



ABSTRACT SUBMISSION BROCHURE

ABOUT THE PREGNANCY MEETING™ AND THE CALL FOR ABSTRACTS

SMFM 2026 Pregnancy Meeting™, will be held **Sunday, February 8 – Friday, February 13**, at Caesars Forum in Las Vegas, NV.

As experts in maternal-fetal medicine, the Society for Maternal-Fetal Medicine (SMFM) and its members lead the evidence-based practice of high-risk pregnancy care by providing education, promoting research, and engaging in advocacy. The Pregnancy Meeting™ is a centerpiece of the work of the Society, featuring postgraduate courses and workshops, luncheon roundtables, scientific forums, and oral and poster presentations. The Pregnancy Meeting™ is *the premier event* for presenting and learning about cutting-edge science in obstetrics and provides participants the opportunity to connect with leaders and colleagues in maternal-fetal medicine.

[CLICK HERE TO SUBMIT AN ABSTRACT](#)

CALL FOR ABSTRACTS BROCHURE CONTENTS

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IMPORTANT DATES

- **Monday, August 4, 2025, 9:00 PM ET:** Call for Abstract Submission Deadline
- **Monday, August 25, 2025:** Pregnancy Meeting™ Registration Opens
- **Friday, September 26, 2025:** Submitting and presenting authors notified of submission acceptances.
- **Monday, October 6, 2025:** Late-Breaking Abstract Submission Site Opens
- **Friday, October 3, 2025:** Abstract Withdrawal Deadline
- **Monday, November 10, 9:00 PM ET:** Late-Breaking Abstract Submission Deadline
- **Monday, November 24, 2025:** Late-breaking submitting and presenting authors notified of late-breaking submission acceptances.

For questions related to the Pregnancy Meeting program and/or abstracts process, please email the SMFM Program Development Team at PMprogram@smfm.org.

GENERAL TIPS AND INSTRUCTIONS

- All submissions must be completed and submitted by **Monday, August 4, 2025, at 9:00 PM ET.**
- All correspondence(s) regarding the abstract submission will be sent to the Submitting Author only. **However, both the submitting and presenting author will be notified of the abstract(s) status (via email) on Friday, September 26, 2025.**

TECHNICAL GUIDANCE

- **Best practice:** Log out of session at the end of submission.
- Please log in and open only one browser window for abstract submissions. Data may be corrupted if multiple sessions are open at the same time.
- The abstract submission system does not have a spell-check feature. **Please review your abstract for grammatical and spelling errors before submission. You will not have the opportunity to request edits after submission.** Accepted abstracts will be printed as they are submitted.
- There is no limit to the number of complete abstract submissions. However, it is recommended that you do not have more than two (2) incomplete (active) submissions at a time.
- Progress on an abstract can be saved once all the required fields in that section of the submission are completed.
- When naming images/charts/tables for upload, please refrain from using the author or institution name in the title to maintain blind peer review.

ABSTRACT STATUS

- **Active/Incomplete:** The author has not submitted the abstract. An author should not have more than two (2) incomplete or active submissions at a time. Reminders will be sent on a routine basis to those authors who have incomplete abstracts in the system.
- **Withdrawn:** The author has chosen to remove an active or submitted abstract. An author may withdraw an incomplete “test” or duplicate abstract, so they do not receive additional reminders to complete it.
- **Complete/Submitted:** All required tasks have been completed, and the author has submitted the abstract. You may continue to edit and resubmit the abstract up until the submission deadline.

ABSTRACT SUBMISSION AND PREPARATION GUIDELINES

Abstract Authors

- Abstract Authors are comprised of three different types:
 - **Submitting Author:** The author submitting the abstract, and the one to whom all correspondence from the SMFM will be sent. The Submitting Author is responsible for the accuracy of the presenting and co-author(s) data and securing their consent for inclusion in the submission. **This individual will serve as the point of contact for all submission-related communications.**
 - **Presenting Author:** The author will present the selected abstract in person at the meeting. If the abstract is accepted, this is the author who will receive correspondence regarding uploading and presenting the abstract or poster, registration for the meeting and more.
 - **Co-authors:** All other authors contributing to the abstract - up to 25 co-authors can be entered. All authors' full names, full institution names, and email addresses are required.
- The system will allow authors to designate themselves as the submitting and presenting authors.
- Co-authors will be listed in the publication as they are listed on the submission site.

Please review the author's roles and identifying information carefully. **No corrections or additions will be accepted after submission, and accepted abstracts will be printed as they were submitted.**

Abstract Title

- An abstract must have a short, specific title of no more than 15 words that clearly indicates the nature of the study.
- Titles should not include author or institution names.
- Always use correct title case (avoid all caps or lowercase).

Abstract Category

The attached sample submission form contains the complete list of abstract and indexing categories.

Abstract Body Fields

- Abstract submissions must be 2,100 characters or less, including spaces. To accommodate special characters, it is recommended that abstract text be copied and pasted from a word processing document (e.g., Microsoft Word)
- **Objective:** Study's objectives should be clearly stated, and the rationale for the study should be understood.
- **Study Design:** The stated objective or hypothesis should be described appropriately.
- **Results:** Results should be summarized, and salient data presented.
- **Conclusions:** Main conclusion is supported by results and clearly stated.

Abstract Attachments

- Accepted file types are .jpg and .png
- No more than two images/charts/tables per submission.
- Image file names should **not** include the author's name or institution to maintain blinded review.
- The image should be between 300 and 600 dpi. The final printed width of the image is approximately 3 inches. **Please be mindful of the print size of uploaded files. Uploaded files will be condensed to a maximum size of 3" x 3" for journal publication.**
- All text within images should be large enough to be readable when the images are printed or viewed on screen. Images of poor quality or illegible will be reflected in the abstract review scores.

Other Guidelines

- You may copy and paste special characters directly from your word processor into the text boxes in the online submission form.
- In some cases, superscript and subscript numbers will not carry over; however, they will be corrected before publication.
- If you use the "<" character, you MUST follow with a space to ensure it isn't misconstrued as HTML code.
- Drug Names: Nonproprietary (generic) names in lowercase are required the first time a drug is mentioned. Proprietary names are capitalized, e.g., furosemide (Lasix).

RULES AND RESTRICTIONS

1. By submitting an abstract, you agree to follow the rules outlined in the abstract submission process.

The contents of the abstract must not be presented at any international, national, or regional meeting. If selected for an oral presentation, no paper arising from the abstract may be published—either in print or electronically—before the conclusion of the SMFM 2026 Pregnancy Meeting™ on Friday, February 13, 2026. If you plan to submit your work for publication, you must ensure that the publication date will fall *after* February 13, 2026. If you cannot guarantee this, please do not submit your abstract

If your abstract is accepted as a *poster* presentation, SMFM permits publication in journals (print or digital) between the date of acceptance (September 26, 2025) and the end of the meeting (February 13, 2026).

If the Program Committee accepts your abstract, you agree to its publication and assign copyright to SMFM. Note that acceptance of the abstract does not guarantee publication of a full paper. Full paper publication requires submission for peer review and formal approval.

2. All authors certify that the work described in this abstract was conducted in compliance with the guidelines of all sponsoring institutions' Human Investigations Committee or Animal Care Committee.
3. Only completed research studies should be submitted for consideration; interim analyses should not be submitted and will **not** be accepted.
4. If an abstract is accepted for oral presentation and significant changes are discovered in either the data or conclusions contained in the abstract after further analyses, please email the SMFM Program Development Team at PMprogram@smfm.org.
5. Images uploaded should not violate SMFM's terms and conditions, and submitters affirm that they own all copyrights to the image or have authorization to upload it. Please do not include the names of the authors or the institution in the file name of the uploaded material, as the review is blinded for abstract consideration.
6. By submitting an abstract, you confirm that **all** authors have reviewed and approved the final abstract.

Failure to follow these rules will result in a one-year ban on abstract submission for the SMFM 2027 Pregnancy Meeting and/or the 2026 SMFM Global Congress. For example, if a presenter's abstract or manuscript is published prior to the SMFM Pregnancy Meeting, the abstract must be withdrawn from the meeting program, and the presenting author will be banned from submitting an abstract of any kind (as the submitting, presenting, or co-author). Similarly, if a presenting author does not appear at the Pregnancy Meeting™ to present his or her work at the assigned session and does not notify SMFM, he or she will be banned from submitting an abstract of any kind (as the submitting, presenting, or co-author).

ABSTRACT REVIEW PROCESS AND SELECTION CRITERIA

Each abstract will undergo a blind peer review and scoring process. Each of the top abstracts will be reviewed and scored again by senior reviewers. The Program Committee will use the data from the general and senior reviewers to determine the various oral and poster sessions. Late-breaking abstracts will also undergo a blind peer review process.

Abstracts will be reviewed and selected based on the following criteria:

Objectives	Study Design
Results	Conclusions
Novelty	Scientific Merit
Quality of Abstract	

Note: Duplicate publication and interim analysis are not accepted and will be declined.

ABSTRACT ACCEPTANCE AND WITHDRAWAL PROCESS

Notification of Acceptance/Non-Acceptance: Notification will be emailed by **Friday, September 26, 2025**.

Acceptance Contingency: Acceptance is contingent upon the following conditions issued by the SMFM Board of Directors: (1) the data you plan to present at the meeting will not be significantly different from the data in your reviewed abstract; (2) your data has not been presented at a National or International meeting and will not be presented or published, in print or electronic format, prior to the presentation onsite.

Publication: All abstracts will be published in [The Pregnancy Journal](https://www.smfm.org/journal) abstract supplement. Abstracts accepted for oral presentation may be eligible for the Fast Track review and publication process. For more information, visit <https://www.smfm.org/journal>.

Registration: The presenting author must register for the scientific sessions. The presenter is responsible for expenses associated with submitting and presenting an abstract.

Abstract Withdrawal: The **Submitting Author** must submit a request to withdraw an abstract from The Pregnancy Meeting™. Upon completion of the request, the submitting and presenting authors will receive a confirmation email from SMFM.

To avoid publication in the abstract supplement, the deadline to withdraw an abstract is **Friday, October 3, 2025**. Withdrawals after this deadline will be subject to a one-year ban on abstract submission.

[CLICK HERE TO SUBMIT AN ABSTRACT](#)

SAMPLE SUBMISSION FORM

This is a duplicate of the online submission form for planning purposes only. To officially submit an abstract for review and consideration for the SMFM 2026 Pregnancy Meeting™ program, please visit SMFM.org/2026 to access the submission portal.

To be considered for presentation at the Pregnancy Meeting™ scientific program session, please complete the steps in the online submission portal in their entirety. Partial or incomplete proposals will not be reviewed or considered.

Submission Deadline: Monday, August 4, 2025, at 9:00 PM ET

Abstract Rules and Disclaimers Acknowledgement*

Study Design*

RCT – Primary Analyses being presented are **required** to include the [trial registration](#). If a trial is not registered, it will not be considered for acceptance.

- Dropdown choices:
 - RCT – Primary Analysis
 - RCT – Secondary Analysis
 - Bench Study – Human
 - Bench Study – Animal
 - Prospective Observational Study – Primary
 - Prospective Observational Study – Secondary Analysis
 - Retrospective Case-Control Study
 - Retrospective Cohort Study
 - Decision Analysis
 - Meta-Analysis
 - Other

If you selected RCT Primary Analysis above, please provide the NCT Registration Number or "N/A" if you did not select RCT Primary Analysis above.

Additional Information*

Please specify if the Submitting or Presenting Author is one of the following: *

MFM Fellow Paper: Is the submitting or presenting author a current Maternal-Fetal Medicine Fellow-in-Training in an Accreditation Council for Graduate Medical Education (ACGME)-approved or equivalent maternal-fetal medicine fellowship training program? (NOTE: Even if you have finished your fellowship, you are eligible to select "MFM Fellow Paper" below if the research you are submitting was performed primarily during your maternal-fetal medicine fellowship and completed within two years of finishing your fellowship.)

Resident Paper: If the submitting or presenting author is currently a resident in an ACGME-approved OB/Gyn Residency Program, please select "Resident Paper" below.

Medical Student Paper: If the submitting or presenting author is currently a medical student, please select "Medical Student Paper" below.

SAMPLE SUBMISSION FORM, CONTINUED

External Funding Source*

If you received external funding support for this research, please name the source of the support (e.g., supported by grants from NIH, Foundation support, Corporate Support, or other specific sources of support). Funding support can be direct (for conduct of the research) or indirect (writing, presentation, travel, etc.) support for the research. If yes, the source must be listed.

Research Collaboratives

Is this work conducted on behalf of a research collaboration such that the institutional affiliation for the Submitting Author needs to reflect the collaboration (e.g., MFMU, NAFTA Net)? If so, please list the affiliation as it should be reflected in publication. This information cannot be edited or added following submission.

Basic or Translational Science

Could this abstract be considered basic or translational science?

Queenan Global Health Travel Fellowship

Please check this box if any author of this submission is a practicing obstetrician from a low/middle income country. The presenting author may be eligible for a Queenan Global Health Travel Fellowship. More information regarding this opportunity can be found at www.FoundationforSMFM.org.

Authors

Please review all information carefully. There will be no corrections (including adding or removing authors) made after the submission deadline and author information will be printed in the abstract supplement as shown in this example.



- All submission correspondence will be sent via email to the Submitting Author only.
- A submitting and presenting author must be designated; however, one author can be designated as both roles.
- Co-authors should be listed in the order of which they should appear in publication, if accepted. Authors can be re-ordered by either clicking and dragging or using the arrow keys to the right of the author block.
- The senior author is typically the last author listed on the abstract.

Author Fields (* denotes required field; parentheses provide checkbox options)

- Role* (Submitting Author, Presenting Author, Co-author)
- First Name* Last Name* Email Address*

Institution/Organization

- Institution/Organization Name (no acronyms)* Institution/Organization City*
- Institution/Organization State or Province* Institution/Organization Country*

Presentation Preference and Registration Acknowledgement*

The Program Committee reserves the right to assign your abstract to either an oral or poster presentation based on availability and the reviewers' scores.

At the SMFM 2026 Pregnancy Meeting,[™] we ask all presenters to prepare to present their abstract in-person. [A virtual option will not be available.](#)

If the presentation format assigned to your abstract is not acceptable (e.g., your work is accepted as a poster, but you do not wish to present in that format), you must notify [the SMFM Program Development Team](#) to withdraw your abstract. The deadline to withdraw is **Friday, October 3, 2025**, to avoid publication in the abstract supplement. Withdrawals after this deadline will be subject to a one-year ban on abstract submission.

All presenters are required to register for the scientific sessions. Registration will open in August and fees vary by membership type. Oral and poster presentations will take place on Wednesday, Thursday, Friday, and Saturday.

Guidelines for Completing the Abstract Body

Abstracts must be prepared according to the guidelines for submission. Those not conforming to the required format may be rejected. You must fill out all required fields. **Abstract submission content (objective, study design, results, conclusion) must be 2,100 characters or less, inclusive of spaces.**

Special characters and formatting: You may copy and paste special characters and formatting directly from your word processor into the text boxes below. In some cases, superscript and subscript numbers will not carry over; however, will be corrected prior to publication. If you are using the "<" character, you MUST follow with a space to ensure it isn't misconstrued as html code.

Drug names: Nonproprietary (generic) names in lower case are required the first time a drug is mentioned. Proprietary names are capitalized, e.g., furosemide (Lasix).

Abstract Title*

The title should be brief, but long enough to clearly identify the nature of the study. The title should be entered in sentence case.

- Do not put your name or author names in the abstract title.
- Do not put your title in quotation marks.
- Do not use formatting tags in the title.

You may copy and paste special characters directly into the title. Example: *This is a properly formatted title*

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SAMPLE SUBMISSION FORM, CONTINUED

Category*

To ensure that your abstract receives proper scientific consideration, indicate the appropriate category.

Dropdown choices for Category Field with their corresponding Indexing Category dropdown choices in parentheses:

- **Antepartum Fetal Assessment** (Amniotic fluid volume, Biophysical profile, Doppler assessment, NST/CST, Other)
- **Clinical Obstetrics** (Adolescent pregnancy, Advanced maternal age, Cervical insufficiency, Exercise, Higher order multiple gestation, Medications, Obstetric hemorrhage, Postpartum hemorrhage, Placental abruption, Placenta accreta, Placenta previa, Placental pathology, Pregnancy termination, Prenatal care, Prior pregnancy loss, Recurrent pregnancy loss, Stillbirth, Substance use, Twin pregnancy, Uterine anomalies, Other)
- **Digital Health Technologies (DHT)** (Electronic medical records, other databases and social networking, Perinatal database, Telemedicine, Other)
- **Diabetes** (Complications, Diagnosis/screening, Fetal evaluation, Gestational, Management, Pathophysiology, Pregestational, Other)
- **Education/Simulation** (Education, Innovative teaching methods, Simulation, Other)
- **Epidemiology** (Environmental exposures, Fetal development, Fetal origins of adult disease, Infant and child health, Methods, Perinatal risk assessment, Pregnancy/Maternal, Reproduction, Other)
- **Fetal Intervention** (Anomalies, Fetal medical therapy, Fetal surgical therapy, Growth restriction, Hypoxia/asphyxia, Isoimmunization/alloimmunization, Laser therapy, Multifetal pregnancy reduction, Selective termination, Transfusion, Other)
- **Genetics** (Amniocentesis, Aneuploidy screening, CGH/microarrays, CVS, Cytogenetics, Gene therapy, Genetic screening, Molecular genetics, Noninvasive prenatal diagnosis, Teratology, Whole Exome Sequencing, Whole Genome Sequencing, Other)
- **Health Equity/Community Health** (Bias, Care provided in community settings, Community health outcomes, Community resilience, Inequities in clinical care or outcomes, Interventions to achieve equitable outcomes, Structural racism, Unmet social need, Other)
- **Health Policy/Economics** (Abortion regulations and restrictions, Affordable Care Act, Cost-benefit analysis, Healthcare demand, Healthcare efficiency, Healthcare insurance, Healthcare reform, Medicaid, Pharmacoeconomics, Other)
- **Hypertension** (Gestational, Chronic/essential, Evaluation and diagnosis, Genetics, Preeclampsia/HELLP/eclampsia, Prevention, Treatment/management, Other)
- **Infectious Diseases** (Chlamydia/gonorrhea, Chorioamnionitis/endometritis, COVID-19, CMV, Group B streptococcus, Hepatitis, HIV, HSV, Influenza, Measles, Parvovirus, RSV, Surgical site/post-operative, Syphilis, Toxoplasmosis, Urinary tract infection, Varicella, Zika, Other bacterial and spirochetes, Other viral, Other)
- **Intrapartum Fetal Assessment** (Acid-base status, Fetal heart rate monitoring, Other)
- **Labor** (Abnormal labor, Abnormal position/presentation, Amnioinfusion, Anesthesia, Cervical ripening, Induction/augmentation, Perineal trauma, Shoulder dystocia, Operative vaginal delivery, Other)
- **Medical/Surgical/Diseases/Complications** (Anesthesia, Antiphospholipid antibody syndrome, Cardiovascular, Collagen vascular, Critical care, Endocrinologic, Gastrointestinal, Hematologic/thrombocytopenia, Immunologic, Malignancy, Neurologic, Non-obstetric surgery, Obesity, Pulmonary/asthma, Renal Disease, Thromboembolic, Transplants, Other)
- **Neonatology** (Birth trauma, Hypoxia/ischemia, Intraventricular hemorrhage, late preterm/early term infants, Neurologic injury, Necrotizing enterocolitis, RDS, Other)

SAMPLE SUBMISSION FORM, CONTINUED

- **Obstetric Quality and Safety** (Clinical communication/decision-making, Clinical emergency preparedness/disaster planning, Clinical policies and guidelines, Maternal mortality, Patient-related outcomes (e.g., Quality of life), Qualitative research, Quality improvement, Quality measures)
- **Operative Obstetrics** (Cervical cerclage, Cesarean delivery, Cesarean hysterectomy, Operative vaginal delivery, Surgical site/post-operative, Uterine rupture, VBAC, Other)
- **Perinatal Mental Health** (Anxiety, Depression, Grief, Psychosis)
- **Physiology/Endocrinology** (Fetal, Maternal, Neonatal)
- **Practice Management** (ICD-10, Medical practice efficiency, Operations, Patient flow/wait times/satisfaction, Physician compensation, Provider efficiency)
- **Prematurity** (Cervical insufficiency, Corticosteroids, Neonatal outcomes, Preterm labor, PROM, Risk assessment/screening, Tocolysis/treatment)
- **Public Health/Global Health** (Ethical, legal and social issues; Global health)
- **Ultrasound/Imaging** (Amniotic fluid assessment, Cervical length, Doppler, Fetal anomalies, Fetal echocardiography, Fetal growth/weight, Fetal MRI, Interventional procedures, Maternal imaging, Multifetal gestation, Nuchal translucency, Placenta/membranes, Vaginal sonography, 3D/4D ultrasound, Other)

Objective* The objective of the study should be clearly stated and the rationale for the study understood.

Study Design* Appropriate design for the stated objective or hypothesis should be described.

Results* Results should be summarized, and salient data presented.

Conclusion* Main conclusion is supported by results and clearly stated.

Upload Images/Charts/Tables (Optional):

A maximum of two simple images/tables/graphs can be submitted with your abstract. The final printed width of an image is approximately 3 inches. **Uploaded files will be condensed to a maximum size of 3"x3" for journal publication.** All text within the image should be large enough so that it is readable when the image is printed or viewed on screen. An image should be between 300 and 600 dpi. The image(s) will not count toward the character count and color images should be RGB only. Accepted file types are .jpg and .png.

Please note: So the integrity of blinded review is maintained, uploaded images should not include author name(s) or institution(s).

[CLICK HERE TO SUBMIT AN ABSTRACT](#)

ABSTRACT SUBMISSION FAQs

1. When is the abstract submission deadline?

Monday, August 4, 2025, 9:00 PM Eastern Time (ET).

2. I am not a member of SMFM, can I still submit an abstract?

Yes, non-members can submit an abstract.

[CLICK HERE TO SUBMIT AN ABSTRACT](#)

3. Do you accept industry-supported abstracts?

Yes, we accept industry-supported abstracts. All financial interests, commercial or federal funded research, must be disclosed upon submission.

4. Do you accept abstracts previously presented or published?

No, the content of your abstract will not be submitted or presented at an international, national or district meeting and no paper arising from it will be published either in print or electronic format prior to the end of the Pregnancy Meeting. If you intend to submit your work for publication, you must be certain that the date of publication will be after February 13, 2026 (the last day of the SMFM meeting). If you are not able to guarantee this, please do not submit the abstract.

5. Do you accept case studies or reports?

While we currently have no prohibition on any study type for submission, our historical data shows that case reports have rarely been accepted for presentation after the review process. Generally, most presentations are comparative in study design, whether observational or interventional.

All abstracts require all the mandatory components designated within our abstract submission portal, and we do not have a specific submission format for case report submissions. However, if your case report is structured to meet the requirements, the portal will allow it to be submitted. All submissions will be peer-reviewed and scored by the criteria specified within this document and, if scored highly, they will be extended an acceptance for presentation at the Pregnancy Meeting.

6. Do you accept panel presentations?

No, we do not accept panel presentations.

7. How are abstracts reviewed?

All abstracts undergo a blinded peer-review process. All abstracts are initially reviewed by 4 General Reviewers. Top scoring abstracts from the General Review round are sent to Senior Review, where they are reviewed by an additional 4 Senior Reviewers. The scores and recommendations are then reviewed and final selections made by the Program Committee.

8. Do presenters receive a reduced registration fee to attend the Pregnancy Meeting?

No, presenters are expected to pay the registration fee for the Pregnancy Meeting and attend the meeting in person in Las Vegas, NV.

9. Can I edit my abstract after submission?

Abstracts can be edited **until** the abstract submission deadline of **Monday, August 4, 2025 (9:00 pm ET)**. Please ensure that your title, authors, institution and abstract text are accurate prior to submitting. After the submission deadline passes, abstracts cannot be edited further and requests to edit accepted abstracts will not be accepted. Abstracts are blindly peer reviewed and scored based

upon the content (objective, study design, results, and conclusion) provided. Thus, to maintain the integrity of the submission and review processes, SMFM does not accept requests for abstract changes after submission. Please be sure to spellcheck your work *before* submitting.

10. What is the maximum length of the character count?

Abstract submissions must be 2,100 characters or less, including spaces. Abstract headings (Objective, Study Design, Results, and Conclusion), authors, and institutions, are not included in the character count. Titles should be 15 words or less.

11. How many images, tables and/or graphs are allowed?

Submitters can include two (2) images, tables or graphs with their submission.

12. What happened to the Primary Author role?

The term **Primary Author** was changed to **Submitting Author** to better align with the role of the individual responsibilities.

The Submitting Author is the one who is submitting the abstract, and the individual to whom all correspondence from the SMFM will be sent. The Submitting Author is responsible for the accuracy of the presenting and co-author(s) data and securing their consent for inclusion in the submission.

13. How do I add an author to my abstract submission?

To add an author, enter the author's first name, last name, and email address of the participant (the email address must be the presenter's individual email address). A total of 25 authors may be added to each abstract submission.

Next, select their role (e.g., Submitting Author/Presenting Author/Co-author)

Click '**Add Author.**'

Add New Author

First Name *	Last Name *	Email *	Roles *
<input type="text"/>	<input type="text"/>	<input type="text"/>	Please select at least one Role
			<input type="checkbox"/> Submitting Author
			<input type="checkbox"/> Presenting Author
			<input type="checkbox"/> Coauthor

Add Author

14. How do I invite an author to complete their profile task?

To invite authors to complete their profile, after adding the author, locate the button below their record/name that says "**Invite (Author's Name)**". This will generate an email to the author at the email you provided when adding them. They will simply follow the instructions in the email to login and complete their author task. As the preparer of the submission, it is the Submitting Author's responsibility to ensure that all authors have completed their tasks, as the system will not allow submission until all author tasks have been satisfied.

3 Ian Thomas
Profile incomplete ✖
Role: Presenting Author
Edit Ian Thomas's Profile Invite Ian Thomas Remove Ian Thomas

15. How do I know if my author completed the author task?

A **red x** indicates the profile is not complete. **Click** on the author's name to complete the profile and follow prompts.

A **green check** mark indicates a complete profile.

Once the profile is complete, click **Save Authors** to complete the task.

16. Can I complete my author(s) profile for them instead of asking them to login?

Yes, the author task is set up so it can be completed by the co-author(s) or the Submitting Author.

To complete the author(s) profile, after adding the author, locate the button below their record/name that says "**Edit (Author's Name) Profile.**" This will allow you to enter the required data to complete the author's profile.

3 Ian Thomas
Profile incomplete ✖
Role: Presenting Author
Edit Ian Thomas's Profile Invite Ian Thomas Remove Ian Thomas

17. Will my abstract be published?

Should this abstract be accepted for presentation, you agree to its publication and hereby assign its copyright to SMFM. The abstract will be published in the abstract supplement. The publication of the full paper is not guaranteed and would require your submission of a completed paper for full peer review evaluation prior to acceptance. At a later date, additional information regarding the manuscript submission step will be provided.

18. When will the 2026 SMFM Late-breaking Abstract submission process begin?

Monday, October 6, 2025: Late-Breaking Abstract Submission Opens

Friday, October 3, 2025: Abstract Withdrawal Deadline

Monday, November 10, 9:00 PM ET: Late-Breaking Abstract Submission Deadline

19. What are the criteria for late-breaking abstract submissions?

Original research that is not completed until after the August 4, 2025, abstract submission deadline for The Pregnancy Meeting™ may be eligible for submission as a late-breaking abstract. Late-breaking abstracts should meet the guidelines for abstracts considered in the general submission and meet the following criteria:

- The research must be new and of sufficient scientific importance to merit special consideration after the standard abstract deadline.
- Abstracts should describe either large clinical studies or high-impact translational research that could not be completed prior to the original deadline.
- Clinical studies must be prospective in design.
- Late-breaking abstracts cannot be a revision of an abstract submitted prior to the original submission deadline.

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For questions related to the Pregnancy Meeting program and/or abstracts process, please email the SMFM Program Development Team at PMprogram@smfm.org.

For general meeting information, e-mail events@smfm.org.