**CME CHECKLIST**

**Course:**

**Dates:**       **Location:**

**Coordinator:**

**Telephone:**  **Email:**

**CME APPROVAL CHECKLIST (9-12 months prior to activity)**

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|[ ]  Completed **CME Application**-including at least 3 cited references no older than 3 years ago in CloudCME  |
|[ ]  Planning **Agenda** (Including topics, objectives and speakers with time frames) |
|[ ]  Proposed **Budget** (include anticipated revenue and expenses) |
|[ ]  **Disclosure of Relationships** form for the Course Director(s) and Planning Committee |
|[ ]  **Resolution of Conflict of Interest** form for Course Director(s) and Planning Committee (those who indicated relevant financial relationships) |
|[ ]  CME Application **fee $1,250** – Submit Journal entry via Workday crediting account **397620. Email screenshot.** |

**CME PRE-EVENT CHECKLIST (2 week prior to activity)**

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|[ ]  **Brochure, flyer and/or other course materials** *(Use* ***Publicity Guidelines as a checklist****)*  |
|[ ]  **Disclosure of Relationships form** for each scheduled speaker   |
|[ ]  **Resolution of Conflict of Interest Form** for speakers that indicated relevant financial relationships |
|[ ]  **Speaker Presentations** must be reviewed a minimum of 2 weeks prior to the activity date |
|[ ]  **Syllabus/Handouts** must be reviewed and approved by CME prior to printing. ***Refer to CME Syllabus Guidelines*** and must include the following: * Accreditation and Credit Designation statement (refer to your CME approval letter for ACCME-approved wording)
* Disclosure Summary
* Acknowledgement of commercial support, if applicable *(Listing of all educational Grants received is required; Sponsorships are not considered grants but may be acknowledged along with any exhibits, both of which must be listed on a separate page from grants. No logos allowed.)*
 |
|[ ]  **Letter(s) of Agreement** for Commercial Support *(if applicable)* – Grants  |

**IMPORTANT NOTES/APPROVALS NEEDED**

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|[ ]  **All promotional materials** must be approved by the Division of CME prior to any printing and/or online posting. |
|[ ]  **Letter of Agreements** must be signed By Both CME Director And Commercial Supporter Prior To The Course. |
|[ ]  **Pre-event late fee** of $250 will be applied for any pending documentation not received within 2 weeks from conference start date. |
|[ ]  **Evaluation form**: An *online evaluation* form must be distributed to all attendees (no paper evaluations).  |
|  | * Evaluation must be reviewed and approved by your assigned CME Manager prior to distribution to attendees.
* Once approved by CME, the attendees will have access through the *CloudCME* portal or, the coordinators may email the evaluation to participants post-conference.
* Evaluation Summary: Provide a summary of the evaluation data 30 days post-conference
* \*\*Additional Fee: Should you add additional questions to the evaluation template, there will be an administrative fee of $500 for a maximum of 10 additional questions.
 |
|[ ]  **Outcomes Survey:** Two (2) months after the course, it is the course coordinator’s responsibility to email an outcomes survey to all attendees to measure if the participant made any changes to their practice. |

* Do not make any edits/changes to the outcomes survey template
* Email the outcomes survey to all attendees via the CloudCME portal 2 months after course’s end date
* Evaluation Summary: Provide a summary of the outcomes survey data 30 days after it is sent out

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|[ ]  When advertising this activity, please use the statements included in the CME approval letter. Please send us the conference URL link to review & approve the CME Accreditation section on the course’s website.  |

**Once the checklist items are completed, email the Pre-Event Checklist to your assigned CME manager below:**

* Diana Welch: dwelch@med.miami.edu
* Ana Silvera: ajs179@med.miami.edu