Suggested Outline for Synthesis Workshop Overview Reports/Papers

Advancing our Understanding of Oil Spills and the Gulf of Mexico

1. The Known (Status of core area prior to Deepwater Horizon)
   - Historical perspective and background - summarize the state of science prior to 2010

2. From Unknown to Known (Evolution of core area since Deepwater Horizon)
   - What were the major questions?
   - Approaches taken to answering those questions (including new tools and opportunities)
   - Findings (including major discoveries, surprises, new research directions)
   - Current limits to knowledge

3. The Currently Unknown (Where science needs to go from here)
   - Remaining questions (what are the key questions that remain unanswered)
   - New questions (emerging issues that will require research beyond 2020)
   - Gaps - what have we missed, what needs to be done next to advance the field?

4. What We Have Learned (How we can best apply new knowledge)
   - Key lessons- how this research should inform and influence the operational response to future oil spills (response, management of coastal areas, management of fisheries, public health, etc.)
   - Additional ramifications (scientific, operational response, governmental, policy, health, political, others?)

5. What next? (and Who & How?)
   - Novel ideas to move the core area forward (dream cruises or technology, etc.)
   - Blueprint for the future (beyond 2020)

6. Conclusions & Recommendations (Major findings and major gaps, how to move forward)
   - Including practical suggestions on how knowledge/understanding might be moved forward from here.

General Guidelines

Length: 20-30 pages

Image/photos/Graphs/Charts/Tables/Maps: ~ 5 to 15

Citations: A full list of literature cited must be included and does not count against the page recommendations.

   Literature Review – If possible include reference to a published literature review of what science advances have been published that advance our understanding of oil spills in general, and in the Gulf of Mexico in particular.