internationally recognized as a useful clinical, laboratory, and epidemiologic classification tool. In order to ensure that (1) patients experiencing TMDs receive only the most appropriate care, (2) laboratory experiments produce generalizable data via reliable classification, and (3) clinical and epidemiological studies are conducted within a common framework, the International RDC/TMD Consortium Network, “the Consortium”, has been created to foster collaborative international research yielding the most accurate and useful evidence-based description of the complete natural history, clinical course and therapeutic efficacy of TMDs and of all the risk and protective factors influencing all forms of TMDs.

**Microbiology/Immunology:** Abstracts should be submitted to this category if they are related to microbiology/immunology, including: micro-organisms, such as bacteria, viruses, fungi, protozoa, etc., and their relationship to and/or association with oral diseases; microbial pathogenesis; microbial biofilms; microbial genetics, gene structure, gene expression and regulation, genomics, and proteomics; microbial physiology and the by-products of micro-organisms and their relationship to oral diseases; the effects of chemicals, antimicrobial agents, etc., on the physiology and virulence of oral micro-organisms; the serologic

and immunologic aspects of oral diseases (human immunologic response to oral micro-organisms); the systemic effects of oral organisms; oral manifestations of systemic diseases; and cell biology and tissue culture studies (excluding experimental pathology) as they relate to oral micro-organisms and diseases. Infection Control: This area includes research covering all aspects of infectious disease transmission and control in the context of oral health care and its delivery in any setting, including the dental office, laboratory, and hospital. Presentations may include assessments of transmission potential and risk, methods of disease spread, or techniques for prevention of cross-infection arising from any source, such as person-to-person contact or via fomites or aerosols.

**Mineralized Tissue:** Abstracts should be submitted to this category if they are related to research principally directed toward elucidation of some aspects of hard-tissue structure, formations or function. While overlap between research in this area and that of cariology, periodontology and/or salivary research may frequently occur, distinction should be made on the basis of the primary goal of the research. The following session topics should aid you in determining whether a research topic is appropriate for this area: formation of calcium phosphates; regulation of mineralization and dissolution; fluoride; development and mineralization; matrix constituents; regulatory factors in bone resorption; regulatory factors in cell culture; ultrastructure and morphology; and morphology, physiology, and chemistry.

**Minimally Invasive Dentistry Network:** The Minimally Invasive Dentistry Network is inviting submissions on the delivery of minimally invasive approaches including risk assessments, early detection, prevention and treatment of dental diseases in all ages with the implementation of novel applications, futuristic materials and innovative systems when/if required. The ultimate aim of the network is to integrate laboratory-based, clinical and translational research interests related to Minimally Invasive Dentistry strategies across all IADR Scientific Group/Networks.

**Network for Practice-based Research:** Abstracts should be submitted to this category if they are related to research performed in dental practice, away from universities or laboratories. This may include research on any topic performed in private, public, military or other dental clinics. It may be on topics such as the evaluation of materials, equipment or techniques both clinical and non-clinical, the evaluation of administrative and financial aspects of practice, social, epidemiologic and behavioral evaluation relevant to dental practices and many others.

**Neuroscience:** Abstracts should be submitted to this category if they are related to and involve investigations of neural regulation of development and neural plasticity, excitable membranes, synaptic transmission, neurotransmitters, receptors, neuro-endocrine, exocrine, autonomic regulation, sensory systems (especially pain), muscle and motor systems and sensorimotor integration. The clinical interests of this subject area include clinical studies of orofacial sensation, such as pain, temperature, touch, taste, studies on jaw, facial, and oral reflexes, as well as more complex sensorimotor functions such as voluntary movement, mastication, swallowing and speech. In addition, movement control and movement disorders such as orofacial dyskinesia or Parkinson's, and sleep-related orofacial disorders such as bruxism and apnea-snoring are relevant. Neuroscience/TMJ is also particularly concerned with all aspects regarding the measurement, mechanisms, diagnosis, and treatment of orofacial and TMJ pain and neuromuscular dysfunction.

**Nutrition:** Abstracts should be submitted to this category if they are related to research in the area of nutrition and oral/craniofacial health, and the consequences of oral/craniofacial dysfunction on general nutrition and health. The oral cavity is the site of many acute and chronic diseases and congenital anomalies — any or all of which may be linked to nutritional status. The Nutrition Group brings together dental scientists who are interested in sharing and exploring new avenues in this research discipline. **New:** A special call for abstracts specifically focused on chewing function kinematics, electromyography, masticatory performance and food oral processing will allow to start a subgroup to promote interaction, standardization of techniques, and international collaborations in the field of masticatory function/dysfunction, which is an important topic for the health of populations.

**Oral Health Research:** Abstracts should be submitted to this category if they are related to a broad array of basic, clinical and applied studies related to: oral/dental hygiene strategies for the prevention of oral disease and the promotion of wellness; the outcomes of primary and secondary preventive care provided to and in collaboration with individuals and groups in a variety of settings; interdisciplinary approaches to integrating oral health into general health; clinical efficacy of professional and personal oral hygiene measures; methods to improve health outcomes of compromised patients through improved oral hygiene; the dental hygiene process of care; self-care strategies, including adaptations for special and culturally diverse populations, client-coping and practitioner caring dimensions, and promotion of healthful lifestyles; disease-prevention-/health-promotion-focused curricular models; science transfer methods; ethics and quality assurance; alternative patterns of practice; clinical decision-making; and issues related to the conduct of research, including approaches to subject recruitment and retention, protocol compliance, data management and monitoring, quality control and study coordination.

**Oral Malodor Network:** The Oral Malodor Network invites researchers and clinicians specializing in breath research, especially halitosis, to submit abstracts for our upcoming conference. We aim to bring together diverse experts to facilitate interdisciplinary exchange and advance knowledge in areas such as etiology, prevention, epidemiology, diagnosis, and treatment of oral malodor. Join us in promoting awareness and publication of cutting-edge research and help us communicate these discoveries effectively to the wider public.

**Oral & Maxillofacial Surgery:** Abstracts should be submitted to this category if they are related to basic and applied research dealing with the surgical and non-surgical management of: impacted teeth; residual ridge deformities and their reconstruction with grafts, alloplasts, and implants; dentofacial and craniofacial deformities; temporomandibular joint dysfunction; hard- and soft-tissue trauma; benign and malignant diseases of the soft and hard tissues, including salivary glands; reconstruction of soft- and hard-tissue defects; infection of the face, head, and neck; nerve dysfunction; post-surgical pain and swelling; and wound healing and factors which affect it, as well as long-term follow-up data on research done in any of these areas.

**Oral Medicine & Pathology:** Abstracts should be submitted to this category if they are related to experimental investigation of diseases affecting the oral cavity and the adjacent tissues, but excluding those (e.g., periodontal disease, caries, salivary research) more appropriately dealt with by other Groups. Experimental investigations of normal structure are appropriate insofar as they contribute to our understanding of disease, and cell, tissue, and organ cultures are also included in this category. Epidemiological, clinical and laboratory research are encouraged.

**Orthodontics Research:** Abstracts should be submitted to this category if they are related to any aspect of orthodontics field including Clinical, Materials & Appliances, Basic Science, and Translational Research. Abstracts submitted for Clinical Orthodontics Research should focus on, but are not limited to: 1) innovative approaches to diagnosis or treatment of dental and skeletal malocclusion, 2) improved interdisciplinary case treatments, 3) non-surgical treatment strategies for skeletal malocclusions, 4) novel treatments for patients with craniofacial anomalies, 5) improved patient management techniques and 6) advances in mechanotherapy and biomechanics. Abstracts submitted for Materials & Appliances should focus on 1) new appliances and tools, 2) new bonding materials 3) new bracket and wire design, 3) new imaging and scanning tools, 4) management and diagnostic innovations in software, 5) any other invention that can improve daily care by Orthodontists. Abstracts submitted for Basic Science should focus on any in vitro or in vivo studies that 1) advance our knowledge in growth and development, 2) biological response to mechanical stimulation, 3) bone biology (bone formation, resorption, and remodeling) 4) biology of tooth movement 5) etiology of malocclusion and skeletal deformities 5) anthropology studies of human skull and occlusion 6) cartilage development, remodeling and disease. Abstracts submitted for Translational Research should focus on, but are not limited to, applied basic science, engineering, and all implementation of science to advance clinical Orthodontics such as 1) accelerated orthodontics 2) expanding the boundaries of tooth movement 3) enhanced orthopedic treatment, 4) improving biological response during retention 5) new methodologies to control bone remodeling, 5) approaches to efficiently convert basic science data into clinical Orthodontics treatments. Abstracts from interdisciplinary research teams working on Clinical or Translational Orthodontics are strongly encouraged.

**Pediatric Oral Health Research:** Abstracts should be submitted to this category if they are related to pediatric oral health research and report results of clinical, survey, in vitro, genetic, health services and qualitative studies related to pediatric/children's oral health. This includes but isn't not limited to cariology, pulp therapy in children, behavioral factors and study population characteristics of participants under 18 years of age, and caregivers of children.

**Periodontal Research:** Abstracts should be submitted to this category if they are related to periodontal and peri-implant tissues, epidemiology and diagnosis of periodontal diseases and peri-implant biological complications, etiological factors/microbiology, pathogenesis, of periodontal diseases and peri-implant biological complications, preclinical *in vivo* experiments and clinical trials to evaluate treatment of periodontal diseases and peri-implant biological complications, chemoprevention and chemotherapeutic approaches, patient reported outcome measures related to diseases of the periodontium and peri-implant tissues and their treatment.

**Pharmacology, Therapeutics & Toxicology:** Abstracts should be submitted to this category if they are related to laboratory, clinical, public health or epidemiologic research on the mechanism, nature, or treatment of diseases or disorders related to dentistry and the introduction of new drugs for the treatment of such entities may be submitted to PTT. Those dealing with the adverse effects of procedures, materials, drugs, devices, etc., used in the diagnosis, management, or treatment of such diseases or disorders are similarly appropriate. Toxicological studies of drugs, chemicals and other agents pertinent to the field of dentistry, as well as the associated hazards of such agents, may also be included.

**Pride in Dental Research Network:** Abstracts should be submitted to this category if they relate to LGBTQIA+ health, and dental research focused on workforce issues relevant to the LGBTQIA+ community. Submissions can also include research that promote interdisciplinary collaborations on these topics.

**Prosthodontics Research:** Abstracts should be submitted to this category if they are related to prosthodontics research and includes the following: fixed prosthodontics, removable prosthodontics, materials as they relate to prosthodontics in general, occlusion, TMJ research, implants, electromyography, basic and clinical applications to restorative dentistry in general, electrosurgery, ceramics and acid-etch restorative dentistry.

**Pulp Biology & Regeneration Research:** Abstracts should be submitted to this category if they are related to studies on the development, structure, and function of the dental pulp, the dentin-pulp complex and related periapical tissues. Studies may include methods in the following areas of analysis: autoradiography, radiography, molecular biology, protein chemistry (genomics and proteomics), microbiology, immunology, physiology, biochemistry and pharmacotherapeutics. Physiological and pathological processes involving these tissues include: signaling mechanisms in tooth development, dentinogenesis and dentin matrix proteins, wound healing and regeneration, as well as neural, vascular, and cellular responses to anesthesia, pain-producing stimuli, materials and instrumentation used in the restoration of teeth and hereditary diseases. Also included are those related areas of clinical research pertaining to dentin and pulpal tissues from disciplines such as endodontics, pediatric dentistry, restorative dentistry (e.g., pulpal compatibility testing of dental restorative materials), periodontics (e.g., root dentin hypersensitivity) and oral and maxillofacial surgery.

**Salivary Research:** Abstracts should be submitted to this category if they are related to the morphology, biochemistry, physiology, endocrinology, development and pathology of salivary glands; the composition, secretion, and functions of saliva; and the synthesis of salivary components. It may also include the effects of saliva on oral structures and micro-organisms—especially dental plaque and calculus—and the influence of such effects on oral pathological conditions—such as dental caries, periodontitis, mucositis and ulcers—provided there is sufficient emphasis on the salivary factors.

**Student Training and Research (STAR) Network:** Abstracts should be submitted to this category if they are related to promoting, encouraging and fostering student research on a global level.

**Stem Cell Biology:** Abstracts should be submitted to this category if they promote and encourage investigation into stem cell biology, particularly in relevance to orofacial stem/progenitor cells. Abstract subjects should promote and encourage the development of stem cell therapies for the regeneration of

orofacial tissues. Abstracts should provide an international and cooperative forum for the discussion of stem cell biology and regenerative dental medicine. Submitted abstracts should further promote translational approaches of stem cell biology into novel or enhanced approaches that benefit the health of patients who suffer from dental, oral and craniofacial diseases.

**Women in Science Network:** Abstracts should be submitted to this category if they are related to women's oral health and its association with general health, gender and health disparities, gender inequality in academia and research and women's leadership.

# NOTIFICATIONS OF ACCEPTANCE/NON-ACCEPTANCE

The official notifications will be emailed on or about **December 18, 2025, to all accepted presenters.** The notifications will include presentation mode, date, and session time. An email containing the Final Presentation # will be sent after the Presenter Registration deadline (late January 2026), to all registered, accepted presenters.

**All communication between IADR and the PRESENTING AUTHOR will take place via email. The email address used will be the one supplied at the time of abstract submission for the PRESENTING AUTHOR. Please make sure that you enter a valid, long-term email address for the PRESENTING AUTHOR to ensure the PRESENTING AUTHOR will receive all important notices that are sent from IADR regarding your abstract and presentation at the meeting.**

**Successful participation in the 2026 IADR/AADOCR/CADR General Session is contingent on the correct email address being provided for the Presenting Author.**

After **December 18, 2025,** the placement or rejection of your abstract cannot be changed and is considered final. Please do not call IADR regarding the status of your abstract prior to this date. After December 18, you can also view your abstract notification letter by logging into your ScholarOne Abstracts account's Message Center or you can email **IADR Meetings Department** if you did not receive your notification.

# PRESENTER REGISTRATION AND RATES

**All presenters are required to register for the meeting by the presenter registration deadline of January 15, 2026.** Failure to register by this date will result in the withdrawal of your submission. Please plan accordingly. Also, if you plan on registering at the IADR membership rate, please make every attempt to complete your annual renewal in advance of the presenter registration deadline to allow ample processing time.

## 2026 IADR/AADOCR/CADR General Session – Presenter Registration Rates

| Registration Type | Total Price USD |
|---|---|
| Member | $745 |
| IADR Member (Low, Lower Middle and Upper Middle-income countries only) | $375 |
| Non-member | $1,330 |
| Student/Retired Member | $375 |
| IADR Student Member (Low, Lower Middle and Upper Middle-income countries only) | $280 |
| Student Non-member | $665 |

Membership dues must be paid in full for the year **2026, on or before the presenter registration deadline** for you to qualify for the member registration fee. Registrants who are not current members by the date of the meeting will be charged the non-member fee and IADR reserves the right to charge the difference. **Affiliate members must upgrade to join or renew at the Member or Student Member category if presenting at IADR/AADOCR/CADR General Session.**

# MODES OF PRESENTATION

At the time of submission, you will be asked to select your preferred mode of presentation. However, not all requests can be accommodated, and the final mode of your abstract will be selected by the applicable Group Program Chair. Every effort will be made to honor poster only presentation requests. The IADR/AADOCR/CADR General Session will include presentations in the following modes:

**Oral Presentation:**

- Up to six individual oral presentations in a meeting room.
- PowerPoint Presentations (all equipment provided).
- Presentations last 10 minutes; discussion after each presentation lasts five minutes.
- Two Session Chairs facilitate the session.
- Oral sessions will be scheduled Wednesday through Saturday.

**Poster Presentation:**

- Presented on a poster board in the Exhibit Hall.
- Actual poster presentation time is one hour and 15 minutes.
- Posters will be available for viewing all day on Thursday, Friday or Saturday.
- No audio-visual equipment is used.
- Poster sessions will be scheduled Thursday through Saturday.
- Session Chairs will be assigned to facilitate the session.

## Accepted and Presented Abstracts

Accepted and presented abstracts become citable as part of a special online-only issue of the *Journal of Dental Research,* the journal for dental, oral, and craniofacial research. Accepted and presented meeting abstracts are citable. The *Journal of Dental Research* follows the International Committee of Medical Journal Editors recommendations regarding the conduct, reporting, editing and publication of scholarly works and these recommendations are applied to meeting abstracts to the extend practical and possible.

# ADA CONTINUING EDUCATION RECOGNITION PROGRAM (CERP)

The International Association for Dental, Oral, and Craniofacial Research is an American Dental Association Continuing Education Recognition Program (ADA CERP) recognized provider. ADA CERP is a service of the American Dental Association to assist dental professionals in identifying quality providers of continuing dental education. ADA CERP does not approve or endorse individual courses or instructors, nor does it imply acceptance of credit hours by boards of dentistry. Concerns or complaints about a CE provider may be directed to the provider or to the Commission for Continuing Education Provider Recognition at CCEPR.ada.org.

Delegates are eligible to receive continuing education credits by attending the scientific sessions throughout the meeting. One hour of program time is equivalent to one credit hour. Delegates are responsible for completing the forms accurately and keeping them for auditing purposes. (Do NOT return the forms to IADR.) For information on the ADA CERP program, please contact Director of Membership and Publications, Kourtney Skinner at **kskinner@iadr.org**.

IADR will announce the maximum number of continuing education credits available for this meeting when the scientific program is released (mid-February 2026)

ADA C·E·R·P® | Continuing Education Recognition Program

# FREQUENTLY ASKED QUESTIONS

1. **When is the abstract submission deadline?** **Monday, October 27, 2025** (11:59 p.m. PT).
2. **Do I need to be a member of IADR to submit an abstract?** No. However, you do need to be a member in order to be eligible for some awards/competitions. You will also receive a reduced registration rate as a member of IADR. Your membership must be paid for 2026 to be eligible for the reduced member pricing. Members of IADR and any other Division are eligible for the member rate.
3. **How do I access the abstract submission site?** All abstract submitters, member and non-member, must access the site through the Member Portal of the IADR website at https://www.iadr.org/My-IADR. Click the Event link from the left menu to select the meeting appropriate site to open.
4. **How do I know if my abstract was successfully received?** In Step 6: Review & Submit, you will be asked to review all information you have entered for your abstract. Incomplete steps will be highlighted and you will not be able to proceed to complete payment until the required steps are complete. You will be able to view a proof of your abstract in this step. Once all steps are complete and the proof has been viewed, click the Complete Payment button to be redirected to the payment screen. Once payment is processed you will receive a confirmation of submission email from the system. This confirmation will be available in your ScholarOne Abstracts Message Center and your receipt will be available for view and print on the View Submissions page associated with the submitted abstract.
5. **What is the abstract submission fee?** The abstract submission fee is $25 USD.
6. **If I need to make edits to my submitted abstract before the deadline, will I have to pay the abstract submission fee again to resubmit it?** If the submitter follows instructions provided on the View Submissions page to edit a submitted abstract, the submitter will not be required to pay the abstract submission fee again. If the submitter creates a new submission instead of editing an existing submitted abstract, the abstract submission fee will be required again.
7. **Is there a word limit imposed on the abstract title or abstract body?** Yes, all abstract titles are **required** be 10 words or less. The abstract body must be no more than 300 words.
8. **Can I change my Scientific Group/Network to a different group after I successfully submit my abstract?** Yes, you may return to your submission at any time prior to the abstract submission deadline to transfer your abstract to a different group by returning the completed abstract to Draft and editing the Scientific Group/Network selection in Step 3. Be sure to save your changes and resubmit your abstract. Abstracts that remain in draft will not be reviewed.
9. **Can I make changes to my abstract text after the deadline?** No. IADR does not permit modifications to abstract text after the deadline under any circumstances. It is very important that you submit an error free abstract text. Be sure prior to the submission of the abstract your co-authors or advisors have reviewed the abstract for content and grammar in addition to approving the abstract for submission.
10. **If I forget to add an author, can I do so after the abstract deadline?** Yes, you can still add an author, if necessary, by emailing the **Meetings Department** the co-author's name, email address and full affiliation, information. However, please make every attempt to add all authors during the abstract submission process.
11. **Can I submit more than one abstract to the same scientific program (excluding session proposals/keynotes) as a Presenting Author?** No. IADR permits authors to submit one abstract only as a Presenting Author per scientific program. You may be listed as a co-author on more than one abstract. If you submit more than one abstract as a presenter in the same scientific program, you will be

asked to delete one of the submissions. If your response is not received, one of the submissions will be automatically deleted and will not be reviewed.

12. **When I submit my abstract, how do I indicate my mode preference?** You will be asked to submit your presentation mode preference at the time of submission (oral, poster, or no preference). IADR makes every attempt to provide you with your first choice, but there is no guarantee as several programming factors must be taken into account during the programming finalization process. The Group Program Chair makes the final decision regarding presentation mode.

13. **Should I put the abstract title, authors, and affiliations in the text of my abstract?** No. These items will be collected separately during the abstract submission process. References are not collected.

14. **Is there a limit on the number of co-authors that I can add to my abstract?** No.

15. **Can I submit previously published or presented work?** All abstracts must be original research. Abstracts cannot be submitted if the research represented by the abstract has been published (online or in print) and/or presented or accepted for presentation at any other national or international meeting at the time of abstract submission. Abstracts based on manuscripts posted or submitted to a non-commercial preprint server are not considered previously published.

16. **If I make a mistake during the abstract submission process, do I need to start a new submission?** No. You can make changes to your abstract submission at any time prior to the deadline by logging into your ScholarOne Abstract Account and following the instructions on the View Submissions page to edit a submitted abstract. Be sure to save your changes and resubmit your abstracts. Draft abstracts will not be reviewed.

17. **Will IADR list my department in the Program Book?** No. IADR will only list the affiliation/institution of the presenting author in the Program Book due to space limitations. Please make every attempt to list your department/branch separately from your affiliation/institution record.

18. **Will IADR edit my abstract?** No. Once you submit your abstract, it will not be edited in any way for content. **Typographical or grammatical errors that appear in your abstract submission will also appear in the final online Scientific Program.** Abstracts may be formatted only to follow IADR publication guidelines or requirements.