

Call for Abstracts

**International Neuropsychological Society | 54th Annual North American Meeting
Philadelphia, Pennsylvania, USA | February 4-7, 2026**

INS President: Natalia Ojeda, PhD
Program Chairs: Ruchika Prakash, PhD & David Schretlen, PhD
Continuing Education Chair: Benjamin Hampstead, PhD

Submissions Due by August 29th, 2025

Message from Drs. Prakash and Schretlen, 2026 INS Program Committee Co-Chairs:

The brain remains the epicenter of human behavior. Neuropsychology has played a central role in advancing our understanding of the complex relationships between brain structure, function, and emergent behavior, particularly in the context of how disruptions of brain systems lead to neurocognitive symptoms. As the field evolves, neuropsychology is increasingly shaped by the rise of big data, rapid technological advancements in assessment and rehabilitation, and a growing emphasis on community-engaged research and clinical practice. Innovations in paper-and-pencil assessments, computerized testing, virtual reality, ecological momentary assessment, neuroimaging and non-invasive brain stimulation are expanding the horizons of research and practice. And these horizons must extend to the development of appropriate and accurate neuropsychological methods to meet the needs of children and adults with neurobehavioral and cognitive disorders around the world if we are to remain a truly international society. For the 54th Annual Meeting of the International Neuropsychological Society in Philadelphia, we were inspired by the many ways in which our community continues to push the boundaries of knowledge to study the brain-behavior interface, leading to the theme of this conference: **Neuropsychology in the Age of Innovation.**

We encourage abstract submissions to embrace broader conceptualizations of innovation. This could include novel methods for assessing cognitive and functional outcomes, such as the use of within-person test distributions to capture cognitive variability as a biomarker for risk, or the use of ecological momentary assessment and other indirect, unobtrusive measures of cognitive behavior. With the frequent use of neuroimaging and neuromodulation techniques by neuropsychologists, we encourage submissions that incorporate these methodologies in unique ways to advance our understanding of critical, specific brain-behavior relationships.

This past year's annual meeting in New Orleans also highlighted the innovative and creative methods employed by neuropsychologists to study and address disparities within our field. Continuing the much-needed efforts of last year's conference, we also encourage abstract submissions that focus on novel ways of incorporating social and structural determinants of health, as well as community involvement in the design and validation of assessment and intervention efforts. Abstract submissions that focus on conceptual and methodological advancements in cross-cultural neuropsychology are particularly encouraged.

This year's meeting will be held in the historic city of Philadelphia—one of the oldest cities in the United States. Our conference, focused on innovation, aims to highlight the future of neuropsychological science and practice while honoring the pioneering contributions of our predecessors.

Additional highlights to come! Stay tuned to the INS website for meeting updates.

SIG Highlights: The INS Special Interest Groups (SIGs) will select and highlight submissions related to their interest areas at Philadelphia 2026. To be considered, please indicate your preference in the submission system by selecting the relevant SIG's name.

SUBMISSION GUIDELINES

Submitting Author Requirements:

- INS membership is not required to submit. INS members receive discounts on registration and CE fees (if 2026 dues are paid at the time of registration).
- **Accepted abstracts must be presented by the designated presenting author or their representative.** The submitting author must formally communicate any presenter changes to abstracts@the-ins.org.
- All presenters must register and pay the meeting registration fee (there is an additional, separate fee for optional CE credits). *All authors are personally responsible for the arrangement and payment of their personal meeting registration, accommodations, travel, and other meeting-related expenses.*
- You must indicate the presenter's student status for awards consideration.
- Submitting authors must agree to the **INS attendee code of conduct**.
- **Please Note:** Abstract notices are sent ONLY to the submitting author. It is their responsibility to share any important notices with co-authors.

Schedule Considerations

By submitting, authors commit to be available to present on the date and time they are assigned.

Accepted abstracts may be scheduled at any time during the four-day meeting at the discretion of the Program Chairs.

There is no limit on the number of submissions, but authors are asked to use discretion as submitting multiple abstracts is likely to create scheduling problems.

Overall Submission Guidelines:

- **The submission deadline is Friday August 29th, 2025 at exactly 11:59pm U.S. Eastern Time (-0400 UTC).** All abstracts and symposia must be fully submitted by the deadline to be considered. **No late submissions will be accepted.** Any submissions still in draft status beyond this deadline will not be considered.
- **SUBMIT ONLINE:**
 - **Submit abstracts** at bit.ly/3FBcrAp—including paper or poster abstracts, and symposium abstracts (which must be linked to an overarching symposium proposal).
 - **Submit symposia proposals** separately at bit.ly/4I7s8OP. The symposium proposal must be submitted before your participating symposium abstracts can be attached to it.
- Late breaking abstracts will be accepted, from approximately September 12 through October 15, 2025. **Late breaking submissions will only be considered as posters, which, if accepted, will be presented during a designated late breaking poster session on Saturday February 7, 2026. Refer to the call for late breaking abstract submissions, which will be published later.**
- **The body of submitted abstracts may not exceed 500 words.** Submissions must be organized under the following four headings: *Objective, Participants and Methods, Results, and Conclusions*.
- **Submissions will be published exactly as received. Please proofread carefully before submitting.** Once the deadline has passed, we may decline to accommodate requests to correct typos or other errors made during submission.
- **Abstracts may be edited after they have been submitted, but ONLY prior to the submission deadline, and only by the submitting author within the submission system.** If an abstract is returned to draft for editing purposes, it **MUST** be fully re-submitted by the submission deadline to be considered.
- **Once the submission deadline has passed, only minimal changes to the formal abstract may be accommodated (including author changes or other crucial content changes, but not to correct typos or simple author-entry errors).** Author changes AFTER the posted submission deadline must be emailed to abstracts@the-ins.org for approval and processing. INS reserves the right to decline to accommodate corrections.
- Submitting authors will be notified of acceptance decisions by mid-October, and schedule assignments will be sent by mid-November.
- For questions regarding abstract submission, please contact abstracts@the-ins.org.

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Submit Symposia Proposals: bit.ly/4I7s8OP

AVAILABLE PRESENTATION FORMATS

Authors may submit **individual abstracts** for *poster or paper* consideration, or a complete **symposium proposal** consisting of an overarching proposal with 4-5 linked abstracts.

1. **Poster sessions:** Posters are an effective and popular method for communication of scientific information, providing a more intimate forum for informal discussion than is permitted by regular platform presentations. Poster sessions are typically arranged according to submission category at the discretion of the Program Chairs. Poster presenters are expected to stay with their poster for the duration of the session (typically from 60-75 minutes) to discuss their abstract and answer questions.
2. **Paper sessions:** Paper sessions are topical oral sessions, arranged at the discretion of the Program Chairs. Five to six outstanding abstracts are typically selected for each paper session. Each presenter is given approximately 14-18 minutes (depending on the session) for oral presentation and audience discussion. A moderator will introduce speakers, encourage discussion, and keep the session running on time through strict adherence to stated time limits.
3. **Symposia sessions:** Symposia are topical platform sessions dealing with specific issues in clinical neuropsychology. **Each symposium must be pre-organized by a single chair and submitted as an integrated session proposal (consisting of a summary/overview and 4-5 participating abstracts).** **Symposium proposals that do not meet these criteria will not be considered. The symposium chair is SOLELY responsible for ensuring their symposium proposal is complete and submitted as described.**
 - A **complete symposium proposal** consists of an overview *Symposium Summary*, plus four to five *Symposium Abstracts* (which may be submitted by the symposium chair or by the chair's selected symposium participants). Symposium abstracts should be closely linked and integrated.
 - Symposia are typically allotted between 75-90 minutes. Each session should be divided between the participating abstracts and should include time for a review led by the symposium organizer or a discussant (which should correspond to the **symposium summary**), as well as a dedicated question and answer period. In the case of a symposium that expresses divergent views on a controversial topic, two longer debate-style talks may also be appropriate.

Review Process & Abstract Scoring Criteria

- All submissions will be peer reviewed by several members of the program committee, who are selected according to their expertise in that category. The program committee chairs will make the final decision on all submissions.
- **Abstracts will be rated on scientific merit, relevance, breadth of audience interest, and quality—including compliance with posted guidelines.** Authors should proofread submissions and check for proper English usage prior to finalizing their submission(s).
- Submitting authors must adhere to the following guidelines:
 - All abstracts must consist of original work. Abstracts submitted to other meetings or that have been previously published should not be submitted and will not be considered.
 - All research, results, and conclusions must be final at the time of submission. Abstracts that are promissory in nature will not be considered.
 - Case reports may be submitted, but should clearly describe the uniqueness of the case and how it addresses critical knowledge gaps in the field.
- Submitting authors will be notified of acceptance decisions by mid-October, and schedule assignments will be sent by mid-November.
- Abstracts that are accepted and presented at the meeting will be published after the meeting in a supplemental issue of the *Journal of the International Neuropsychological Society: JINS*.

Notification of acceptance will be made by October 31, 2025
Questions regarding abstract submission? Contact abstracts@the-ins.org

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SUBMISSION CATEGORIES

Each abstract must be submitted under one of the categories listed below. Authors must first select their [Overall Category](#), as well as the [Submission Topic](#) that most closely describes their submission.

Each abstract must also select at least one keyword (or up to three).

Adult Clinical Neuropsychology

- Acquired Brain Injury (e.g., TBI, concussion, stroke, tumor)
- Adaptive Functioning (e.g., driving, daily living activities, health literacy)
- Alcohol and Other Substance Use Disorders
- Assessment, Psychometrics, and Intra-Individual Test Performance
- Disorders of Consciousness (e.g., delirium, coma)
- Drug/Toxin/Metabolism-Related Cognitive Impairment (Non-addiction)
- Epilepsy
- Forensic - Disability Determination, Competencies, Criminality, and Other
- Forensic - Performance and Symptom Validity
- Functional Neurological and Conversion Disorders
- Neurobehavioral syndromes (e.g., apathy, disinhibition, impaired judgement)
- Nonpsychotic Psychiatric Disorders (e.g., mood, anxiety, impulse control, OCS, etc.)
- Psychotic Disorders (e.g., schizophrenia, bipolar psychosis, delusional)
- Sensory/Perceptual Disorders (e.g., anosmia, peripheral neuropathy, vision/hearing loss)

Aging and Neurodegenerative Conditions

- Alzheimer's Disease/Dementia
- Demyelinating, Autoimmune, and Inflammatory Diseases (e.g., MS, ALS, Guillain Barre)
- Frontotemporal, Vascular, Lewy Body, and Other Dementias
- Mild Cognitive Impairment and Other Risk Factors for Dementia
- Movement Disorders (e.g., Parkinson's, Huntington's, dystonia, tremor)
- Typical Aging and Cognitive Decline

Brain Health, Equity, and Global Neuropsychology

- Brain Health and Positive Neuropsychology
- Cross-Cultural Neuropsychology and Global Approaches
- Health Disparities and Equity in Brain Health
- Public Health and Service Evaluation

Cognitive and Affective Neuroscience

- Cerebral Lateralization / Callosal Studies / Behavioral Neurology
- Executive Functions and Frontal Lobe Processes
- Language and Speech / Aphasia
- Memory and Amnesia
- Social, Emotional, and Affective Processes
- Visuospatial Processing, Neglect, and Agnosia

Intervention and Rehabilitation

- Clinical Service Delivery and Models of Care
- Cognitive Interventions
- Lifestyle Interventions
- Psychosocial and Behavioral Interventions
- Technology-Assisted and Digital Interventions

Medical, Infectious, and Genetic Conditions

- Anoxia / Hypoxia
- Genetic, Toxic, and Metabolic Disorders
- Infectious Disease (e.g., HIV, COVID, Hepatitis)
- Sleep and Circadian Disorders
- Systemic Conditions (e.g., diabetes, cancer, pulmonary, cardiovascular)

Neurodevelopmental Disorders and Pediatric Neuropsychology

- ADHD and Attentional Disorders
- Autism, Intellectual, Speech/Language, and Other Developmental Disorders
- Family Environment, Pediatric Health Disparities, and Pediatric Cross-Cultural Considerations
- Learning Disabilities, Academic Skills, and Giftedness
- Pediatric Assessment and Psychometrics
- Pediatric Neurological and Acquired Brain Injuries (e.g., TBI, vascular injury, epilepsy)
- Pediatric Psychosocial, Emotional, and Psychiatric Conditions
- Pediatric Systemic and Medical Conditions (e.g., cancer, infections, genetic disorders)
- Prenatal/Congenital and Perinatal Factors and Associated Conditions

Other

- For submissions that do not clearly fit into another category

Professional Development and Training

- Career Development and Mentorship
- Education and Training Programs
- Innovative Teaching and Learning Strategies

Research Methods and Emerging Technologies

- General Methodology, Psychometrics, and Assessment
- Neuroimaging: MRI/MRA (structure & function), PET, fNIRS
- Neuromodulation and Neurostimulation (e.g., DBS, TMS, tDCS)
- Neurophysiology: EEG / ERP / MEG
- Teleneuropsychology

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