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| **Deadline: May 1, 2023 | Completed Nominations to** **DoMResearch@nshealth.ca**The Department of Medicine (DoM) Resident Research Excellence Award has a self-nomination process.All DoM residents are eligible to apply.**A resident can only receive this award once in the category of PGY1-3, and/or once in the category of PGY4-6/CIP.**If you wish to be considered for the 2022-23 award, please complete the form below, identifying **your research activities from the July 1, 2022 – June 30, 2023, academic year**. **In addition to the completed form below, please ensure that your submission includes:*** A letter of support from one DoM faculty supervisor. Please ask that this letter be emailed directly to DoMResearch@nshealth.ca by May 1, 2023.
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| **Resident:** |  |  | **PGY Level (identify if CIP):** |  |
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| **Department Member Supervisor(s):** |  |
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| **Summary Tables:** |
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| **Number of Conference Presentations** | DoM Research Day | Local/Regional | National | International |
| Published abstract only |  |  |  |  |
| Oral presentation |  |  |  |  |
| Poster presentation |  |  |  |  |
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| **Number of Grant Applications** | Local/Regional | National | International |
| As principal investigator |  |  |  |
| As co-investigator |  |  |  |
| Other |  |  |  |
| **Number of funded grant applications:** |  |  |  |
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| **Number of Publications (published or accepted)** | Peer Reviewed Article | Non-Peer Reviewed Article | Case Report | Other |
| As first or last author |  |  |  |  |
| As second author |  |  |  |  |
| Other authorship |  |  |  |  |
| **Number of submitted publications: (not yet published or accepted)** |  |  |  |  |
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| **Number of Ethics Submissions:** |  | **Number of Research Awards:** |  |
| **Number of knowledge translation activities:** |  | **Number of other research/scholarly activities:** |  |
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| **Please provide information below. Use as much space as needed to describe your research activities.** |
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| 1. **List presentations at conferences.** *Must identify if the presentation was at a local/regional, national, or international level, and if it was a published abstract, oral, or poster presentation.*
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| 1. **List presentations at DoM Research Days.** *Identify if oral or poster presentation.*
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| 1. **List grant applications.** *Must identify if the application was at the local/regional, national, or international level. Also indicate if it was funded, and your role (PI, co-investigator, etc.).*
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| 1. **List of publications.** *Must identify if peer or non-peer reviewed, if accepted or published, and your role (i.e., lead author, co-author, etc.).*
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| 1. **List of Ethics submissions.** *Must identify if each submission has received ethics approval, pending, etc.*
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| 1. **List of research awards.** *(E.g. DoM Research Day, Killam, etc.)*
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| 1. **Knowledge Translation.** *(Specifically, what activities/identifiers?)*
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| 1. **Other research/scholarly activities.** *(E.g., presented at Grand Rounds, research elective rotations, membership on research review boards or committees, journal or abstract review activities, journal club presentations, chart or literature reviews, etc.)*
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