

AAPP 2026 Annual Meeting Abstract Author and Poster Presenter Handbook

Last Updated: October 17, 2025

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Submission Instructions

Abstract submission:

Thank you for your interest in submitting an abstract to the 29th Annual Meeting of the American Association of Psychiatric Pharmacists (AAPP) to be held April 19-22, 2026, in Seattle, Washington. The abstract submission deadline is **January 8, 2026, at 11:59 PM Central Time**. Prior to submitting your abstract, the AAPP Abstracts Committee requests your adherence to the following requirements:

- Presenting authors, except for Encore abstracts, must be an abstract author.
- The primary author is responsible for acquiring all author and institution approvals as required for abstract submission.
- Presenting authors cannot be changed after March 1, 2026.
- Duplication of one research project described in different posters at the same meeting should be avoided.
- You must disclose if the abstract is sponsored.
- You must include all relevant disclosures of interest on the poster.
- **Abstracts must deidentify any organization(s).** Onsite posters and platform presentations do not need to deidentify organization(s).
- Before accessing the abstract submission center, you will be required to complete a disclosure of interest form.
- Abstracts must be submitted online using the web-based portal and form provided. You must create a username and password allowing you to store your submission and continue to edit until you indicate the abstract is ready for submission. You are encouraged to preview the abstract thoroughly prior to submitting.
- Abstract submissions must be limited to 350 words. Abstract content must all fit within the word limit. The abstract submission center will reject any poster exceeding the word limit. This does not include the author or title information but does include headings.
- No tables, figures, or footnotes are permitted in any of the abstract submissions when submitting online.
- Any dates included in abstract submission should be written in the following format (see example in Work in Progress section):
 - From January 1, 2021 through June 30, 2021
 - Between January 1, 2021 and June 30, 2021
 - January 1, 2021 to June 30, 2021
- The abstracts are reviewed by 3 independent, blinded reviewers and scored based on originality and concept, methodology/adequacy of justification or documentation, results, conclusion, and clinical relevance and value.
- You can view samples of abstracts on pages 5-9 of this handbook.
- Once the abstract is successfully submitted, only the submitter will receive communications.
- The submitter will be notified of the status of the abstract around February 15, 2026.
- **Presenting authors of accepted abstracts must be paid, in-person registrants for a minimum of the day of the poster session. Award finalists will be required to register for at least April 20 and April 21. The registration must be received by March 19, 2026, or the abstract will be administratively removed.**
- AAPP staff reserve the right to require advance registration prior to abstract acceptance. If you have withdrawn an accepted abstract in at least two of the last four years, you may be required to pre-register for the Annual Meeting prior to abstract acceptance. **Registration for presenting authors cannot be cancelled.**
- All accepted abstracts will be published on the AAPP website after the Annual Meeting. Accepted abstracts will be published in full in the April or June edition of the Mental Health Clinician (MHC), with the exception that Encore abstracts are abridged to title and basic meta data. You will be required to complete a disclosure notice upon submission of abstracts within the AAPP abstract submission center online at aapp.org. If you do not wish to have your abstract published in MHC, you will not be allowed to submit a poster for the 2026 AAPP Annual Meeting.

Poster Submission & Presentation:

- There will be two poster sessions at the 2026 Annual Meeting in Seattle, WA. Accepted posters will be displayed on Monday, April 20 and Tuesday, April 21. Students, pharmacists and other health care professionals will man their posters on Monday; residents will man their posters on Tuesday. Awards will be announced on the morning of Monday, April 20.
- Presenters are responsible for removing their own posters or they will be discarded. This will take place immediately following each poster session.
- Abstract authors are also encouraged to request consideration for one of five awards available through AAPP. Additional information on the awards and their submission requirements are available later in this handbook. If submitting for an award, you are required to upload the supporting documents along with the abstract. Again, the system will store the documents for additional edits until you select the submission box. If selected for an award, only one presenting author may present the award platform presentation.

Peer Review and Acceptance Processes

All abstracts are subject to a standardized peer review process and may be rejected, so it is important to review this document carefully. The abstract categories below include details regarding peer review criteria, which guide the peer review process. Each abstract is reviewed by 3 peers, and final decisions are made by the Abstracts Committee, which means that up to 5 people review each abstract. Abstracts can be rejected due to inadequate background, poor methodology, incomplete sections, improper formatting, and overall readability. Thus, it is important for all corresponding authors to pay close attention to this handbook and to seek assistance as necessary to ensure both that the research project is solid and that the abstract is a professional representation of that project.

If initially rejected, research trainees (including students and residents) will be given 5 days to revise and resubmit an abstract for the same research project. If provided, the residency program director (RPD) or faculty advisor will additionally be notified of the initial rejection to help facilitate corrections. If the deficits are not addressed, then the revised abstract will be rejected with no further recourse.

All other abstracts (i.e., for practicing healthcare professionals) are either accepted or rejected with no recourse.

Statement of Agreement

When submitting your abstract, you will confirm an understanding of the instructions and the following publication release:

The Mental Health Clinician will publish all accepted abstracts with the exception of Encore abstracts, which are abridged to title and basic data. By submitting my abstract online, I consent to have the abstract from my accepted poster for the AAPP 2026 Annual Meeting appear in the Mental Health Clinician (April or June 2026), published by AAPP. I grant AAPP the non-exclusive right to publish my abstract, including all versions and editions of the abstract and foreign language translations and other derivative works thereof, in whole or in part, alone or in compilations, in all formats and media now known or later developed, published, or prepared by AAPP, its assignees, and its licensees. I understand that the rights I have granted to AAPP in no way restrict republication of my abstract in any form by myself or others authorized by me.

Information for All Presenters

Artificial Intelligence Policy

AAPP requires all authors to disclose if artificial intelligence (AI) was substantively utilized in the development of their work. The use of AI for copyediting does not need to be mentioned in the abstract or poster, but authors are required to thoroughly review their work prior to final submission as AI generated content may be inaccurate, biased, or plagiarized. The use of AI in developing study design, methods, and/or data analysis should be described in the Methods section of the abstract and poster. AI applications should not be cited or listed as a co-author.

Important Dates

- **January 8, 2026**, at 11:59 PM Central Time: Abstract submissions are due.
- **Around February 15, 2026**: Corresponding authors are notified whether abstracts were accepted.
- **March 19, 2026**: Presenting authors must be registered for the meeting. Abstracts without a registered author may be subject to administrative removal.
- **April 19-22, 2026**: AAPP 2026 Annual Meeting. See poster setup and display schedule below for more details. The scientific poster sessions will be held at the Hyatt Regency Bellevue on Monday, April 20 and Tuesday, April 21. Posters will be manned in two groups: Group 1 on Monday (students, pharmacists, and other health care professionals) and Group 2 on Tuesday (residents). Awards will be announced on the morning of Monday, April 20. Posters must be removed from the poster board immediately after each manned session or it will be removed by AAPP staff and discarded.

Poster Setup and Display Schedule

Monday, April 20, 2026, and Tuesday, April 21, 2026 (times are tentative and will be confirmed in March 2026):

- Award Winner Announcements will be held on the morning of Monday, April 20.
- Posters are displayed from 8:00 a.m.-7:15 p.m. on April 20, and from 8:00 a.m.-6:00 p.m. on April 21. Poster authors must man their posters during their designated poster session (Monday or Tuesday evening).
- Poster Session 1 (students, pharmacists, and other health care professionals) will be on April 20 from 5:50-7:20 p.m.
- Poster Session 2 (residents) will be on April 21 from 4:30-6:00 p.m.
- **Posters must be removed following each manned session. Any remaining posters will be discarded by the poster vendors or AAPP staff.**

Meeting Information

Additional information about the meeting, registration, lodging etc., can be obtained from our website at aapp.org/2026.

Poster Specifications

- **Wear your badge.** Only meeting attendees are permitted in the poster hall.
- **Use push pins.** Push pins are provided, and you should not use staples, tape, Velcro or other adhesives on the poster boards.
- **Plan ahead.** No furniture or equipment is permitted. If you have a condition that requires you to sit down, please contact AAPP in advance at info@aapp.org.
- **Be safe.** Do not leave your valuables unattended in the poster hall. Make sure you check your area after the poster session for anything you may have left behind.
- Poster boards are 4' X 8' (HxW). Although poster size is at the discretion of the presenter, the ideal poster size should be within 3' X 6' (HxW).
- **Conflict of Interest and funding source disclosure information for all authors must be included within the poster. If there are no disclosures or funding sources, the poster should indicate that there is nothing to disclose.**
- Posters should be readable by the audience from 3' away from the board.

- Figures and tables should be appropriately marked with orienting instructions (labeled axes and columns, etc.)
- Poster numbers are **not** required to be on the posters themselves. Poster numbers will be affixed by AAPP to the top center of the poster board.
- Poster numbers, session times, and setup will be emailed to individuals whose posters have been accepted at least 2 weeks prior to the Annual Meeting.
- If you need further accommodations or assistance, please contact Vanessa Wasser, AAPP Membership and Office Specialist, at info@aapp.org or 402-476-1677.

Shipping

If you are planning to ship your poster to the hotel, please ensure that your materials arrive no more than 3 days before the meeting date. *Hotel handling charges may apply and are the responsibility of the presenting author.* Any materials being sent to the host hotel must be marked as follows:

ATTN: YOUR NAME & Hold for Arrival (date)
Hyatt Regency Bellevue
900 Bellevue Way NE
Bellevue, WA 98004

Abstract Categories and Examples

Original Research

Abstracts should describe original research in therapeutics, pharmacodynamics, pharmacoeconomics, outcomes, drug utilization, kinetics, genetics and academic pursuits. Abstracts must not have been published in abstract form nor presented as a poster elsewhere before the AAPP 2026 Meeting.

Original Research Peer Review Criteria

- | | |
|--------------|---------------------------|
| • Title | • Results |
| • Background | • Conclusions |
| • Objectives | • Originality of project |
| • Methods | • Significance of project |

Original Research Example (2008)

Corresponding Author: Jeffrey R. Bishop, PharmD, MS, BCPP

Title: Relationship Between The Catechol-o-methyltransferase (COMT) Val158Met Polymorphism And Antipsychotic Response In First Episode Psychosis

Authors & Affiliates: Jeffrey R. Bishop, PharmD, MS, BCPP[1,2]; Konasale M. Prasad, MD [3], James L. Reilly, PhD [2], Michael Akroush, BS [1], Vishwajit Nimgaonkar, MD, PhD [3], Matcheri S. Keshavan, MD [4], John A. Sweeney, PhD [2]. 1.University of Illinois at Chicago College of Pharmacy, 2. University of Illinois at Chicago College of Medicine, Department of Psychiatry, Center for Cognitive Medicine, 3. University of Pittsburgh College of Medicine, Departments of Psychiatry and Human Genetics 4. Wayne State University Department of Psychiatry and Behavioral Neurosciences

Abstract Type: Original Research

Purpose: The common catechol-o-methyltransferase (COMT) Val158Met polymorphism reduces the metabolic activity of this enzyme, alters dopamine disposition in the brain, and is a pharmacogenetic candidate for studies of antipsychotic medications. This study characterized the relationship between this variant and symptom response to six weeks of antipsychotic therapy in treatment naïve patients experiencing their first episode of a major psychotic disorder.

Methods: Eighty patients meeting DSM-IV criteria for schizophrenia (n=54), schizophreniform (n=1), bipolar disorder (n=19), or schizoaffective disorder (n=6) were recruited for a six week study of antipsychotic treatment. Exclusion criteria included neurological disorders, previous head injury, or substance dependence within the past six months. Subjects were predominantly antipsychotic-naïve (70%) or had less than 12 weeks lifetime exposure. At baseline, subjects underwent a 3-5 day washout if they had recently received any oral antipsychotic, antidepressant, or mood stabilizing medication. Participants were treated with an antipsychotic medication, predominantly risperidone, and evaluated for symptom improvement at baseline and follow-up. Primary treatment outcomes for this analysis were the 18 item Brief Psychiatric Rating Scale (BPRS) Total, Positive, and Negative subscale scores, which were compared across COMT Val158Met genotype groups.

Results: Demographic (race, age, sex) characteristics and baseline global psychopathology (BPRS Total scores) did not significantly differ across diagnosis or genotype groups. COMT genotypes (Val/Val=25, Val/Met=41, Met/Met=14) were in Hardy-Weinberg Equilibrium ($p=0.69$). Baseline BPRS Total, Positive, and Negative subscale scores averaged 49 ± 9 , 12 ± 7 , and 11 ± 6 for the entire population and did not differ across COMT genotype groups for the study sample as a whole or when stratified by schizophrenia and schizoaffective/bipolar disorder diagnoses (all $p>0.37$). Sixty-one patients (76%) completed the study with a mean improvement of 10 ± 11 points on BPRS Total scores. Clinical improvement measured by BPRS Total and subscale measures did not differ across diagnostic groups. Mean improvement scores for Val/Val, Val/Met, and Met/Met genotype groups for the BPRS Total (12 ± 12 , 8 ± 11 , 12 ± 8), Positive (3 ± 6 , 1 ± 3 , 2 ± 4), and Negative subscales (5 ± 5 , 3 ± 5 , 4 ± 4) were not statistically different (all $p>0.34$).

CONCLUSIONS AND FUTURE DIRECTIONS: COMT Val158Met genotype was not associated with response to treatment as measured by BPRS scores in this first episode psychosis population.

Encore Presentation

Abstracts of papers that have been previously presented and peer reviewed. Submission must include where it was previously presented or the abstract will be disqualified. Encore submissions are not eligible for any of the award categories and should not be submitted for award consideration. Any Work in Progress abstracts that have been previously presented do not qualify as an Encore submission unless they were presented with fully completed results.

Encore Presentation Peer Review Criteria

- Title
- Background
- Objectives
- Methods
- Results
- Conclusions
- Originality of project
- Significance of project

Work in Progress (WIP)

Abstracts describing preliminary results or status of ongoing work may be submitted by principal investigators at any stage of their career. Abstracts submitted without results at the time of submission will be considered for this category only. Any Work in Progress abstracts that have been previously presented do not qualify as an Encore submission unless they were presented with fully completed results.

Work in Progress Peer Review Criteria

- Title
- Background
- Objectives
- Methods
- Originality of project
- Significance of project

Work in Progress Example (2022)

Corresponding Author: Kristin Waters, PharmD, BCPS, BCPP

Title: Retrospective Review of Patient Demographics for Patients Who Received ≥ 1 One-Time As-Needed Dose of Injectable Antipsychotics

Authors & Affiliates: Kristin Waters, PharmD, BCPS, BCPP [1], Ashley Tewksbury, PharmD, BCPP [2], Gina Morrow, PharmD, BCPP [2], Heather Goodwin, PharmD, BCPP [2] 1. Department of Pharmacy, University of Connecticut, Storrs, CT 2. Department of Pharmacy, Yale New Haven Health, New Haven, CT

Abstract Type: Work in Progress

Background: Short-acting injectable antipsychotics are commonly administered in the emergency department on a one-time as-needed basis for the treatment of patients presenting with agitation or aggression. Injectable antipsychotics, especially high-potency first-generation medications such as haloperidol, carry a higher risk of certain adverse effects including acute dystonic reactions. It is important to identify whether any patient demographics, such as age, race, or psychiatric diagnosis, impact the likelihood of receiving an injectable antipsychotic in the emergency department.

Objectives: 1. Analyze demographic information of patients who receive as-needed one-time doses of injectable antipsychotics in the emergency department (ED) compared to those who did not receive an injectable antipsychotic 2. Identify prescribing patterns and correlation to any demographic factor(s)

Methods: This IRB-approved retrospective chart review will include adult patients who received a one-time as-needed injectable antipsychotic in the ED of a large academic hospital between January 1, 2019 and June 30, 2019. The control group will include patients who did not receive a one-time as-needed injectable antipsychotic within the same time period. Patients who received scheduled antipsychotics or one-time oral antipsychotics only will be excluded. Demographic information (age, gender, race, ethnicity height, weight, BMI) will be collected. Other pertinent data to be collected include the diagnosis at time of ED visit, disposition after ED visit, antipsychotic administered, dose of antipsychotic, number of doses, and day of week and time of medication administration. Descriptive statistics and regression models will be performed to examine factors associated with likelihood of receiving a one-time as-needed injectable antipsychotic in the ED.

Outcomes: We will report demographics of patients who received one-time as-needed injectable antipsychotics in the ED and compare to demographics of the control group. Factors such as age, race, ethnicity, and BMI will be considered separately and in combination to identify patient groups who are more likely be treated with an as-needed injectable antipsychotic.

Innovative Practices

Abstracts describing the development, justification, documentation, and/or delivery of innovative services or activities applicable to psychiatric and neurologic pharmacy. The descriptive abstract should not duplicate any other poster category and should describe the development of innovative services/activities. The abstract should also provide background/rationale, a description of the innovative service, the impact on patient care/institutional practice, and a conclusion.

Innovative Practices Peer Review Criteria

- Title
- Background/review of literature
- Description of practice or patient history
- Conclusions
- Originality of practice or case
- Significance of practice or case
- Written description of practice or case

Innovative Practices Example (2008)

Corresponding Author: Charles F. Caley, Pharm.D., BCPP

Title: Psychiatric Pharmacy In A University Student Health System

Authors & Affiliates: Charles F. Caley, Pharm.D., BCPP, Associate Clinical Professor, University of Connecticut School of Pharmacy, Storrs, CT and Clinical Psychopharmacology Consultant, Institute of Living, Hartford, CT

Abstract Type: Innovative Practices NA

Background: The importance of mental health in university students has received much attention over the past few years. College students are at risk for developing psychiatric illness, being on complex psychotropic medication regimens, substance abuse, and medication non-adherence. Additionally, many universities have difficulty recruiting and retaining experienced psychiatry providers. Opportunities exist for psychiatric pharmacists to provide consultation and education services in this setting.

Description of Innovative Service: This pilot program took place in the student mental health department. Up to eight hours/week was allotted for consultation during the 2007 spring and fall semesters. The consultant was a faculty member of the local school of pharmacy and a board certified psychiatric pharmacist with over 15 years of clinical experience. Consulting services provided included: patient interview and assessment, medical record review, drug information, and in-service education. Consultation referrals and education requests have been primarily generated by psychiatric nurse practitioners.

Impact On Patient Care: During the 2007 spring and fall semesters, the psychiatric pharmacist provided both consultation and educational services for mental health staff. To date, the consultant has provided: clinical consultation for 20 patients, four in-service presentations, and 20 one-hour clinical education meetings with psychiatric nurse practitioners. Patients receiving consultation were: undergraduate and graduate students, 18–42 years old, and predominantly female (75%). Depression and/or anxiety have been the most common presenting illnesses (80%). All 20 patients consulted received a medical record review and 13 (65%) were also interviewed. Recommendations were implemented 85% of the time and no adverse outcomes related to these recommendations have occurred. Student Health staff have been uniformly positive about psychiatric pharmacy involvement in the mental health care of university students.

Conclusion: University student health systems are encountering many patients with mental health care needs and are challenged with the recruitment and retention of experienced psychiatry providers. The provision of clinical consultation and education services in a state university student health system has a high potential for success and represents a new practice setting for the psychiatric pharmacy specialty.

Therapeutic Case Report

Abstracts describing the various aspects of pharmaceutical care relating to individual psychiatric and/or neurological pharmacy cases. Abstracts should provide a complete patient history including age, gender, time from first diagnosis, social background, and details of, and response to, previous and current treatment(s). Cases should include background, complete patient history, review of literature, and conclusion.

Therapeutic Case Report Peer Review Criteria

- Title
- Background/review of literature
- Description of practice or patient history
- Conclusions
- Originality of practice or case
- Significance of practice or case
- Written description of practice or case

Therapeutic Case Report Example (2008)

Corresponding Author: Richard Perry, PharmD

Title: Duloxetine-Induced Takotsubo Cardiomyopathy: A Case Report

Authors & Affiliates: Richard Perry, PharmD., Arnold & Marie Schwartz College of Pharmacy and Health Sciences, Long Island University

Abstract Type: Therapeutic Case Management

Background: Takotsubo cardiomyopathy (TTC) is a cardiac syndrome with symptoms including left ventricular apical ballooning and chest pain. No specific cause has been elucidated but physical/emotional stress and/or excessive catecholamine levels may be a responsible etiology for this stress-induced cardiomyopathy. Although its effects are usually transient and most cases have a good prognosis, the initial presentation is similar to that of an acute myocardial infarction.

Patient-History: The patient is a 60 year old Hispanic female with a past medical history significant for hypothyroidism, type 2 diabetes mellitus, peripheral neuropathy, hypertension, s/p urinary tract infection, multiple hernia and uterine fibroid surgeries. The patient's social history was noncontributory. The patient was started on duloxetine 60 mg once daily for management of peripheral neuropathy and reportedly finishing a course of ciprofloxacin for treatment of a urinary tract infection (treatment dates unknown). On the first day of treatment with duloxetine, the patient began to feel lightheaded and nauseous, which worsened on the following day. On the third day of treatment, nonradiating left sided chest pain, 7/10 intensity, and diaphoresis developed. The patient was admitted to the hospital and thought to be having a myocardial infarction. EKG showed ST elevations and T wave inversions and the troponin level was 3.343 ng/ml (reference: <0.059 ng/ml). Cardiac catheterization showed clear coronary arteries, echocardiography showed apical akinesis and an ejection fraction of 30% and norepinephrine blood levels were 3492 pg/ml (reference: 70-750 pg/ml), consistent with a diagnosis of TTC. The patient was anticoagulated with heparin and received treatment for her concurrent disease states.

Review Of Literature: A MEDLINE search revealed no published case reports of duloxetine-induced TTC. As there are no specific diagnostic criteria for TTC, limited data exists regarding its epidemiology and it may be under reported. Duloxetine prescribing information warns against the concurrent use of a potent CYP1A2 inhibitor (ciprofloxacin), which may have further contributed to this adverse reaction.

Conclusion: In our case report, a temporal and causal relationship was observed between the initiation of duloxetine and the development of TTC. Clinicians should be cognizant that use of duloxetine may result in TTC.

AAPP Research and Practice Awards Application Process

Innovative Practices Award

Award Details

- Winner will be announced on the morning of Monday, April 20, 2026
- \$500 honorarium

Qualifications

- Must be 1st author on the abstract

Requirements

- Submission of abstract online
 - Abstracts should describe the development of innovative services/activities and should include: 1) Background/rationale; 2) Description of the innovative practice; 3) Impact of practice on patient care/institution; and 4) Conclusion
 - Not previously published or presented
 - Maximum word count: 350
- The following items must be uploaded by each award candidate in the abstract submission center by 11:59 PM Central Time on January 8, 2026.
 - Curriculum vitae (maximum 10 pages)
 - Detailed description of the practice (maximum 1500 words)
 - Documentation explaining your role in the project (maximum 500 words)
- Award finalists are required to register for the in-person Annual Meeting for a minimum of Sunday and Monday, April 19-20, 2026
- Award finalists are required to man their poster on Monday, April 20, 2026, from 5:50-7:20 p.m.
- Award finalists are required to provide a 12-minute platform PowerPoint presentation (10-minute presentation + 2 minutes Question and Answer session) on Sunday, April 19, 2026
 - **PowerPoint materials are due by April 1, 2026, to the AAPP office**
 - Only one presenting author may present the award platform presentation

Peer Review Criteria for Award Finalists Status

- | | |
|--|---|
| • Title | • Originality of practice or case |
| • Background/review of literature | • Significance of practice or case |
| • Description of practice or Patient history | • Written description of practice or case |
| • Conclusions | |

Annual Meeting On-site Judging Criteria for Award Selection

- | | |
|------------------------------------|-------------------------------------|
| • Title* | • Answers to questions* |
| • Background/review of literature* | • Effective use of time* |
| • Description of practice* | • Originality of practice or case |
| • Conclusions* | • Significance of practice or case* |
| • Presentation style* | • Poster quality |

*=from/during platform presentation

Original Research Award

Award Details

- Winner will be announced on the morning of Monday, April 20, 2026
- \$500 honorarium

Qualifications

- Must be 1st author on the abstract

Requirements

- Submission of abstract online
 - Investigator-initiated original research not previously published/presented
 - Encore abstract submissions ineligible
 - Maximum word count: 350
- The following items must be uploaded by each award candidate in the abstract submission center by 11:59 PM Central Time on January 8, 2026.
 - Curriculum vitae (maximum 10 pages)
 - Detailed description of author's role in research project (up to 500 words)
- Award finalists are required to register for the in-person Annual Meeting for a minimum of Sunday and Monday, April 19-20, 2026
- Award finalists are required to man their poster on Monday, April 20, 2026, from 5:50-7:20 p.m.
- Award finalists are required to provide a 12-minute platform PowerPoint presentation (10-minute presentation + 2 minutes Question and Answer session) on Sunday, April 19, 2026
 - **PowerPoint materials are due by April 1, 2026, to the AAPP office**
 - Only one presenting author may present the award platform presentation

Peer Review Criteria for Award Finalists Status

- | | |
|--------------|---------------------------|
| • Title | • Conclusions |
| • Background | • Originality of project |
| • Objectives | • Significance of project |
| • Methods | • Curriculum vitae |
| • Results | |

Annual Meeting On-site Judging Criteria for Award Selection

- | | |
|---------------|----------------------------|
| • Title* | • Conclusions* |
| • Background* | • Presentation style* |
| • Objectives* | • Answers to questions* |
| • Methods* | • Originality of project* |
| • Results* | • Significance of project* |

*=from/during poster presentation

Research Trainee Award

Award Details

- Winner will be announced on the morning of Monday, April 20, 2026
- \$500 honorarium

Qualifications

- 1) The following individuals are eligible for award consideration:
 - a) Currently enrolled as a Pharm.D. student (P1-P4) **OR**
 - b) Currently a PGY1 or PGY2 pharmacy resident **OR**
 - c) If the applicant has finished their post-graduate training (residency, MS, PhD, fellowship) within the last 12 months, and is presenting a research project from their training **OR**
 - d) Currently enrolled in either a M.S. or Ph.D. program or a post-doctoral fellowship program and has a primary pharmacy degree **OR**
 - e) Currently enrolled in a College of Pharmacy M.S. or Ph.D. program or a College of Pharmacy post-doctoral fellowship program without a primary pharmacy degree
- 2) Abstract Categories eligible for Award consideration
 - a) Work in Progress
 - b) Original Research
- 3) Must be 1st author on the abstract

Requirements

- Submission of abstract online
 - Original research not previously published or presented
 - Work in progress abstracts are allowed if interim data analysis and timetable for completion of study are included
 - Maximum word count: 350
- The following items must be uploaded by each award candidate in the abstract submission center by 11:59 PM Central Time on January 8, 2026.
 - Curriculum vitae (maximum 10 pages)
 - Letter of support, which must include explanation of exact roles of the student/resident in project
 1. The letter may not be self-written and must be written by a Residency Program Director or someone else in the applicant's organization
 - 1 page letter stating research/career goals, including description of trainee's role in project
- Award finalists are required to register for the in-person Annual Meeting for a minimum of Sunday and Monday, April 19-20, 2026
- Award finalists are required to man their poster on Monday, April 20, 2026, from 5:50-7:20 p.m.
- Award finalists are required to provide a 12-minute platform PowerPoint presentation (10-minute presentation + 2 minutes Question and Answer session) on Sunday, April 19, 2026
 - **PowerPoint materials are due by April 1, 2026, to the AAPP office**
 - Only one presenting author may present the award platform presentation

Peer Review Criteria for Award Finalists Status

- | | | |
|--------------|---------------------------|-------------------------|
| • Title | • Results | • Curriculum vitae |
| • Background | • Conclusions | • Letter of support |
| • Objectives | • Originality of project | • Research/career goals |
| • Methods | • Significance of project | • Roles in project |

Annual Meeting On-site Judging Criteria for Award Selection

- | | | | |
|---------------|-----------------------|----------------------------|--|
| • Title* | • Results* | • Answers to questions* | • Poster quality |
| • Background* | • Discussion* | • Effective use of time* | • *=from/during platform presentation |
| • Objectives* | • Conclusions* | • Originality of project* | |
| • Methods* | • Presentation style* | • Significance of project* | |

Therapeutic Case Report Award

Award Details

- Winner will be announced on the morning of Monday, April 20, 2026
- \$500 honorarium

Qualifications

- Must be 1st author on the abstract

Requirements

- Submission of abstract online
 - Abstracts should describe a complete patient history including age, gender, time from first diagnosis, social background, and details of, and response to, previous and current treatments. Case format should include: 1) Background/review of literature; 2) Patient history; and 3) Conclusions
 - Not previously published or presented
 - Maximum word count: 350
- The following items must be uploaded by each award candidate in the abstract submission center by 11:59 PM Central Time on January 8, 2026.
 - Curriculum vitae (maximum 10 pages)
 - Detailed description of the case (maximum 1500 words)
 - Documentation explaining your role in the project (maximum 500 words)
- Award finalists are required to register for the in-person Annual Meeting for a minimum of Sunday and Monday, April 19-20, 2026
- Award finalists are required to man their poster on Monday, April 20, 2026, from 5:50-7:20 p.m.
- Award finalists are required to provide a 12-minute platform PowerPoint presentation (10-minute presentation + 2 minutes Question and Answer session) on Sunday, April 19, 2026
 - **PowerPoint materials are due by April 1, 2026, to the AAPP office**
 - Only one presenting author may present the award platform presentation

Peer Review Criteria for Award Finalists Status

- | | |
|--|---|
| • Title | • Originality of practice or case |
| • Background/review of literature | • Significance of practice or case |
| • Description of practice or Patient history | • Written description of practice or case |
| • Conclusions | |

Annual Meeting On-site Judging Criteria for Award Selection

- Title*
- Background/review of literature*
- Description of practice or patient history*
- Conclusions*
- Presentation style*
- Answers to questions*
- Effective use of time*
- Originality of practice or case*
- Significance of practice or case*
- Poster quality

*= from/during platform presentation

Health Equity Award

Award Details

- Winner will be announced on the morning of Monday, April 20, 2026
- \$500 honorarium

Qualifications

- Must be 1st author on the abstract
- Abstract must address impact of social determinants of health on patients with psychiatric disorders or the role of psychiatric pharmacists in helping this patient population attain health equity.

Requirements

- Submission of abstract online
 - Investigator-initiated original research not previously published
 - Encore abstract submissions ineligible
 - Work in progress abstracts are allowed if interim data analysis and timetable for completion of study results are included.
 - Maximum word count: 350
- The following items must be uploaded by each award candidate in the abstract submission center by 11:59 PM Central Time on January 8, 2026.
 - Curriculum vitae (maximum 10 pages)
 - Detailed description of author's role in research project (up to 500 words)
- Award finalists are required to register for the in-person Annual Meeting for a minimum of Sunday and Monday, April 19-20, 2026
- Award finalists are required to man their poster on Monday, April 20, 2026, from 5:50-7:20 p.m.
- Award finalists are required to provide a 12-minute platform PowerPoint presentation (10-minute presentation + 2 minutes Question and Answer session) on Sunday, April 19, 2026
 - **PowerPoint materials are due by April 1, 2026, to the AAPP office**
 - Only one presenting author may present the award platform presentation

Peer Review Criteria for Award Finalists Status

- | | |
|--------------|---------------------------|
| • Title | • Conclusions |
| • Background | • Originality of project |
| • Objectives | • Significance of project |
| • Methods | • Curriculum vitae |
| • Results | |

Annual Meeting On-site Judging Criteria for Award Selection

- Title*
- Background*
- Objectives*
- Methods*
- Results*
- Conclusions*
- Presentation style*
- Answers to questions*
- Originality of project*
- Significance of project*

*=from/during poster presentation