

Medical Staff Services • Continuing Medical Education 2139 Auburn Avenue • Cincinnati, OH 45219 PHONE (513) 585-2997 • FAX (513) 585-3293

Dear CME Planner,

Attached is a copy of The Christ Hospital Health Network (TCHHN) CME planning packet. The following documents must be turned into the CME Coordinator by their associated deadlines.

- 1. CME Activity Planning Form (30 days prior) This form will inform the CME Committee of the following:
 - > Needs Assessment What the existing professional practice gap is and how it was identified.
 - Educational Learning Objectives What knowledge, skill, or competencies the learner will gain from attending the CME Activity that will assist in closing the identified professional practice gap.
 - Whether or not the CME activity is intended to change physician performance and/or patient outcomes, and how these changes will be measured.
- TCHHN CME Financial Disclosure Form & Conflict Resolution Form (21 days prior) The Financial Disclosure form needs to be completed by the Physician Planner, each presenter, and all other individuals contributing to the educational content. If an individual has financial relationships to disclose, he/she is required to also complete the Conflict Resolution Form. Please also include a CV for each presenter if not credentialed or employed at TCHHN.
- 3. **Commercial Support/Exhibitor Agreement & Budget– (14 days prior)** If there will be commercial support for this program, a proposed budget must be submitted. Additionally the appropriate agreement(s) must be completed between TCHHN and the commercial supporter and turned into the CME Coordinator.
 - TCHHN Letter of Agreement for Commercial Support should be used when unrestricted educational grants are being received.
 - > TCHHN Letter of Agreement for Exhibits should be used when fees for display space are being received.
- Handouts/Flyers (5 days prior) All materials utilized for marketing or education must to be submitted and reviewed for meeting with the ACCME Essential areas, elements, policies and standards. Please refer to the guidelines listed on the Marketing Requirements document.
- 5. **Presentation Materials (1 day prior)** Presentation slides or case lists must also be submitted and reviewed for meeting with the ACCME Essential areas, elements, policies and standards. The presenter should respect the guidelines listed in the Presentation Requirements document.
- 6. Attendance Records & Evaluations (2 weeks after) In order for participants to receive AMA PRA Category 1 Credit[™], he/she must sign in and complete an evaluation form. Please use the sign-in sheet and evaluation templates provided. Please make sure to insert the Activity's Title, Presenter, Date, and Objectives where applicable. These documents should be made available during the activity and then turned in no later than 2 weeks afterwards.

Please contact me if there any questions or concerns. Moreover, I am happy to assist the planner/speaker complete the CME Activity Planning Form over the phone or in person.

Sincerely, Madeline Underhill CME Coordinator, Medical Staff Services The Christ Hospital Health Network 2139 Auburn Ave., Cincinnati, OH, 45219 513-585-2997 Office 513-585-3293 Fax Madeline.Underhill@TheChristHospital.com