

2025 ASTRO Annual Meeting

Abstract Guidelines

Annual Meeting Dates – September 28 - October 1, 2025

Deadline to Submit: Tuesday, February 25, 2025; 11:59 p.m. Pacific Time

Notification of acceptance or decline: Thursday, May 15, 2025
Sent to PRESENTING AUTHOR (not submitter)

Eligibility

1. Sponsorship or ASTRO membership is not required to submit an abstract.
2. **Abstracts must be received by 11:59 p.m. Pacific Time, Tuesday, February 25, 2025**
3. All studies in oncology, radiation oncology, and radiation therapy for non-oncologic conditions are eligible for submission. This includes basic and translational science, technology-related, health services research, epidemiologic, patient-focused clinical studies, and all phases of trials.
4. Abstracts may only be submitted by one of the authors of the abstract. **Consent must be obtained from all co-authors** regarding the material and content presented in the abstract. In the event of any conflicts please refer to Item 7 of this Eligibility section.
5. An abstract may only be submitted once. Abstracts of clinically related subjects should be combined into a single abstract. **Submission of multiple abstracts on a single study may result in the rejection of one or more abstracts.**
6. Submit new research. Data from the long-term follow-up of previously presented clinical trials may be submitted only if significant new information can be shown.
7. ASTRO, in its sole discretion, reserves the right to make a determination to remove an abstract from the program if it believes the circumstances warrant removal.

Abstract Policies – Commercial Interests, Disclosures, Embargo, and Copyright

Policy on Studies Sponsored by Commercial Interests

1. Abstracts may be submitted from ineligible companies (formerly referred to as commercial interests). Such presentations will be subject to a rigorous peer review to ensure the validity of the research results and conclusions. In addition, abstract content is subject to change after review so that it is not biased toward any proprietary interests.
2. **An ineligible company is defined as any organization that develops, produces, markets, resells, or distributes healthcare goods or services consumed by or used on patients. Any potential conflict will be identified and managed according to ACCME guidelines, and ASTRO's COI management policies.**
3. The presenting author of an abstract must NOT have a relevant/specific ownership interest, i.e., owner, founder, partner, etc., in the scientific content in the abstract. If a conflict of interest exists, the abstract must be presented by a co-author with no relevant ownership interests.
4. If the presenting author is employed by an ineligible company, as defined above, an alternate presenter must be named. This applies only to abstracts presented in sessions selected to receive CME, such as oral scientific and Quick Pitch scientific sessions.

5. ASTRO will exercise all rights in ensuring that abstracts reporting the discovery of scientific research remain in compliance with ACCME standards for offering CME.

Disclosure Policy

ASTRO is an accredited provider of continuing medical education and adheres to the policies and standards set forth by the Accreditation Council for Continuing Medical Education (ACCME). As such, abstract authors are required to disclose relationships with ineligible companies.

An ineligible company is defined as “any entity developing, producing, marketing, re-selling or distributing health care goods or services consumed by or used on patients.”

To ensure its compliance, ASTRO expects that the content and related materials will promote improvements or quality in health care and not a specific proprietary business interest or commercial bias.

We employ several strategies to ensure the absence of bias:

- Presenters are required to provide disclosure of relationships with commercial interests.
- Presenters are required to provide a balanced view of therapeutic options.
- All abstracts undergo a rigorous peer review process.
- Potential conflicts are managed by additional committee review, advance slide review, and session audits.

Embargo Policy and ASTRO Press Policy

All abstracts to be presented at the ASTRO Annual Meeting are embargoed until **5:00 p.m. Eastern Time on Friday, September 26, 2025**. The embargo for all posters at the meeting will also lift at that time. For abstracts selected for oral presentation, information beyond what is included in the abstract, such as updated or additional results, is embargoed until the date and time of scientific presentation or presentation at an ASTRO news briefing, whichever occurs first. The embargo policy applies to all abstracts regardless of whether information is obtained from another source.

Embargo violations by media professionals may result in suspension of credentials at the ASTRO Annual Meeting as well as future meetings and may also impact the ability to receive advanced media materials for future meetings. Embargo violations by abstract authors and/or sponsors may result in the removal of the abstract from the scientific program. Abstract authors are responsible for notifying financial and other sponsors about this embargo policy.

Questions about the embargo policy may be directed to [ASTRO's media relations team](#).

The full text of the abstracts selected for oral and poster presentation will be available online at the start of ASTRO's Annual Meeting. Abstracts also will be published in a supplement of the *International Journal of Radiation Oncology • Biology • Physics* (www.redjournal.org).

Policy on Abstract Copyrights

Once an abstract is submitted to ASTRO, the author (or owner of the IP rights) retains the rights, including the copyright, vis a vis ASTRO upon submission of the abstract for the meeting. However, by submitting the abstract, the owner is granting ASTRO and its affiliates the right and license to publish, use, post, etc. the abstract. You can find more information about the terms of submission here: [Elsevier Website Terms & Conditions](#).

Abstract Scoring Criteria

Each abstract is scored by a committee of at least 7 reviewers who are your peers and experts in the field based on the following scoring criteria:

- Does the abstract address an important and novel question?
- Does the study design permit the question to be answered?
- Are the endpoints of the study clearly defined?
- Is there an appropriate use of statistics?
- Are the methods described in sufficient detail?
- Are the conclusions supported by the data?

Specific questions for prospective Clinical Trials:

- What were the scientific hypothesis and primary endpoint?
- What were the eligibility criteria and study patient characteristics?
- What statistical model and assumptions were used?
- What was the toxicity assessment?
- What were the limitations?
- Was there a rationale, either clinical or laboratory, underlying the study design?
- Is it either promising enough to pursue or negative enough that presentation would prevent other investigators from wasting efforts?

Specific questions for retrospective observational studies:

- What are the scientific hypothesis and outcomes reported?
- What is the data source and how was follow-up attained?
- Is the cohort well-described and reasonably homogeneous?
- Have attempts been made to account for biases inherent in retrospective reviews?
- What statistical methods were used?
- Are the conclusions appropriate to the study design?

Submitting and Presenting Authors Responsibility

1. An individual may submit more than one abstract in which he or she is indicated as the presenting author. **However, they may only present one oral presentation.** If more than one abstract is selected for oral presentation, an alternate presenter must be assigned (this does not apply to quick pitch or poster presentations).
2. It is the submitter's responsibility to obtain consent from all co-authors for submission of the abstract and to ensure up-to-date and accurate disclosures are submitted for each co-author on the abstract. ASTRO manages and reports all disclosures as submitted. Potential conflicts with ineligible companies for the presenting author and all co-authors must be disclosed at the time of submission.
 - Submitters may use **this form** to indicate consent and collect COI information for the abstract authors.
3. ASTRO has developed a policy to handle any violations of the ASTRO Disclosure policy. Any reported violations will be researched and handled according to policy, which can include removal from presenting at future conferences.

4. The *presenting* author will receive all notifications and email communications related to the accepted abstract(s). The presenting author is responsible for informing all co-authors of acceptance to ASTRO's Annual Meeting.
5. **Obligation to Register:** Acceptance of an abstract obligates the authors to present the paper at the in-person meeting and pay the meeting registration fee. If circumstances prevent in-person meeting attendance, you must [notify ASTRO](#) and arrange for a co-author to present the abstract on your behalf. **If the presenting author does not register and attend the meeting, the abstract will be removed from the program.**

Presentation at Other Meetings

1. **Abstracts should contain new material that has not been presented or published prior to the ASTRO Annual Meeting, September 28 - October 2, 2025.** Previously presented abstracts will not be eligible for ASTRO's official Press Program or Plenary Session.
2. If the same abstract is accepted for presentation at another major medical meeting (annual meetings of national and international societies with attendance of more than 3,000 participants), or accepted for publication after March 12, 2024, the presenting author must notify ASTRO's [Education Team](#). The Scientific Committee will review and decide on a case-by-case basis if the abstract will remain in the program.

Submission Requirements

1. **Abstract Title:** The abstract title should not include results. All titles should be written in title case and should not include a period at the end.
2. **Abstract Body:**
 - Abstracts must be properly formatted and organized into four sections identified by the following bolded headers: Purpose/Objectives, Materials/Methods, Results, and Conclusions.
 - Abstracts should include a scientific hypothesis in the Purpose/Objectives section, and implications for research, policy, or practice in the Conclusions section, when applicable.
 - The abstract cannot contain illustrations, images, or graphs. If the abstract is accepted, presenters may include these items in their on-site presentations.
 - An abstract may contain one small table.
 - The maximum character limit, including the title and body of the abstract and any text in a table, is 2,600 characters. Spaces are not counted.
 - **Institution names should not be included in the title or body of the abstract.** Alternative language is "at one institution" or "a multi-institution" study, etc. This does not apply to cooperative research group names.
3. **Abstract Authors:**
 - A maximum of 20 authors' names may be listed on each abstract. There are no exceptions.
 - A Conflict of Interest Disclosure form must be submitted for each author. You can collect this information from the authors before you begin the submission using [this form](#).
 - The principal investigator (PI) should be listed as the final author on the abstract.
 - There is no mechanism for listing co-lead authors, or co-PIs.
 - Each author must have made substantial contributions to:
 - conception and design, or analysis and interpretation of data, and
 - drafting the abstract or revising it critically for important intellectual content, and

- final approval of the version to be submitted/published.
4. **Use of Brand Names and Trade Names:** Presentations must give a balanced view of therapeutic options. Brand names of pharmaceuticals and trade names of medical devices cannot be used in the title or body of the abstract. ASTRO reserves the right to replace proprietary names with generic names.
 5. **Track:** Select the most appropriate track and subcategory for the abstract. Please note that the AM Scientific Committee Chairs have the authority to recategorize any abstract.
 6. **Submission Fee:**
 - A \$75 (USD) nonrefundable submission fee will be charged per abstract submitted. Payment is due at the time of submission. Payment must be rendered using a credit card.
 - First authors submitting abstracts from a designed low-income country as defined by The World Bank may request to waive the abstract submission fee. The countries included in the eligibility are:
AFGHANISTAN
BURKINA FASO
BURUNDI
CENTRAL AFRICAN REPUBLIC
CHAD
CONGO, DEM. REP.
ERITREA
ETHIOPIA
GAMBIA, THE
GUINEA-BISSAU
KOREA, DEM. PEOPLE'S REP.
LIBERIA
MADAGASCAR
MALAWI
MALI
MOZAMBIQUE
NIGER
RWANDA
SIERRA LEONE
SOMALIA
SOUTH SUDAN
SUDAN
SYRIAN ARAB REPUBLIC
TOGO
UGANDA
YEMEN, REP.

Trials in Progress, Interim Analysis, and Database Studies

Trials in Progress

Trials in Progress provides an opportunity for members of the research community to present ongoing trials, foster collaboration, and discuss correlatives and novel trial designs. Trials in Progress will be considered for digital poster only.

- Please ensure that the Trial in Progress meets the following criteria before submitting the abstract:

- All phases of clinical research (phases I to III, supportive care, nonpharmacologic interventions) may be considered for inclusion as a Trials in Progress submission.
- Trials submitted are ongoing and have not reached pre-specified endpoints for analysis. As such, inclusion of results would be improper and is strictly forbidden.
- Enrollment must have already begun or have been completed with no data analysis available by the submission deadline (there are no exceptions to this criterion). It is acceptable if the trial has not enrolled its first patient yet.
- Clinical trial registry number is required.

Interim Analysis

- In general, ASTRO does not accept abstracts reporting an interim analysis that is intended to evaluate experimental treatment regimen(s) with respect to efficacy or safety at any time prior to formal completion of a trial.
- Abstracts reporting trial process updates, such as accrual, baseline characteristics, and non-protocol specific safety information, will be considered for posters only for promotional purposes.

Database Studies

1. Retrospective registry databases, such as the National Cancer Database (NCDB), Surveillance, Epidemiology and End Results (SEER), etc., are valuable resources for patterns of care assessment, and may generate important evidence for comparative effectiveness research.
2. For comparative effectiveness reports, prioritization will be given to those when the level 1 evidence from randomized trials is obsolete or difficult to obtain. Abstracts should include brief descriptions on statistical methods and justifications, such as the choice of statistical significance level, effect size, methods for confounding adjustment, etc., to facilitate proper interpretations.

Important Deadlines

1. **Abstracts must be received by 11:59 p.m. Pacific time, Tuesday, February 25, 2025.** Abstracts may be edited up until the deadline. Abstracts will be considered ineligible for review if they are incomplete. Abstracts that are unpaid or have payment issues will not be considered. If you do not receive a confirmation receipt, follow up with ASTRO to confirm your “complete” status.
2. **Notifications: The person listed as Presenting Author will be notified via email of the disposition of the abstract by Thursday, May 15, 2025.** Abstract acceptance obligates the author to present the paper at the in-person meeting and pay the meeting registration fee. If circumstances prevent in-person meeting attendance, you must notify ASTRO and arrange for a co-author to present the abstract on your behalf.
3. **Revisions:** Please proof your abstract carefully for formatting, spelling, and data errors. Pay special attention to the author order and presenting author designation. Review your confirmation email, as this is how the abstract will be published. **You can make updates to your abstract until the submission deadline, Tuesday, February 25, 2025. After that date, errors can be corrected if sent to ASTRO by July 15, 2025.** After this date, we cannot make any corrections. This rule is strictly enforced. Please note: Revisions should not be substantive and should not alter the results or the conclusions of the abstract. Revisions are meant only to correct errors that were made in the initial submission.
4. **Withdrawals: If you choose to withdraw your abstract, please change your decision to “withdraw” in the Speaker Center by July 15, 2025,** and notify ASTRO staff via email. After this date, your abstract will

be published exactly as it was submitted in the *International Journal of Radiation Oncology • Biology • Physics* (Red Journal).

5. Submission of an abstract conveys permission to be posted online and printed in the *International Journal of Radiation Oncology • Biology • Physics* (Red Journal).
6. **Late-breaking Abstracts: The late-breaking abstract submission site will open on June 24, 2025, and close on July 10, 2025.**

Presentation Formats

Plenary Session

Three to five top-rated abstracts are accepted for the Plenary Session and will be offered in an unopposed general assembly. Several of these are usually Late-breaking abstracts. The Plenary Session includes didactic presentations highlighting abstracts of scientific significance deemed to have the highest merit and greatest impact on radiation oncology research and practice. Experts in the field will serve as discussants to place research findings into perspective.

Clinical Trials Session

Up to nine abstracts are accepted for the Clinical Trials Session that will be offered in an unopposed general assembly. Research submitted from significant clinical trials and trials in progress may be selected for this special session. Abstracts reporting trial process updates, such as accrual, baseline characteristics, and non-protocol specific safety information, will not be considered for the Clinical Trials Session but instead be considered for Posters only for informational purposes. Previously presented results may be considered if they are deemed relevant by the program planning committee.

Oral Scientific Sessions

Oral abstract sessions provide pedagogic presentations of scientific research. Typically, approximately 360 accepted abstracts are scheduled in 60- and 75-minute sessions. Each presenter is given seven minutes to present his or her paper immediately followed by a three-minute question and answer period. Oral presentations are grouped together by track. Experts in the field (discussants) are chosen to provide comprehensive themed discussions of the findings from selected abstracts in a session.

Quick Pitch Sessions

Quick pitch sessions are 60 minutes long, including more fast-paced presentation of scientific research, allowing extra time for discussion. Each presenter is given 5-minutes to present his or her paper. Thirty minutes of Q&A follows these presentations, moderated by a Discussant. Oral presentations are grouped together by track. Experts in the field (discussants) are chosen to provide comprehensive themed discussions of the findings from selected abstracts in a session.

Poster Q&A Sessions

Back by popular demand, all poster viewing presentations will be displayed as electronic posters! Posters will be presented on large; touchscreen monitors and every poster presenter will be assigned a time to present their poster to an audience. Posters are uploaded with our vendor, MultiLearning, and technical help is provided. Digital posters utilize multimedia to present scientific studies in an engaging way. Poster presenters will have 5-minutes to present their work, followed by 3-minutes for Q&A.

Tracks and Subcategories

There are 22 tracks separated by disease site. Abstracts should be submitted in the most appropriate track. Please note that abstracts may be recategorized by the Track Chairs as deemed appropriate.

To build on the conference theme, **Rediscovering Radiation Medicine and Exploring New Indications** we are seeking abstracts that fit within the 22 tracks and also soliciting abstracts that may cover these areas of interest:

- Community Partnerships and Engagement: Clinical trials (Inclusive enrollment, diversification, accruals, visibility, community outreach)
- Patient-centered Technologies
- Supportive Care Models
- Engaging Patients, Patient Advocates, Caregivers through Shared Decision Making
- Patient-centered Clinical Trial Design (design, staffing, communication, coordination, access, navigating CT system)

Abstract Tracks and Subcategories can be viewed at <https://www.astro.org/Meetings-and-Education/Micro-Sites/2025/Annual-Meeting/Learn/Abstracts>

Late-breaking Abstracts

1. **The late-breaking abstract submission site will open on June 24, 2024, and close 11:59 PM Pacific Time, on July 10, 2025.**
2. A late-breaking abstract is an original research abstract containing important late-breaking research results that were not available prior to the regular abstract submission deadline. The research is limited to highly significant and timely findings and cannot be a revision of an abstract submitted prior to the regular submission deadline.
3. Trials in progress are not eligible to be submitted as late-breaking abstracts.
4. Retrospective reviews and large database studies (such as NCDB) should not be submitted for consideration as a late-breaking abstract.
5. Late-breaking abstracts must not have been submitted, presented, accepted for presentation or published in any other scientific venue.
6. A special panel of peer reviewers will review the late-breaking abstracts and the corresponding author will be notified of the abstract status by **Thursday, August 7, 2025.**

Abstract Awards

Abstract authors can apply for an abstract award during the abstract submission. The deadline to submit an award application is the same as the abstract submission deadline: **February 25, 2025.**

- Please see “award criteria” when submitting an online abstract for details of each award. *Please note: The author or senior author must be an ASTRO member.*
- If selected, the award winner must present the abstract at the Annual Meeting.
- Attendance at the meeting is required to obtain the award and honorarium.
- Please be sure to indicate “resident” or “nurse” in order to be eligible for those awards.
- Notifications will be emailed to award winners only, specifically the first author, by early May 2025.
 - *Please Note: The winners of the Steven A. Leibel Memorial Award will be announced in early August when late-breaking notifications are sent.*

Steven A. Leibel Memorial Award

Steven A. Leibel, MD, was a former member of the American Board of Radiology (ABR) Board of Trustees and a Past President of the ABR, as well as ASTRO. Following his passing, a Memorial Fund was established in his memory. For this award, the ABR Foundation will provide two award winners with \$2,000 each at the ASTRO

Annual Meeting. Winners will be selected by ASTRO leadership and will be selected only from the abstracts designated as Plenary or Clinical Trials presentations. The award winner must be the principal author, ABR board certified or board-eligible, and have completed training in radiation oncology or medical physics no more than 10 years prior to the presentation.

Resident Clinical/Basic Science Research Abstract Awards

This award is designed to promote clinical research by young scientists. The award is granted to the top three resident authors of significant abstracts in biology, clinical practice and physics. The award includes a \$1,500 honorarium, a trophy of recognition and complimentary registration to the Annual Meeting.

Basic/Translational Science Abstract Awards

This award is designed to encourage participation by basic and translational scientists. Up to 12 awards will be given to applicants having the top-rated abstracts in biology, clinical practice and physics categories — four awards in each category. The award includes a \$1,000 honorarium, certificate of recognition and complimentary registration to the Annual Meeting.

Nurses' Abstract Award

This award is designed to promote clinical research among radiation oncology nurses. Up to two awards of \$1,000 will be presented to the highest rated abstracts with a nursing designation. A certificate of recognition and complimentary registration to the Annual Meeting is included. The candidate must be a first or co-author of an accepted abstract.

International Abstract Award

This grant is designed to foster continuing medical education, assist in career development and help to establish relationships with leading ASTRO members who may serve as scientific mentors to the recipient. One award of \$4,000 will be used to support a radiation oncologist in a developing country to attend the ASTRO Annual Meeting and to spend additional time at a comprehensive cancer center within the United States. Complimentary registration to the Annual Meeting is included.

Annual Meeting Travel Awards

To recognize outstanding abstracts submitted by early career scientists, biologists and physicists, up to 15 awards of \$1,000 each will be provided to help offset travel expenses to the meeting. Complimentary registration to the Annual Meeting is included. Applications must be submitted during the abstract submission process.

Annual Meeting Resident Recognition Awards

- **Resident Quick Pitch Oral Abstract Recognition Award:** This award will recognize the highest-rated abstracts submitted by a resident and accepted as an oral presentation in the Quick Pitch scientific sessions. Winners will receive a trophy. The award is granted to one resident author of a significant abstract in each category: biology, clinical practice, and physics.
- **Resident Poster Viewing Recognition Award:** This award will recognize the highest-rated abstracts submitted by residents and accepted as a digital poster. Winners will receive a trophy. Up to nine trophies will be awarded. The award is granted to the top three resident authors of significant abstracts in each category: biology, clinical practice, and physics.

By submitting an abstract, the submitter acknowledges and agrees to the provisions above.