**GIORNATA DELLA RICERCA - II EDIZIONE**

**LINK CAMPUS UNIVERSITY**

**Via del Casale di San Pio V, 44**

**00165 Roma**

 **ABSTRACT**

**TITLE**

**​**

**AUTHORS**

**AFFILIATIONS**

**CORRESPONDING AUTHOR**

**INTRODUCTION**

**MATERIALS AND METHODS**

**RESULTS**

**CONCLUSIONS**

**TYPE OF PRESENTATION (SELECT PREFERRED MODE)**

* + Oral Presentation (10+5 minutes)
	+ Pitch Presentations (5+2 minutes)
	+ Poster

**SPEAKER**

NUMBER OF WORDS (EXCLUDING TITLE, AUTHORS, AND AFFILIATIONS): **300**

* *I authorize the dissemination and publication of my contribution (title and content of the abstract), as well as my identifying information (name, surname, and affiliated institution), within the context of the activities related to the Second Edition of the Biomedical and Health Research Day, including possible publication on websites, informational materials, and event proceedings.*

***DEADLINE 8 JUNE 2025***

***PLEASE SEND THE ABSTRACT TO:****giornatadellaricerca@unilink.it*