# **Call for Presentations**

# **2025 ITLS International Trauma Conference**

### November 12-15, 2025 Charlotte, North Carolina, USA

Pre-Conf. Workshops – November 12-13, 2025, Business Session – November 13, 2025 & Conference – November, 14-15, 2025

The International Trauma Conference strives to meet the needs of physicians, nurses, EMTs, paramedics, hospital administrators and EMS administrators from around the world. ITLS is seeking speakers to present exciting, timely, thought-provoking, and educationally sound topics that are relevant to emergency and trauma care for international audiences.

Please note that ITLS generally offers faculty the following concessions:

- One night hotel accommodations per lecture given
- Complimentary breakfast and lunch during the conference
- Complimentary conference registration

Please outline your additional requirements in writing at the time of application.

ITLS provides a laptop computer, an LCD projector and laser pointer for faculty to use. All slides must be PowerPoint. Additionally, outline any special setup/space/equipment requirements in writing at the time of application. Last minute requests may not be able to be accommodated.

Presentation packets must be completed thoroughly in order for you to be considered. If you have questions, please contact Mary Taylor at <u>maryt@itrauma.org</u> or 630-967-0700

If you would like to be considered for faculty position at the 2025 International Trauma Conference, please complete and submit a presentation packet to the ITLS office by **Monday, February 3, 2025.** 

Completed faculty proposals should be submitted electronically to maryt@itrauma.org or sent to:

International Trauma Life Support 2001 Butterfield Road Esplanade I – Suite 320 Downers Grove, IL 60515 Attn. Mary Taylor

Thank you for your submission!

You will be notified regarding the ITLS Conference Planning Committee's decision as soon as possible.



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## 2025 Presentation Application Form

Please complete a separate form for each session you propose to present.

Presenter's Name and Cred	Presenter's Name and Credentials:				
Title and Affiliation:	Title and Affiliation:				
Address:					
City:	City: State/Province: Zip:				
Phone Number:()_	Phone Number:() Email Address:				
Session Title:					
A. Type of Presentation (Che	Type of Presentation (Check one):				
General Session	Concurrent Session				
Education (appropriate for EMS educators) System Development Quality Improvement General Information Topic Other, please specify	Clinical Management (appropriate for providers) Research (appropriate for all levels) Management Humor (medically related)				
B. Proposed Length (Time) o	of Session:				

Please note that workshops are eight (8) hours; general and concurrent sessions and are usually 45 minutes to 1 hour. Variations in time allocation may be able to be accommodated. Please allow time for Q & A.

C.	Co-Presenter(s) n	eeded?	YES	NO Last-minute faculty additions may not be accommodated.
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Provide Names and Titles of Co-Presenter(s):

Α.

Β.

### Presentation Description (for use in conference brochure): D.

Use no more than 150 words. NOTE: ITLS staff will edit final descriptions.

### Ε. Session Learning Objectives:

Please provide at least two (2) learning objectives for this topic. The objectives must describe the learner outcomes and must be measurable, that describes an action and a behavior which will occur.

#### F. **Experience and Qualifications:**

Please attach a copy of following documents with your (and/or co-presenters) application:

- A condensed curriculum vitae (CV) (2 pages only) or resume. •
- A biographical sketch of your experience and qualifications.
- A list of three (3) references that can attest to your presentation abilities.
- A list of similar conferences at which you have presented.



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