

ABSTRACT SUBMISSION FORM



**THE 36TH MEETING OF THE
ONTARIO ASSOCIATION FOR AMPUTEE CARE**

**INNOVATIONS
IN AMPUTEE CARE**

FRIDAY MAY 3 - SATURDAY MAY 4, 2024

**DELTA HOTELS WATERLOO
110 ERB STREET W
WATERLOO, ONTARIO N2L 0C6**

DEADLINE FOR RECEIPT OF ABSTRACTS: JANUARY 15, 2024

I would like this abstract considered for (please check one):

- Podium Presentation only (20 minutes in length)
- Poster Display only
- Poster or Podium Presentation

Name(s)

Position(s)

Organization(s)

Address of Corresponding Author

Phone Number of Corresponding Author

E-mail address of Corresponding Author

TITLE OF ABSTRACT: _____

1. OVERVIEW

All submissions for the OAAC 2024 Conference will be reviewed by judges who are experts in the field.

2. TOPIC AREAS

OAAC will be open to any topics related to the field of amputation. Some examples of topics that would be considered include prosthetics, assistive technologies, wheelchair skills, wound care, rehabilitation, gait training, acute care and/or surgical techniques, amputation prevention, phantom limb pain and/or other comorbidities/secondary conditions, community living, and quality of life. Abstracts may describe findings from a research project, quality improvement initiative and/or clinical innovation. Projects which are either at the proposal stage or work in progress also are eligible. If you are uncertain about the eligibility of your topic, please email: ONAMPCARE@gmail.com

3. NOTIFICATION

Once you submit your abstract, a review period will follow. The Reviewing Committee will choose abstracts and inform those chosen by **FRIDAY FEBRUARY 2, 2024**.

GUIDELINES FOR PREPARATION OF ABSTRACT

- Abstracts must be typed, double-spaced, on a single sheet - this is how your abstract will appear in the conference program.
- Abstracts must be no more than **250 words** in length
- Please use the following formatting instructions/headings for your abstract:
 - Category: Research; Clinical Innovation; Student (**only indicate one category**)
 - Title of abstract
 - Authors (e.g., Smith JB¹, Morgan LB²)
 - Primary affiliation for each author (e.g., 1 – Unity Health, Toronto, ON; 2 – Sunnybrook Health Sciences Centre)
 - Background
 - Objective and Hypothesis (where applicable)
 - Methods
 - Results
 - Discussion/Conclusion

*For abstracts describing study proposals or work in progress, this format may be modified.

- Email Abstract to: ONAMPCARE@gmail.com
- **N.B. Those chosen to present a podium presentation will be asked to have the audiovisual component of their presentation in PowerPoint format only.**

SAMPLE ABSTRACT

Category: Research

Title of abstract: Examining the feasibility of 3D printing technologies for fitting prosthetics in the field of amputation.

Authors: Shatner W¹, Newton W², Hasselhoff D³, Reynolds R³

Affiliations: 1 – Unity Health, Toronto, ON; 2 – Sunnybrook Health Sciences Centre, Toronto, ON; University of British Columbia, British Columbia, ON;

Background:

The use of 3D printing technologies is growing in popularity in the limb loss field. To advance the use of 3D printing by prosthetists, there is a need to assess the feasibility and acceptability of these technologies.

Methods:

A mixed-methods study was undertaken that first distributed an online survey to prosthetists (N=50) from across Ontario about their knowledge and access to 3D printing and their perceived utility of the technology. A sub-set (n=20) participated in a qualitative interview to share their perspectives on using 3D technologies. A fundamental qualitative descriptive approach was used to analyze the interview data.

Results:

The sample of prosthetists (35 men; 25 women) had on average 5.7 years (SD=2.8) of clinical experience. Only 1/3 of the sample had previous experience with 3D printing and only 10% had access to a 3D printer in their clinical practice. There was a negative correlation ($r=-.40$, $p < .05$) with years of experience and acceptability of using 3D technologies, where those newer to the field were more willing to explore using it. From the qualitative interviews, two themes emerged, which included: a) uncertainty of the technology and b) training considerations.

Discussion/Conclusion:

Prosthetists have mixed-feelings with the use of 3D printing technologies. Although persons earlier in their careers were more likely to explore using it, most of the sample indicated low to moderate rankings on the feasibility of using it compared to traditional approaches. Overall, the findings indicate that prosthetists feel that more evidence is needed prior to adoption.