**Quality Improvement Abstract Title**

**Submitting/Presenting Author (must be a trainee):**

**Primary Email Address:**

**⎕Medical Student**

**⎕Resident/Psychology Intern**

**⎕Fellow**

**Primary Mentor (one name only):**

**Other authors/contributors involved in project:**

**IRB Number (if applicable):**

**Describe role of Submitting/Presenting Trainee in this project (limit 150 words):**

**Problem Statement/Question, Background/Project Intent (Aim Statement), Methods (include PDSA cycles), Results, Conclusions limited to 500 words**

**Problem Statement/Question:**

**Background/Project Intent (Aim Statement):**

**Methods (include PDSA cycles):**

**Results:**

**Conclusions:**