**Abstract Submission Form**

Fill out the form with your abstract information, and submit the form through e-mail at [jspen2025@sunpla-mcv.com](mailto:jspen2025@sunpla-mcv.com)

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| **Travel Grant** | | **I apply for the grant  I do not apply for the grant** | | | | |
| **Date of birth** | | \*If you wish to apply for the Travel Grant, please provide your date of birth.  Please note that applicants must be less than the age of 45 at the time of presentation at the meeting. | | | | |
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| **Presentation Method** | Free paper：Oral (English presentation)　Free paper：Poster (English presentation)  Free paper：Either Oral or Poster (English presentation) |
| **Category** | \*Please select ONE category below.  1 Intensive care 　　　　　　　　　　　　 21 Taste disorder  2 Perioperative nutrition management (including ERAS) 22 Dental and Oral Management  3 Intravenous nutrition　　　　　　　　　　 23 Nutritional Management in Critical Care  4 Nutritional assessment 24 Elderly  5 Body composition analysis 25 Sarcopenia/frailty  6 Community-based home nutrition and home NST 26 Palliative care and nutrition  7 Cancer (gastric/esophageal) 27 Trace elements, vitamins  8 Cancer (hepatobiliary/pancreatic) 28 PEG/PTEG  9 Cancer (other) 29 Enteral nutrition  10 Cancer (chemo-radiation therapy) 30 Decubitus ulcer/wound healing  11 Respiratory disease 31 Dysphagia  12 Cardiovascular disease 32 Water/electrolytes  13 Rehabilitation nutrition 33 Oral Dysfunction  14 Intestinal failure/Short bowel syndrome 34Pediatric  15 Gastrointestinal diseases 35 Diabetes and Obesity  16 Brain, nerve and muscle diseases 36 Vitamins, Trace Elements and Other Supplements  17 Malnutrition/Refeeding syndrome 37 Assignment of dietitians to hospital wards  18 Pediatric severe psychosomatic disorders 38 Nutritional Guidance  19 Renal/urological diseases 39Others  20 NST activities |

＊You may be asked to deliver your presentation in a category that is different from the one you specified when submitting your abstract, depending on the program setup. Thank you for your understanding.

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| **COI** | Please check JSPEN2025 website and be sure to send us documentation of your COI status in advance. |
| **Ethical Considerations** | Please obtain ethical review at your institution before presenting the following research  Ethical review has been conducted and confirmed that there are no problems.  Ethical review is in progress.  This presentation falls under the category of research that does not require ethical review.  \*The research that does not require ethical review can be checked on the JSPEN2025 website. |

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| **Abstract Title** |  |
| **Text**  **\*less than 250 words**  **(figures and tables cannot be registered)** |  |