



SPINE
SOCIETY OF
AUSTRALIA



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CONFERENCE SECRETARIAT

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Conference, Meeting & Event Management

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ABN – 1209 1271 877 / ACN – 091 271 877



International Guest Speaker

Dr Alexander Vaccaro
Pennsylvania, USA

Sofitel Wentworth Sydney
SYDNEY, AUSTRALIA

Friday 28 – Sunday 30 April 2006

Taylorred Images is proud to be appointed the conference meeting event management company for the

2006 SPINE SOCIETY OF AUSTRALIA CONFERENCE

We are your one stop shop for your conference, & beyond.

Right from the planning stages to your return home. We can...

- ▶ Arrange your travel to arrive in Sydney and return through our official travel agency – Corporate Travel Management
- ▶ If you wish to stay longer than the duration of your conference we will organise your additional accommodation
- ▶ We can arrange & book alternative accommodation other than the allocated conference accommodation – subject to availability
- ▶ Can organise pre or post leisure accommodation if you are thinking of extending your time in Sydney
- ▶ Can also arrange your pre or post leisure tours & activities

MEETING SCHEDULE

Sunday 15 January 2006

Closing Date for receipt of abstract

NB – abstracts received later than 1700hrs EST WILL NOT BE ACCEPTED

Friday 24 March 2006

Closing date for Early Registration Fee

Monday 20 February 2006

Confirmation of abstracts acceptance forwarded

Please complete the registration form, detach and forward via post or fax to Taylorred Images (We suggest you keep a copy for your records)

On-line registration is also available via the web site www.taylorredimages.com.au

To access the conference site proceed to "conference/event icon," click on the "conference & events icon," and scroll down to "forth coming events – 2006" and select the "**Spine Society of Australia Conference.**" This secure site contains all the information regarding your conference; this is a secure website so you can register securely on-line using your credit card.

FOR INTERNET USERS – PLEASE SCROLL TO THE END OF THE DOCUMENT TO:

- ▶ Download the Registration & Booking Form
- ▶ Download the Abstract Cover Sheet
- ▶ Register securely on-line

PRELIMINARY PROGRAM OVERVIEW

FRIDAY 28 APRIL

0700 – 1800	Registration
0900 – 1200	Executive Meeting
1200 – 1300	Welcome Luncheon – Industry Exhibition Area
1300 – 1530	Scientific Session 1
1530 – 1600	Afternoon Refreshments – Industry Exhibition Area
1600 – 1730	Poster Presentation Session
1745 – 1930	Welcome Cocktail Reception – Industry Exhibition Area

SATURDAY 29 APRIL

0715 – 0815	Walk Through Continental Breakfast with the Industry
0815 – 0830	Formal Opening
0830 – 1030	Scientific Session 2
1030 – 1100	Morning Refreshments – Industry Exhibition Area
1100 – 1230	Scientific Session 3 – Symposium <i>The Biologics in Spinal Surgery</i>
1230 – 1330	Working Luncheon – Industry Exhibition Area
1330 – 1500	Debate <i>Are randomised controlled trials Ethical in Spinal Surgery?</i>
1500 – 1530	Afternoon Refreshments – Industry Exhibition Area
1530 – 1730	Scientific Session 4
1730	Business Meeting 1
1900	Conference Dinner

SUNDAY 30 APRIL

0730 – 0900	Walk through Continental Breakfast with the Industry
0800 – 0900	Business Meeting 2
0900 – 1100	Scientific Session 5
1100 – 1130	Morning Refreshments – Industry Exhibition Area
1130 – 1230	Scientific Session 6
	Close of Program

AWARDS

TO BE CONSIDERED FOR THE SPINAL RESEARCH AWARD (AS BELOW)

Please indicate on the Abstract Coversheet

SPINAL RESEARCH AWARD

SPONSOR – MEDTRONIC SOFAMOR DANEK

This award consists of a certificate and a prize of AUD\$8,000 for the most outstanding contribution in the field of basic science, biomechanics or clinical studies of the spine, presented at the 2006 Conference, to be held in Sydney, 28–30 April 2006.

Papers are required to be in a form ready for submission to a scientific journal and must contain original material not previously published or presented at a major meeting. Multiple authors are acceptable. One of the authors will be required to present the paper at the meeting at their own expense and this person must be nominated at the time of submission of the article.

One original and five copies of each paper, in full, must reach the address below no later than Monday 16 January 2006

The address for submission of entries is:

2006 SSA Conference
C/- Taylored Images
PO BOX 247
ASHGROVE QLD 4060
AUSTRALIA

ALL PRESENTATIONS WILL BE CONSIDERED FOR THE FOLLOWING AWARDS:

ROB JOHNSTON AWARD

SPONSOR – SPINE SOCIETY OF AUSTRALIA

This award consists of a certificate and a prize of between AUD\$200 and AUD\$300 from the Rob Johnston Trust Fund. It will be awarded to the best presentation by a Trainee or Fellow at the Annual Scientific Conference from the Spine Society of Australia.

BEST PRESENTATION AWARD

SPONSOR – MEDTRONIC SOFAMOR DANEK

This Award of AUD\$2,000 for the best paper presented at the conference will be offered again in 2005. The winner of the Award will be judged by the Scientific Program Committee.

BEST POSTER AWARD

SPONSOR – ORTHOTECH

This Award of AUD\$1,000 for the best poster presented at the conference will be offered again in 2006. The winner of the Award will be judged by the Scientific Program Committee.

AIR TRAVEL

CORPORATE TRAVEL MANAGEMENT has been appointed the official travel agency for your conference. Early booking is advised to ensure the BEST possible airfares available.

CORPORATE TRAVEL MANAGEMENT will ensure you are offered the “best-available airfares of the day” to ensure the best value for money in travelling to your conference. Please note strict terms and conditions are applicable to discount airfares.

Conference Airfares are subject to specific airfare type and seating class availability.

ALL delegates are urged to contact CTM on **TOLLFREE :1800 630 866 (within Australia)** or **0011 61 7 3211 2400 (International)** or **Email: groups@travelctm.com**

An on-line **travel enquiry form** is also available by clicking **www.travelctm.com/enq/SSA2006.htm**

PLEASE QUOTE CONFERENCE CODE “SSA2006” when making your travel booking, this code must be quoted to access the specially designated Conference Airfares.

CALL FOR ABSTRACTS

PRESENTATION LENGTH

Papers selected should be suitable for a **10 minute presentation** with an additional allocation of **5 minutes for questions & answers**.

Abstracts submitted for oral and poster presentation maybe accepted as a full length oral presentation or as a short oral presentation in the poster session of the program. This will be a **5 minute oral presentation using no more than 8 slides including the title slide**.

SUBMISSION DEADLINE

Please return abstracts together with the Abstract Cover Sheet no later than **1700 EST on Sunday 15 January 2006**. Abstracts received after this date **will not** be accepted. Please note all selected presenters must register for the conference to be eligible to present. The conference committee regrets that it is unable to meet any travel or reimbursement of expenses incurred.

NOTIFICATION TO AUTHORS

All abstract submissions will be judged by the conference committee and you will be notified by mail of the committee's decision after **Monday 20 February 2006**

LEGAL REQUIREMENTS FOR PUBLICATION

Submission of your abstract implies your consent to the abstract, if accepted, being published in the Orthopaedic Publication Supplement of the JBJS (B) and on the JBJS Website.

GENERAL GUIDELINES

The abstract should provide sufficient information to allow the reader to assess fully the aims, methods, results and implications of the work undertaken.

Each submission must be original work that has not been published previously. **The abstract should include the following sections:**

- ▶ **Introduction** – the purpose of the study and a brief overview of relevant literature/current state of research in the field
- ▶ **Methods** – a short explanation of data collection and processing
- ▶ **Results** – presented in the form of text, graphics or tables. Important statistical results (small p values or correlation coefficients) should be included.
- ▶ **Discussion** – major findings and conclusions from the work including implications for further research

It is important that methods and results are clearly defined in the abstract; therefore, general statements such as “results will be presented” are not acceptable. When a procedure or method is stated to have “advantages,” those advantages should be defined. Abstracts that simply summarise results without defining objectives and methods are equally undesirable.

LAYOUT

- ▶ Abstracts must be written within a **160mm x 245mm rectangular space** on an single **A4 page (210mm x 297mm)**
- ▶ **Portrait** orientation
- ▶ **Margins** are all to be **20mm**
- ▶ Text should be left-justified and single spaced
- ▶ Font should be **Arial** typeface and **12 point** character size, mixed case throughout only the title is to appear in Upper case

TITLE AND AUTHOR

At the beginning of the abstract please include within the rectangular space described previously and each on a new line:

- ▶ The title (**BOLD, UPPER CASE**)
- ▶ The name(s) of the author(s) – please omit university degrees and titles (Presenter to be underlined)
- ▶ Affiliation(s), city and country – please omit street address and postcode
- ▶ Leave one line before commencing the body of the text

SECTION HEADINGS AND PARAGRAPHS

- ▶ Use the prescribed headings only
- ▶ The title of each section is to be in bold title case and left justified
- ▶ Leave a 6-space indentation at the beginning of each new paragraph
- ▶ Graphs, tables and references may be used throughout the abstract but must remain within the defined one-page limit

(GENERAL GUIDELINES CONTINUED)

FIGURES AND TABLES

- ▶ Each figure and table is to be numbered and have a short caption
- ▶ Figures and tables must be referred to in the text
- ▶ Figures, tables and their captions must remain within the defined text limits

REFERENCES

- ▶ Minimise the number of references
- ▶ References are to be assigned a number after the appropriate detail e.g. Jones ¹, technique ^{2-4,6} or if superscription is not available Jones (1), technique (2-4,6) List references at the end of the abstract according to the style –
I. Author, A.N. and Other, A.N., Title of Paper, Journal, vol: pp-pp, year

ABSTRACT SUBMISSION

- ▶ Follow the General Guidelines above
- ▶ Download Abstract Coversheet from www.tayloredimages.com.au
To access the conference site proceed to “conference/event icon,” click on the “conference & events icon,” and scroll down to “forth coming events – 2006” and select SSA
- ▶ All photographs and diagrams must be embedded within the abstract
- ▶ Submit completed coversheet and abstract as attachments in Microsoft Word to your email
- ▶ Send email to 2006ssa@tayloredimages.com.au

FURTHER INFORMATION

Please refer to our website www.tayloredimages.com.au for the complete abstract guidelines for published works.

CONFERENCE & ACCOMMODATION VENUE

SOFITEL WENTWORTH SYDNEY

(61–101 Phillip Street, Sydney, NSW 2000)

A luxury hotel that blends the finest in French tradition with all the modern facilities, in the heart of the financial district and near the Sydney Opera House, Botanic Gardens, Circular Quay as well as shopping, galleries and restaurants, this hotel is an icon of elegance and hospitality. With sophisticated interiors and impeccable attention to detail, the hotel is one of Sydney’s premier meeting spots. Sofitel is synonymous with exceptional luxury, elegant interiors and the highest standards of service worldwide.

HOTEL CANCELLATION POLICY— ACCOMMODATION

CANCELLATIONS WITHIN 30 DAYS WILL INCUR A CANCELLATION FEE EQUIVALENT TO THE FULL STAY OF EACH ROOM CANCELLED

ADDITIONAL COMMENTS

PAYMENT

Section D – Accommodation Deposit* \$ _____
(*ONLY NECESSARY IF PAYMENT IS MADE BY CHEQUE)

Accommodation Service Fee after 24/03/06 @ \$33.00 \$ _____

Section F – Registration Fees \$ _____

Section G – Optional Partner Functions _____

TOTAL AMOUNT DUE \$ _____

PAYMENT METHOD

Cheque: Please forward your cheque made payable to “SSA 2006”

Credit Card: MasterCard Bankcard Visa Diners Club Amex

Cardholder's Name: _____ Expiry Date: ____ / ____

Card Number: _____

Cardholder Signature: _____ Date: ____ / ____

(NB: payment via credit card, **Taylorred Images** will appear on your next statement as a service provider.)

TAYLORED IMAGES USE ONLY: ID. Number: _____ Receipt Number: _____ Batch Number: _____

2006 SPINE SOCIETY OF AUSTRALIA CONFERENCE DELEGATE REGISTRATION & ACCOMMODATION BOOKING FORM

SECTION A – DELEGATE'S PERSONAL DETAILS

SSA Member SSA Non Member

Title: Prof. Assoc. Prof. Dr Mr Ms Miss Mrs

Family Name: _____

Given Name: _____

Preferred Name for Name Badge: _____

Postal Address: _____

Postcode: _____ E-mail: _____

Telephone: Work () _____ A / H: () _____

Facsimile: Work () _____ Mobile: _____

Emergency Contact Detail: _____

Name: _____

Relationship: _____ Telephone # _____

SECTION B – ACCOMPANYING PERSONS' DETAILS

Adults Name: _____
(To appear on Name Badge)

Children Name: _____ Age: _____

Name: _____ Age: _____

SECTION C – SPECIAL DIETARY REQUIREMENTS

Please indicate person's name and specify their special dietary requirement (eg: vegetarian, coeliac)

Name: _____ Dietary Requirement: _____

Name: _____ Dietary Requirement: _____

Please complete the following registration form, detach and forward via post or fax to Taylorred Images X

Please complete the following registration form, detach and forward via post or fax to Taylorred Images X

SECTION D – ACCOMMODATION

Accommodation **IS** required Accommodation is **NOT** required

(If accommodation is NOT required, we request you supply us your alternative accommodation contact details in the event of an emergency)

Name/Address: _____

Contact Telephone Number: _____

Sofitel Wentworth Sydney (61-101 Phillip Street, Sydney, NSW 2000)

Standard Room @ \$240.00 per room per night

Superior Room @ \$270.00 per room per night

Special Requests: Non Smoking Smoking Disabled Facilities

Ground Floor Cot (Charges may apply)

Other _____

If you are twin sharing please indicate the name of the person with whom you are sharing

NB. All Bookings & Amendments made after **24 March 2006** will incur a **\$33.00** service fee

Day & Date of Arrival: _____ / April 2006

Day & Date of Departure: _____ / April 2006

A **credit card guarantee for the first night's room rate must be provided** with your registration to guarantee accommodation. Your credit card number will be passed to the accommodation venue but will not be debited unless you fail to arrive on the date indicated without having advised Taylored Images of your change in plans. If you are paying by cheque please include one night's accommodation with your payment.

Please Note: Accommodation cancellations within 30 days will incur a cancellation fee equivalent to the full stay of each room cancelled as per hotel terms & conditions

SECTION E – CAR PARKING

Limited car parking is available at the hotel for a fee of \$32.00 per day. Payment can be organised directly with the hotel on-site.

SECTION F – REGISTRATION FEES

DELEGATE REGISTRATION

Early Registration on/before Friday 24 March 2006 **\$635.00**

Normal Registration after Friday 24 March 2006 **\$770.00**

Registrar/ Trainee **\$545.00**

Scientific Registration* **\$385.00**

* Proof required — a letter from head of department / institution must accompany your registration to process

Inclusions – Attendance at all scientific sessions, daily breakfast, morning and afternoon refreshments, luncheons, welcome cocktail reception and conference dinner as listed in the program and conference documentation.

Registrar / Trainee Registration (Per Day Only)

(Please tick which day/s you will be attending)

Friday Inclusions; Attendance at all scientific sessions, lunch, afternoon refreshments & welcome cocktail reception **\$300.00**

Saturday Inclusions; Attendance at all scientific sessions, breakfast, morning refreshments, lunch, afternoon refreshments & conference dinner **\$325.00**

Sunday Inclusions; Attendance at all scientific sessions, breakfast, morning refreshments **\$275.00**

NB: A **Cancellation fee of \$110** shall apply if you cancel your conference registration 30 days prior to the conference

SECTION G – OPTIONAL PARTNER SOCIAL FUNCTIONS

Welcome Cocktail Reception Friday 28 April 2006 **\$100.00**

Please indicate yours partner's name: _____

Conference Dinner Saturday 29 April 2006 **\$135.00**

Please indicate yours partner's name: _____