



***U.S. AIR FORCE
CONTINUING MEDICAL
EDUCATION (CME) GUIDEBOOK***



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LINKS

ACCME's Accreditation Criteria (Link):

<http://accme.org/accreditation-rules/accreditation-criteria>

ACCME's Standards of Commercial Support (Link):

<http://accme.org/accreditation-rules/standards-for-commercial-support>

AMA's Code of Medical Ethics:

<https://www.ama-assn.org/delivering-care/ethics/code-medical-ethics-overview>

AMA's Gifts to Physicians from Industry:

<https://www.ama-assn.org/delivering-care/ethics/gifts-physicians-industry>

AMA PRA Recognitions Award Handbook, 2017 (Link):

https://www.ama-assn.org/sites/ama-assn.org/files/corp/media-browser/public/cme/prabooklet_0.pdf

AF CNE site:

<https://education.mods.army.mil/afncne/>

AIR FORCE CME MISSION STATEMENT

To provide Air Force healthcare professionals opportunities to expand their professional competence, readiness skills and understanding of medicine through participation in accredited CME activities.

The CME program has been created to facilitate the continuous learning process that ensures healthcare professionals' readiness to practice in a myriad of challenging environments around the world, some potentially dangerous. All healthcare professionals within the United States Department of Defense (DoD) are the customers of the CME program and must be prepared to meet the needs of the military fighting forces, as well as family members and retirees who require care.

The CME office is responsible for maintaining ACCME accreditation, as well as educating and assisting the local CME planners at Air Force medical treatment facilities and other agencies in the process of developing, tracking, and planning for educational courses, in support of the overall Air Force Medical Service goal to maintain and enhance high-quality health care. Furthermore, the CME office approves educational activities conducted by local CME planners throughout the Air Force. These planners develop training that encompasses the entire spectrum of Air Force medicine, ranging from combat casualty care to administration, leadership and environmental health issues, with updates on technology, managed care and other medical issues. Activities developed and approved by the Air Force include lecture series, grand rounds, seminars, symposiums, advanced life support courses, enduring materials and internet based activities. Finally, the CME office has developed a comprehensive framework to evaluate each educational activity to enable future improvement, and to abide by the ACCME Essential Areas and Elements requiring documented changes in knowledge, competence, performance or patient outcomes.

CME PURPOSE

The purpose of the AF CME Program is to provide Air Force healthcare professionals opportunities to expand their professional competence, readiness skills and understanding of medicine through participation in accredited CME activities.

Content Areas: These planners along with their MTF's develop training that encompasses the entire spectrum of Air Force medicine, ranging from combat casualty care to administration, leadership and environmental health issues, with updates on technology, managed care and other medical issues.

Target Audience: All healthcare professionals within the United States Department of Defense (DoD) are the customers of the CME program and must be prepared to meet the needs of the military fighting forces, as well as family members and retirees who require care.

Types of activities: Activities developed and approved by the Air Force include lecture series, grand rounds, seminars, symposiums, advanced life support courses, enduring materials and internet based activities.

Expected results of the program, articulated in terms of changes in competence, performance, or patient outcomes.

The CME program has been created to facilitate the continuous learning process that ensures Air Force Healthcare professionals readiness to practice in a myriad of challenging environments around the world, some potentially dangerous.

The CME office has developed a comprehensive framework to evaluate each educational activity to enable future improvement, and to abide by the ACCME Essential Areas and Elements requiring documented changes in physician knowledge, competence, and performance or patient outcomes.

CME WEB SITE AND FUNCTIONAL USERS

The Continuing Medical Education Program Management System's Web Site is dedicated to supporting the Air Force's CME program by automating the retrieval and querying activity information. The web site will provide physicians with a list activities created by the individual Air Force facilities. The CME website will contain the Air Force's CME Mission Statement, objectives, policies and regulatory guidance. The web site will also provide administrative and reporting support for Course Directors and Planners of CME activities. Below lists different user types and roles in CME.

Air Force CME Director: Accredited CME provider by the Accreditation Council on Continuing Medical Education. The Air Force CME Office administers the CME Program and is the proponent for CME policies and procedures. Has responsibility for maintaining the accreditation and functionality of the CME website. When the CME Director leaves the position, a new CME Director may be appointed by the Director of Medical Education or by the leadership.

Course Director: Clinicians who are subject matter experts and are responsible for the content and execution of a CME activity. This includes building the agenda, identifying presenters and committee members, conducting a gap analysis, objectives, evaluations and outcomes and providing guidance to the CME Planner and its learners. When the Course Director leaves the position, a new Course Director will be appointed by the predecessor or by the leadership.

CME Planners: Individuals designated as planners will have access to the CME Planners area of the CME Web Site. The planning area includes all application types and planners will be able to choose which application suits the activity being planned. Planners are responsible for completing the CME application in its entirety and will engage the Course Director who is the subject matter expert for assistance in any part of the process. When CME Planner leaves the position, a new CME Planner may be appointed by the predecessor or by the leadership.

Participants: The learners of a CME activity. All individuals accessing the CME Web Site will have the ability to view a list of the current activities being offered. This list will show the facility providing the activity, its location, the dates and the credits awarded. Detailed information for an activity will be available when the participant selects a specific activity. Information displayed will include the activity objectives and faculty presenters. All attendees are required to register on the CME website to attend a CME activity.

System Requirements and Access: All users must create a profile. This one-time process will produce a logon ID and password which is needed to access the CME website. Common Access Card (CAC) will be enabled for those who have a CAC card and who possess an @mail.mil email address. Users must have internet access with a browser MS Explorer 8.0 or better.

CERTIFICATION OF CME ACTIVITIES

The U.S. Air Force is accredited by the Accreditation Council for Continuing Medical Education (ACCME) as a provider of continuing medical education (CME) for physicians. As such, there are certain standards and rules by which the Air Force Medical Service must operate.

The CME Website: Both the ACCME and the U.S. Air Force require that a standard planning process be utilized in the development of a CME activity. This standardized process assures that resources spent on educational activities meet the identified needs and gaps of participants and experts in the field. The key to planning a CME activity is to *document* the linkage between the identified gap(s), the development of overall activity learning objectives, the faculty's development of their sub-objectives, and the overall educational design of the activity. As such, the Army/Air Force MODS CME website will be used as the official web-based application system for certifying all CME activities within the Air Force.

General Information/Definition of CME: Activities which may qualify for certification of CME credit should “serve to maintain, develop or increase knowledge, skills, and professional performance and relationships that a physician uses to provide services for patients, the public, or the profession. The content of CME is the body of knowledge and skills generally recognized and accepted by the profession as within the basic medical sciences, the discipline of clinical medicine and the provision of healthcare to the public.”

This broad definition of CME recognizes that all continuing educational activities which assist physicians in carrying out their professional responsibilities more effectively and efficiently are CME. For example, a course in management would be appropriate CME for physicians responsible for managing a health care facility; a course in educational methodology would be appropriate CME for physicians teaching in a medical school; a course in practice management would be appropriate for practitioners interested in providing better services to patients. Documentation for all CME activity planning is crucial. Pay special attention to documentation for the following:

- Identifying general, focused or other **need/gaps** for the activity
- Development of **objectives** based on the identified needs/gaps
- Faculty guidance - conveying the identified need and learning objectives to the faculty for appropriate development of their presentation.

CME Certification Procedure: In order for the Air Force to designate an activity for CME credit, the following procedures must be employed and documented on the web:

- Identify gap analysis or need through one or more of the following mechanisms:
- Survey of target audience
- Self-assessment tests
- Higher Headquarters Directive
- Evaluation data from previous, similar activities

- Patient care audit/QA reports
- Mortality/morbidity statistics
- Peer-reviewed abstracts
- Faculty perception
- Discussion with/consensus of experts
- Interviews with practitioners
- Review of literature and trends in the profession
- Suggestions from past program participants
- Special advisory committee recommendations
- Identify target audience.
- Maintain complete documentation of activity planning.
- Develop activity learning objectives based on identified needs.
- Develop agenda and method of instruction designed to meet activity objectives.
- Identify faculty competent in the subject matter and qualified by experience, training and/or preparation to the tasks and methods of delivery.
- Identify committee competent to control and/or influence the contents of the activity.
- Develop a post-course/activity evaluation to assess improvement of competence, change in performance and/or patient outcomes.

Awarding Credits: The Credit Designation Statement is a required item in any activity's brochure or other promotional materials, as well as the course syllabus or handout materials. Refer to the Credit Designation section for the Credit Designation Statement.

The Credit Designation Statement must be written precisely as stated without changing any capitalization or making creative additions whatsoever. The “*AMA PRA Category 1 Credit(s)*”TM phrase is a trademark symbol of the American Medical Association. As such, when referencing CME in CME materials and correspondence, the entire italicized phrase must be used.

a. Why do you need to designate credit? Because the physician needs to know how many credits he or she will earn by participating in the activity, and because the ability to attain CME credits is a leading draw to get the physician to enroll in the activity.

b. What exactly are the credits that are given to physicians? CME credits go toward the American Medical Association's Physician's Recognition Award (AMA/PRA). The AMA/PRA Category 1 creditsTM is awarded to a physician who submits an application for the award with proof of participation. ACCME providers are accredited by the Accreditation Council for Continuing Medical Education (ACCME) to award AMA/PRA credits.

c. How do you determine the amount of credit to designate? The Air Force CME staff are the only personnel that can officially designate credit. Credits are determined by the amount of time for the educational presentations, not including breaks, social activities or other agenda items where there is no actual content being discussed. One hour or 60 instructional minutes

will be given one credit. Credits may be rounded up or down in quarter increments. A 20 minute presentation is rounded down to .25 credits and a 25 minute presentation is rounded up to .50 credits.

Approval: Only the Air Force CME Director or its designee may approve CME activities.

Retroactive approval is prohibited.

All activities are directly approved for credit by the Air Force CME Office.

Commercial Support: Effective April 2018, The US Air Force disestablished commercial support in its entirety. Commercial support are in the form of grants, gifts, exhibit incomes, or any other support that require agreements involving the US Air Force and a commercial supporter and/or monetary exchange directly or indirectly through other means. Commands may at their option obtain support through another CME provider and will be subject to the rules and policies of the CME Provider regarding commercial support.

Development of Activity Announcements: In order to comply with ACCME Accreditation Requirements, activity announcements (including brochures, flyers, e-mail announcements, etc.) MUST include the following and must be consistent with the contents of the CME application:

- Activity title
- Date and time of the presentation
- Statement of Need/Gap Analysis
- Specific learning objectives
- Nature of the target audience
- Faculty and their credentials relative to the CME activity (use mini-bio format)
- Post activity evaluation form
- Outcomes Survey, when applicable
- Acknowledgment that the activity does not receive any commercial support. “This activity does not receive any commercial support.”
- The Air Force’s accreditation statement, and credit designation statements.
- For Enduring Materials/Internet Enduring Activities – See section on Enduring Materials for specific guidance.

Regardless of activity type, all proposed promotional materials, course syllabus/handout and general information pages must be approved in advance by the Air Force CME Office prior to dissemination.

Faculty Disclosure Form: All faculties must complete the “U.S. Air Force Faculty Disclosure Statement and Agreement for CME Faculty, Authors, and Members of Planning Committees” form. Activity planners must generate a letter which includes faculty requirements to submit a signed faculty disclosure form, a mini bio, and presentation information.

Activity Participant On-Site Registration, Verification of Participation, CME Certificate and Evaluation Mechanisms

- On-site staff must obtain verification of attendance for each day of an educational activity for which credit is to be certified to verify physician participation in that session. CME Planners must ensure each participant is registered on the CME website and rosters must be retained for six years from the date of activity.
- Certificates will be provided upon completion of the course evaluation and request for credit form. See the section on “CME Certificates” for more information.
- Post activity evaluation questionnaire will be constructed during the pre-application phase of the application.

Conclusion of CME Activities: At the conclusion of an activity, learners must evaluate the course within 45 days post-course. The planner and/or course director must complete the After Action Report (AAR) which is due within 60 days post course. The following areas of the CME application must be completed to close out the process:

Final attendance roster (with total sessions attended for RSS activities).

- Report of income for the activity (budget worksheet).
- Assignment of credit hours.
- Completion of planning notes. All planning materials and notes regarding the activity and other aspects of activity added to the planning log.
- Evaluation and summary of evaluation responses.
- Course director’s evaluation of the activity.
- Completion of the Outcomes Survey, when the designation of the activity is to change performance and/or change patient outcomes.
- Upload supporting documents for performance in practice (under Phase 2, Manage Documents)

CONTENT OF CME

Introduction: In accordance with the Air Force CME Mission Statement, CME offered is to provide Air Force healthcare professionals opportunities to expand their professional competence, readiness skills and understanding of medicine through participation in accredited CME activities.

The Origin of CME Content: The initiation of CME activities occurs at multiple points of entry into the Air Force system. Those points of entry range from directives from DoD initiatives and/or the Surgeon General to the needs of Air Force physicians at local Military Treatment Facilities (MTF) throughout the worldwide Air Force health care system.

Through interaction with the Air Force automated CME System, Air Force CME has mandated a traditional gap analysis process based on isolating learner problems in practice based on a comparison of current versus best practices. Once learner gaps are identified, they become the basis for the development of learning objectives, which in turn inform the content of CME interventions certified by the Air Force Medical Service (AFMS).

Identification of Intended Educational Outcomes: For each identified professional practice gap, CME planners make a determination as to the focus of education and its related intended outcomes. Options include an improvement in (1) learner competence, and/or 2) learner performance-in-practice, and/or (3) patient outcomes. Often it is a combination of all three possible outcomes.

The choice of educational outcomes measurement (EOM) tools relates directly to the intended outcome linked to each identified gap that are consistent with the metrics contained in the CME Mission Statement.

Identification of Barriers: Planners must give careful consideration to barriers or other factors outside of their control that may impede the results that are desired for the CME activity they are planning. Once identified, planners must also develop strategies to remove or address those identified factors/barriers in the content of the CME activity.

Emphasis is placed on strategies for learners to adopt that can address or overcome the barriers.

Preparation of Learning Objectives: As a final step in the development of CME content, CME planners will write learning objectives that reflect best practices from the gap analysis, the results of the analysis of scope of practice, and the type of intended results stipulated in the planning process.

Learning objectives are written in terms of competence, performance, and/or patient outcomes, and are measurable.

Educational Outcomes Measurements (EOM): Every CME intervention will include one or more outcomes measurements that link to the intended outcomes as indicated above. The choice of an EOM tool depends on whether the intervention was designed to improve competence, and/or performance, and/or patient outcomes.

Independence

The AFMS and its system of hospitals are solely responsible for the development of all aspects of the planning of CME including:

- The gap analysis that is the foundation for the activity
- Designation of intended outcomes
- Development of learning objectives
- Selection of educational methods and formats
- Selection of faculty, other teachers and planners
- Outcomes measurement

Under no circumstances will Air Force CME planners consult with a commercial interest to validate the content of the activity, suggest faculty resources, or to distribute the content of the CME activity. Furthermore, planners or faculty for CME activities will not be employees of relevant commercial interests unless the topics of planning or the presentations are not related in any way to the products of the employer. This rule also applies when the spouse or significant other of the planner or presenter is employed by a relevant commercial interest.

With regard to referencing trade names, as a general rule, CME activities do not reference trade-named products in its educational materials. Should a situation arise in which the use of a trade name is warranted because learners would not recognize the generic or scientific name of the product referenced in the context of treatment discussions, then all products mentioned should reference their trade names so as not to distinguish the products of a company supporting the activity.

All certified content will observe the following policies:

- The content of CME activities does not promote the proprietary interests of any commercial interest.
- CME activities will provide a balanced view of therapeutic options and conforms to the generally accepted standards of experimental design, data collection and analysis.
- Recommendations involving clinical medicine in a CME activity will be based on evidence that is accepted within the profession of medicine as adequate justification for their indications and contraindications in the care of patients.
- Content will not contain recommendations, treatment, or manners of practicing medicine that are not within the ACCME and AMA definition of CME, nor are known to have risks or dangers that outweigh the benefits, nor are known to be ineffective in the treatment of patients.

THE CME APPLICATION

The CME application provides support in the Air Force's compliance with the The Accreditation Requirements and Descriptions of the ACCME. It provides for the generating and printing of all CME documents that are used in the planning process. Additionally, administrative tools are available for the Course Directors, CME Planners, and the CME Director's Office.

The Planning document Phase 1 and Pre-Activity Phase 2 contains information about the activity applicable to the early planning stages. Planners and Course Directors must plan accordingly to complete all areas by the deadline. Planners are encouraged to read on-screen instructions and information and click on hyperlinks to assist in answering questions in each area of the application. Both phases 1 and 2 must be completed in its entirety in order to submit the application for approval. The three phases below list sections for each phase that make up the CME application.

Planning Document (Phase 1): consist of the following:

Activity Information, Proposed Sources of Funding, Screening Criteria, Collaboration, Purpose, Practice Based Learning and Improvement, Gap Analysis, Sources of Gaps, Target Audience/Prerequisites, National Priorities for Physician Attributes,

System/Educational Barriers and Opportunities, QA and Patient Safety Consideration, Learning Objectives, Educational Design, Activity Evaluation and Outcomes Assessments, Internet/Enduring Material (visible in Internet Enduring/Enduring Material applications only).

Pre-Activity (Phase 2): consist of the following:

Committee Members, Select Faculty, Agenda, Faculty Correspondence, Disclosures, Course Director Reviews, Planning Log, Syllabus/Course Handouts, Web Registration, Activity Validation/Submission, Attendee Roster, Manage Documents.

Post-Activity (Phase 3): consist of the following:

Budget Worksheet, Credit Hours, Thank You Letter, After Action Report (which includes the following: Course Director Evaluation Form, Activity Validation, View of AAR, Submission of AAR), Certificates, Post Outcomes Survey, Closeout Instructions.

The Post-Activity section contains actions that need to occur after an activity has been completed. The Planner and Course Director will complete all areas of the after action report to be submitted by 60 days post course.

TIMELINES

CME APPLICATION	
2-3 months prior to course	Gather course information and begin completing CME application
45 days prior	Application deadline
Under 45 days	Must provide justification and request waiver for late submission; not guaranteed a review or approval.
30 days prior to activity start date	Application deadline for deployed physicians
10 days prior to activity start date	- Learners must evaluate activity and complete credit form to obtain CME certificate (learners have 45 days post course to complete this.
14 days post course	Planner may access after action report
60 days post course	AAR is due
75 days post course	Outcomes survey automatically sent to learners, if applicable
80 days post course	Course Director must comment in AAR if activity was effective in addressing change in performance and/or patient outcomes.

LEARNING OBJECTIVES

Learning objectives are statements that let the activity learners and the faculties know the outcomes an attendee should expect to have upon completion of the course. The ACCME requires that the objectives be stated in all course materials (**both** the brochure and other form of promotional announcement and the syllabus or other type of handout material).

The overall course objectives should be stated in printed materials near the beginning of those materials so that learners can be aware of them prior to engaging in the learning experience.

Objectives must start with an action verb that is chosen to impart the result that the physician should expect to have after the completion of the activity. These objective statements should be as specific as possible and be oriented toward a clinical outcome in terms of the physician's behaviors, skills, or attitudes as a result of the activity. Help links and objective examples are available on the CME website.

Communicating overall learning objectives to the faculty: The communication of overall objectives to the faculty should be done with lots of lead time prior to the start of the activity. Objectives are communicated to faculty via the standardized Faculty Letter. Faculty must be aware of these objectives prior to developing and submitting their sub-objectives for their particular presentation.

Measuring Achievement of the Objectives: The ACCME requires that there be a linkage between stating the objectives and measuring whether or not they were achieved. This is accomplished by asking participants whether or not course objectives were met in the activity through the participant evaluation format. Be sure to re-state the objectives in the evaluation where you are asking the participant to evaluate whether or not the objectives were achieved.

TARGET AUDIENCE

The Target Audience Statement is a required item in any promotional material of the syllabus or handout materials. The Target Audience must list specific specialists or subspecialists, including general and family practice physicians for which the activity is designed. Prerequisites for learners of that activity that are either required for registration or would generally be advisable to gain the optimum result from participation, however, this is optional. A sample Target Audience might look like this:

Target Audience: The intended audience for this educational activity includes cardiologists, cardiac surgeons and electrophysiologists. All participants should have experience in the diagnosis and/or treatment of patients with cardiac arrhythmias.

How do you determine that identity of the target audience? The target audience is typically determined by the planning committee and/or the course director. It is based on the gap analysis. It is never determined by the commercial supporter.

Why list the target audience? There are three reasons: (1) to assist the potential learners in determining if the activity is appropriate based on background and training; (2) to help attract learners and optimize enrollment; and (3) to assist faculty in preparing their presentation and course materials that are at the appropriate level for the intended audience.

CME FUNDING AND COMMERCIAL SUPPORT

Effective April 2018, the US Air Force disestablished the use of commercial support for all of its CME activities. This includes commercial grants, in-kind support, exhibit income and any support from commercial sources. The US Air Force will continue to comply with all other pertinent and applicable sections of the ACCME's Standard of Commercial Support.

Independence: In accordance with the *Standards for Commercial Support (SCS)*, the US Air Force develops its CME activities independent of any commercial interest. Specifically, a commercial interest can have no involvement in the following:

- Identification of practice gaps and needs that become the foundation for the activity
- Preparation of or input into the learning objectives
- Selection and presentation of content
- Recommendation of persons to serve as faculty for the activity or any other persons that will be in the position to control the content of CME
- Influence over the selection of the educational design for the activity
- Selection of vendors or methods for the evaluation of the activity
- Requests for "technical review" of the content of the CME activity by the commercial interest will not be accepted.

Governing Authorities

Title 10, United States Code, section 178. Units of the U.S. Military are prohibited by law from directly accepting private sector funds for the purpose of offsetting the cost of providing continuing medical education.

Management and Control of Funds: US Air Force is prohibited by law and regulation from interacting with commercial interests and directly accepting any commercial support through grant, in-kind, exhibit income and any income from commercial sources. As such, US Air Force will not support the approval of CME activities who engage with commercial interests to obtain commercial support.

Provision of Funds to Learners: US Air Force does not utilize funds from commercial support to offset the costs of attending CME activities for its learners.

Social Events: Social events that take place at a CME activity may not compete with or overtake the CME activity. US Air Force and military education in general permit only modest meals at its CME activities for the purpose of promoting interaction and exchange between faculty and learners.

Honoraria Policy: An honorarium is a payment to an individual in recognition of a special service or distinguished achievement for which custom or propriety forbids the setting of any fixed business price. The intent of honoraria is to show appreciation for participation in the US Air Force's CME program and to stimulate CME development. US Air Force is governed by Air Force Instruction (AFI) 65-601, Financial Management regarding honoraria. This regulation

allows honoraria or fees paid with federal funds up to \$2000.00 to persons engaged to deliver speeches, lectures, and presentations. US Air Force physicians, other Airman or DoD employees are not permitted to accept honoraria. Honoraria must comply with the Standards for Commercial Support of the ACCME and not influence the choice of speaker or the content of the presentation. Local chain of command will be responsible for deciding the honoraria for guest speakers, not to exceed \$2000.00. Payment of honorarium may only come from Government operational funds, registration fees and/or federal grants. Federal grants must conform to the procedures and guidelines that govern the use of such funds

Gifts to Physicians: In accordance with both Federal and US Air Force policy, no gifts are permitted to be received directly or indirectly by an Air Force physician.

Transparency to Learners: While US Air Force disestablished the use of commercial support to any of its CME activities such statement will be made transparent to its learners in the brochure and syllabus/handout materials. See the section on “Acknowledgement of Commercial Support.”

Separation of Education from Promotion:

1. Promotion of Proprietary Interest of Commercial Interests: US Air Force ensures that activities do not promote the interests of product manufacturers through the following safeguards:

- ***Activities Linked to Analyses of Learner Gaps and Other Needs***—CME activities are planned based on clear gaps in knowledge and/or performance, the opinions of recognized experts in the field, national guidelines or authorities’ description of best practices.
- ***Content Validation Practices***—The content of CME activities is vetted by independent reviewers so as to ensure that commercial bias is not present and that the material is scientifically accurate, based on evidence acceptable to the profession, and that treatments discussed are appropriate. US Air Force has a standard form for this purpose that is included in the Automated System.
- ***Retrospective Learner Feedback***—Evaluation mechanisms always contain questions that serve to demonstrate that learners did not perceive commercial bias in the materials from a specific teacher/author. If a bias is perceived, this information is provided to the planners, faculty and others so that an improvement plan can be determined and outcomes of the improvements monitored.

2. Commercial Exhibits

- The use of exhibits is prohibited in any CME activity.
- US Air Force does not engage in any marketing practices or services-for-hire for a commercial supporter.
- Exhibits are not permitted in the educational room, or in the case of enduring materials or Internet-based CME, within the space of educational content.

3. Advertising

- **Live activities:** A commercial interest is not permitted to advertise its products within the confines of a CME activity. US Air Force does not permit subtle advertising by having book bags, pens, or other accoutrement that bears the name of the manufacturer and/or its products within the educational space.
- **In Enduring Materials:** Advertising is not permitted whatsoever in any enduring material, which by definition contains the course content for a CME activity.
- **In Internet-Based Activities:** Advertising may be present on general web pages, but in that case the learner must act to formally enter the educational space by knowingly click to enter that space. Messages relating to this process shall be explicit, and thereafter no advertisements are permitted.
- **Journal-Based Activities:** While US Air Force currently does not offer journal-based CME, in the future should it elect to offer this type of CME, advertising would be permitted in journals containing articles certified for AMA PRA Category 1 credits™ but those ads could be within the confines of the certified article or on any partial page of that article. Furthermore, advertising would not be permitted in other parts of the official CME activity, such as posttests, evaluations, and general CME information pages.

4. Appearance of Product Group Messages in Course Materials: No product group messages are permitted in any CME activity certified by US Air Force. Given the nature of how learners perceive such messages, steps taken to assure compliance with this policy include:

- Use of generic scientific names for product descriptions instead of product names.
- Insistence of fair balance in discussion of treatment options in which all drugs in a class are compared and contrasted, with treatment recommendations being reviewed by content reviewers to assure that recommendations made are based on verifiable studies and in the public interest.
- Logos from commercial interests are never permitted on any course materials including slides, syllabus materials, and other non-educational interventions.
- Logos from commercial interests are not permitted in statements acknowledging the receipt of commercial support.

Collection of Financial Relationship Disclosure and Resolution of Conflicts of Interest (COI) and Transparency to Learners

- **Collection of Financial Relationships Disclosure:** US Air Force collects financial relationship information from all persons in a position to influence the content of CME in any amount from (a) faculty, (b) planners, (c) reviewers, (d) advisors, and (e) staff from US Air Force or any educational partner. Information requested is obtained through a standard Financial Relationships Disclosure Form that is distributed to all concerned parties prior to an educational activity through the Automated System. Information from financial disclosure forms is analyzed by staff and/or planners, Course Director, and the CME Director and a mechanism to resolve reported conflicts are selected.

- **Resolution of Reported COI**

US Air Force requires that everyone who is in a position to control the content of an educational activity discloses all relevant financial relationships with any commercial interest. Parties affected by this policy include planners, faculty, reviewers and any other person that affects the content of the activity. The ACCME defines “‘relevant’ financial relationships” as financial relationships in any amount occurring within the past 12 months that create a conflict of interest. The ACCME defines a Commercial Interest as any entity producing, marketing, re-selling, or distributing health care goods or services consumed by, or used on, patients. When COI is present, course materials such as slides and syllabus material are reviewed by the course director and/or the respective hospital’s CME Medical Director and/or an independent reviewer. Should resolution not be possible through content review, presenters may be asked to limit their presentation to the presentation of scientific information only, or in some cases the presenter may be replaced by another expert with less COI. Resolution of COI, including changes that were identified in materials, is maintained in the files for the activity. Any person affecting the content of CME that is salaried or otherwise employed by a commercial interest is rejected as a planner, faculty or reviewer.

- **Transparency to Learners:** Disclosure information for each presenter, reviewer, planner, and anyone in a position to influence the content is made transparent to learners. The disclosure of relevant financial relationships is published in course syllabus or handouts so that it may be viewed by learners prior to the start of the activity.

Acknowledgment of Commercial Support: A simple statement acknowledging that US Air Force activities do not receive commercial support will need to appear on all promotional materials (i.e. brochures, syllabus and general information documents). See the section on “Acknowledgement of Commercial Support” for the appropriate language.

Income from Other Sources: Income from government operational funds used to support a CME activity does not need to be reported. Income from registration fees, refreshment fees and government grants must be reported. Expenses from these incomes do not need to be reported.

POLICY ON DISCLOSURE AND FACULTY DISCLOSURE

The Air Force's policy on disclosure shall be stated in the brochure or other promotional item (without mentioning the specific disclosure). See the section on "Required Statements" for the appropriate Disclosure Statement.

In accordance with the ACCME's Standards for Commercial Support the Policy on Disclosure exists to provide guidance for staff, faculty and joint providers of the requirement to disclose specific information to participants.

The Air Force CME Office requires that anyone involved in the content of a CME activity disclose all relevant financial relationships with commercial interests within the past 12 months in order to assess if there are any potential conflicts of interest. A conflict of interest exists when individuals have both a financial relationship with a commercial interest and the opportunity to affect the content of CME regarding the products or services of that commercial interest. Disclosure is required so that the planning committee, course director, and/or staff can resolve any conflicts prior to the presentation and so that participants may be informed about speaker disclosures. Speakers who do not disclose relevant financial relationships cannot be included in the CME activity. Faculty, authors, members of planning committees and staff should utilize the best available evidence when developing the content of the activity. Information on needs, expected results and purpose or objectives of the CME activity will be provided to learners. Participants will be asked to evaluate the objectivity of the presentation or publication and to identify any perceived commercial bias. We will also seek feedback from participants on the effectiveness of this CME activity through evaluations.

Definition of a commercial interest: is any entity producing, marketing, re-selling, or distributing health care goods or services consumed by, or used on, patients.

Resolution of Conflicts of Interest Refer to the section on the ACCME's "Flowchart for the Identification and Resolution of Personal Conflicts of Interest" and the ACCME's "Mechanisms for Resolving Conflicts of Interest." The flowchart shows step-by-step instructions on how to resolve a conflict of interest to insure independence.

When it is not possible to make disclosures in writing, then the course director or instructor/moderator will ensure that disclosure to the audience occurs verbally. See section on "Making Actual Disclosure to Activity Audiences" for sample disclosures.

CME Planners/Course Directors must add a comment in the planning log of the CME planning document regarding this disclosure.

Faculty and Committee Member Disclosure: Faculty and Committee Member Disclosure is a required item in the syllabus or handout materials. The best way to document that disclosure was actually made is to make it in writing in the course syllabus or handout materials. See the section on "Required Statements" for the appropriate Disclosure Statement.

List each faculty member and list the names of commercial entities that were reported in the Faculty Disclosure Form. If none were disclosed, state "No Information to disclose" next to the faculty and committee members' names.

Why do faculty and committee members need to make a disclosure? Because it is required by the ACCME under agreement with the FDA. The ACCME and FDA require this disclosure so that activity participants know if there is the possibility that the presenter might be compromised in the way he or she reports or discusses the use of a therapeutic product or device. It is up to each individual participant to make an informed decision as to whether or not bias may exist.

MAKING ACTUAL DISCLOSURE TO ACTIVITY AUDIENCES

Written Disclosure in Syllabus or Handout Materials: "As a provider accredited by the ACCME, it is the policy of the U.S. Air Force to require the disclosure of the existence of any relevant financial interest or any relationship a faculty member or a sponsor has with the manufacturer(s) of any commercial product(s) discussed in an educational presentation.

Disclosure of Unlabeled/Unapproved Uses of Drugs or Devices to the Audience

- Live Activities

The moderator or course director for a live activity should advise the audience that a particular speaker will discuss unlabeled uses to the audience as the speaker is being introduced.

- Internet CME Activities

When text containing discussion of unlabeled/unapproved uses is being discussed in written Internet CME text, a warning in colored typeface should indicate that the following materials contain discussion of unlabeled/unapproved uses.

- Other Enduring Materials

The moderator can indicate that a particular presentation will contain discussion of unlabeled or unapproved uses, or a statement to that effect can scroll across the screen.

Verbal Disclosure at an Activity by Moderator or Course Director

“ In accordance with the ACCME and Air Force policies, I am required to disclose the existence of any relevant financial interests or other relationships faculty members or the sponsor have with the manufacturers of any commercial products discussed in an educational presentation.”

Documentation of Verbal Disclosure

Memorandum for Record

From: <insert name>

Date:

RE: Documentation of Faculty Disclosure at <insert Activity ID, title and date of activity>

At the above referenced activity, the course director (or moderator) verbally disclosed to the audience the following information regarding faculty disclosure.

ACTIVITY EVALUATION

ACCME and the AFMS require that each and every CME activity be evaluated as stated in its Mission statement. The reasons for evaluating educational activities are three fold:

- (1) To provide feedback to the faculty on their performance,
- (2) To provide feedback to the sponsor and activity planners, and
- (3) To assist future committees planning a similar activity by providing learners input into the next gap analysis or needs assessment process.

The evaluation completes the feedback loop, in which needs propagate objectives, educational design enables the objectives to be realized, and evaluation loops back to needs.

Planners are required to utilize the exact formats provided in the CME application.

Why? As a CME Provider, the AFMS must generate activities/educational interventions that are designed to improve competence, change performance and/or change patient outcomes. It is also required to perform comparative analyses of all CME activities, and a uniform approach to evaluations not only permits a comparative analysis, but it also demonstrates to the ACCME that a uniform set of policies and procedures has been implemented within the Army's international arena.

The ACCME requires that certain specific types of questions be included in each activity's evaluation. These questions include evaluation of the achievement of overall course objectives, faculty performance in terms of both content and style, the participant's perception of enhanced professional effectiveness, whether or not the activity was conducted in a way that was free from commercial support bias, and to obtain participant input on future activity development.

The CME website includes the following participant evaluation forms and the appropriate format will be automatically generated based on the application type chosen:

- Evaluation formats for single activities, roadshows and for enduring materials, including written supplements or monographs, video or audio educational activities, and Internet CME activities;
- A format for regularly scheduled series.
- The CME application also contains an evaluation form for measuring "expert" opinion on the conduct of the activity and the performance of the faculty. Course Directors must complete this Course Director Evaluation form which is a part of the activity's After Action Report.
- Finally, the CME Planning Document contains a recommendation to consider developing a post-activity outcomes survey. Outcomes surveys validate the degree of change in a physician's clinical behaviors that may lead to better patient outcomes as a result of the educational activity being offered. Development of an outcomes survey is not difficult and is accomplished by reviewing the learning objectives from the activity and asking questions related to them. Outcomes surveys are automatically distributed 75 days post-activity. Results of those surveys are tabulated and included in the after action report so that the

results may be passed-on to the next planning committee on the same or similar subject matter.

- Additional evaluations are allowed. The Course Director will add the summary of these evaluations to the course director evaluation form prior to submitting the after action report for approval.

ENDURING MATERIALS

Enduring materials provided for the AFMS must be in conformance with the ACCME Accreditation Requirements and the requirements of the American Medical Association Physician's Recognition Award (AMA/PRA). Request for Enduring Materials/Internet Enduring approval must go through CME Headquarters (USAF CME Office).

Definition of an Enduring Material

The ACCME defines CME enduring materials as printed, recorded, or computer-assisted instructional materials which may be used over time at various locations and which, in themselves constitute a planned activity of continuing medical education. Examples of such materials for independent learning by physicians include: programmed texts, audio tapes, videotapes, Internet CME, and other computer-assisted instructional materials which are used alone or in combination with written materials. Not included are "reference materials" such as books, journals, or manuals. Enduring materials are similarly defined by the AMA and the American Academy of Family Physicians (AAFP).

Enduring materials extend the reach of CME providers by offering educational activities to physicians at a time and location convenient to them. The increased popularity of enduring materials may be a result of the changing dynamics in CME. Although physician needs are ever-present and technology continues to change, physician time and our own resources are limited. Enduring materials and Internet Enduring activities support our efforts and physician needs because:

- They can be widely distributed.
- They contain detailed information that is frequently omitted in live CME activities.
- Physicians can access the information when they need it ("just-in-time-training"), especially those assigned to theater operations.
- They are available to go back to for reference and review.
- They are cost-effective.

Promotion and Advertisements: No company messages, product advertisements, or product inserts are to appear or be included in or be distributed with any enduring materials (this does not apply to journal-based CME; but in no case should product advertisement be located within the boundaries of the educational activity).

Types and Requirements: Therefore, the special rules for enduring materials are used for printed monographs or other written supplements, Internet CME activities, video or audio cassette educational pieces, home study activities, or other distance learning projects in which the activity is not broadcast live and is recorded in some manner for future transmission. In addition to all normal aspects of the planning process, an enduring material must include the following special requirements:

- Date of Issuance

- Date of Expiration (cannot be more than 3 years but can be less if materials will be out-of-date by a certain date)
- Date of Re-issuance (if the enduring material is being certified for an additional period of time after the initial date of issuance)
- Estimated Time to Complete the Activity (includes the amount of time to take the post- test and complete the evaluation)

Original Release and Re-release of Enduring Materials

Enduring materials may be approved up to three years. If the activity is offered beyond the three-year approval, a review of the contents by the Air Force CME Office and/or the activity committee is required to ensure accuracy and validity of the contents. Enduring materials must have an original release date, original termination date; subsequent approval must also have a new termination date, a new release date and a date when the contents were reviewed.

Required Statements and other requirements

The following statements must appear in a prominent place at the front of the text or in opening screens of video or multimedia products:

- Accreditation Statement
- Credit Designation Statement

The following course information must appear in promotional or course materials of the enduring material, in an area accessible to the learner prior to the start of the activity.

- Statement of Need - the need determined by the planning committee should be indicated in both the promotional materials and the course materials.
- Target Audience and Prerequisites (if any) - Identify all target audience and if applicable, special requirements for participants in the enduring material (prerequisites).
- Topics and Faculty Credentials - Include information about the topic(s) of the enduring material, the faculty and their credentials.
- Learning Objectives - Learning objectives specific to the enduring material must appear. These objectives should be measurable and clearly state for the learner what he/she can be expected to learn from participating in the enduring material.
- Acknowledgment of Commercial Support: (See section on "Required Statements").
- Faculty Disclosure: (See section on "Required Statements").

Disclaimer Statement: The following statement is recommended:

"The opinions and recommendations expressed by faculty and other experts whose input is included in this program are their own. This enduring material is produced for educational purposes only. Use of the AFMS name implies review of educational format design and materials only."

Evaluation and Post-Test: A set of test questions will be developed and address the material presented. These questions should be developed with the activity objectives as a guide. In addition, an evaluation instrument will be included with each enduring material. Answers to

post-tests will not appear with the enduring material itself. Tests will be graded by the course director and a pass or fail grade must be indicated on the CME application before the learner may claim their CME certificate.

Instructions for Securing CME Credit: Clear instructions describing how participants can complete test questions and return them for scoring must be included. Tests should be per the instructions in each enduring material, prior to the published expiration date. A certificate will be generated upon completion of activity evaluation and request for credit form. Participants must achieve a passing grade (70% or higher) to receive credit.

Content Venue and Formats: In Internet Enduring, it is the responsibility of Course Director to identify the location or site the learners will logon to take the course. This location or site may be a website, Blackboard, intranet, SharePoint, etc.). Formats for printed monographs or other written supplements, video or audio cassette educational pieces, home study activities, or other distance learning course is at the discretion of the Course Director.

ENDURING MATERIAL CHECKLIST

The following checklist must be adhered to when planning an internet enduring or enduring material activity.

Provide an assessment of the learner that measures achievement of the educational purpose and/or objective(s) of the activity with an established minimum performance level: Examples include, but are not limited to, patient-management case studies, a post-test, and/or application of new concepts in response to simulated problems.

Communicate to the learner the minimum performance level that must be demonstrated in the assessment in order to successfully complete the activity for AMA PRA Category 1 Credit.
TM

Activity Location: ACCME accredited providers may not place their CME activities on a website owned or controlled by a "commercial interest."

Links to Product Websites: With clear notification that the learner is leaving the educational website, links from the website of an ACCME accredited provider to pharmaceutical and device manufacturers' product websites are permitted before or after the educational content of a CME activity, but shall not be embedded in the educational content of a CME activity.

Advertising: Advertising of any type is prohibited within the educational content of CME activities on the Internet including, but not limited to, banner ads, subliminal ads, and pop-up window ads. For computer based CME activities, advertisements and promotional materials may not be visible on the screen at the same time as the CME content and not interleaved between computer 'windows' or screens of the CME content.

Bibliography: Include bibliographic sources of referenced materials that are clearly visible to the learner. The bibliography may be a list or it may be imbedded in the same page/screen to which the material is being referenced.

AFMS further requires that the planner provides clear written instructions for learners to register on the CME Website and the host's website (if applicable); annotates on the CME website learner's final grade; communicates to the learner when it's appropriate to access the CME website to claim credits and complete course evaluation and ultimately, how to obtain a CME certificate.

REQUIRED STATEMENTS

The following statements will appear on all promotional and course materials. These statements must be used precisely as stated below with no changes whatsoever. Use both the heading and the statement.

1. Accreditation Statement: It tells the participant under whose authority credit is given. "This activity has been planned and implemented in accordance with the Essential Areas and policies of the Accreditation Council for Continuing Medical Education (ACCME) through the joint providership of Office of the Surgeon General, United States Air Force and Fort Sam Houston, Texas, Fort Sam Houston. The Office of the Surgeon General, United States Air Force is accredited by the ACCME to provide continuing medical education for physicians."

2. Credit Designation Statement: The Credit Designation Statement is a required item in any activity's brochure or other promotional materials, as well as the course syllabus or handout materials and is as follows:

"The Office of the Surgeon General, United States Air Force designates this Live Activity for a maximum of "X" AMA PRA Category 1 Credit(s).™ Physicians should claim only the credit commensurate with the extent of their participation in the activity."

This statement should be separated by a line from the accreditation statements and should have its own sub-heading: "Credit Designation".

The Credit Designation Statement must be written precisely as stated above without changing any capitalization or making creative additions whatsoever. The "AMA PRA Category 1 Credit(s)™" phrase is a trademark symbol of the American Medical Association. As such, when referencing CME in CME materials and correspondence, the entire italicized phrase must be used.

* Learning formats are Live Activity or Enduring Material

3. Acknowledgment of Commercial Support: The USAF disestablished commercial support from all sources (i.e. grants, exhibit fees, in-kind support, etc). All promotional materials must include the following statement.

"There is no commercial support associated with this educational activity."

4. Disclosure Statements:

For Brochures:

Policy on Disclosure: As a provider accredited by the ACCME, it is the policy of the U.S. AIR FORCE HQ AFPC to require the disclosure of the existence of any relevant financial interest or any other relationship a faculty member or a spouse has with the manufacturer(s) of any commercial product(s) discussed in an educational presentation. Detailed disclosure will be made in the course syllabus/course handouts.

For Syllabus/handout materials:

Disclosure of Faculty/Committee Member Relationships: It is the policy of the U.S. AIR FORCE HQ AFPC that all CME planning committee/faculty/authors disclose relationships with commercial entities upon invitation of participation. Disclosure documents are reviewed for potential conflicts of interest and, if identified, they are resolved prior to confirmation of participation.

List Presenters' Declarations: Include all faculty disclosure statements as well as those who have no disclosure to report.

5. American Disabilities Act: The U.S. AIR FORCE HQ AFPC supports the Americans with Disabilities Act. Please contact the Course Administrator for any special request.

6. Enduring Materials: Enduring Materials and Internet Enduring must include all appropriate statements above.

Save-the-Dates: The Accreditation statement does not need to be included on save-the-date type announcements. Such announcements contain only general, preliminary information about the activity such as the date, location, and title. If more specific information is included, such as faculty and objectives, the accreditation statement must be included. Contact the CME office for specifics regarding 'Save-the-Dates.'

CME CERTIFICATES

Attendee Certificates: Obtaining a CME certificate is voluntary. Learners must first evaluate the activity and complete a credit form on the CME website and a certificate will be automatically generated. The AFMS will maintain the integrity of the program and certificates will be issued as follows:

- Only valid for the activity that the learner participated in.
- Valid only with Air Force CME Director's signature.
- Invalid for other purposes for which it is not intended.
- Other types of certificates are prohibited.

There are two certificate types: one for the physician learners and one for other learners. The statements are AMA directed and may not be modified and grammatically corrected whatsoever.

Statement of Physician Certificate: "The Office of The Surgeon General, United States Air Force certifies that <Learner Name> has participated in the <Learning Format*> titled <title of activity> at <City, State> on <Begin Date to End Date> and is awarded<# credits> AMA PRA Category 1 Credit(s)™.

Statement of other learner's CME certificate: "The Office of The Surgeon General, United States Air Force certifies that <Learner Name> has participated in the <Learning Format*> titled <title of activity> at <City, ST> on <begin date to end date>. This activity was designated for<# credits> AMA PRA Category 1 Credit(s)™.

Certificates must also include the Accreditation Statement. See "Required Statements"

*Learning format is either "Enduring Material" or "Live Activity."

Teaching Certificates: When physician faculties serve as both a faculty and a learner, the faculty may not claim credit for the time they spent teaching in the CME activity. The faculty may only claim the portion in which he/she attended as a learner.

The Air Force CME Office does not award teaching credits. Physicians may claim teaching credits through the AMA (<https://www.ama-assn.org/education/continuing-medical-education>) to apply and may receive 2 credits for every hour of teaching.

ORGANIZATION AND MAINTAINING CME FILES

The CME website maintains all activity files electronically and planners may access all of their current and previously approved CME applications in the Current Activities section of their portal. The ACCME requires that providers retain activity documentation for the duration of their accreditation term. Records that verify participation in a CME activity must be kept for six years as well (i.e. attendee rosters, sign-in sheets, etc). The CME website is equipped to accept uploaded documents to support the activities performance in practice.

CME Application

- Gap Analysis/ & Planning
- Statement of Gap Analysis/Needs Statement
- Supporting documents for gap analysis or needs statement
- Letters, faxes, e-mails with experts in the area of need {Planning log}
- Evaluation Summaries from previous activities
- General "notes to the files" from staff summarizing discussions, meetings, telephone conversations, etc. which support the need {Planning Log}

Faculty Communications

- Listing of final overall objectives for the activity
- Letters to each faculty member which states the objectives, the target audience, and commercial support requirements, including requirement for fair-and-balanced presentations, faculty disclosure, name(s) of commercial supporter(s), their honorarium.
- Other communications with faculty specifically regarding the development of their presentations, receipt of slides and hand-out materials, honoraria, etc.
- Faculty CV's or Mini-Bio's

Brochure-Announcement: Copy of brochure announcing the educational activity with all required statements.

Syllabus-Handouts: Copy of the handouts and/or syllabus for the activity which contains all required statements.

Agreements/Contracts (when applicable): Commercial support - No longer applicable since the USAF disestablished acceptance of commercial support in April 2018. However, rules still apply for previous commercial support obtained prior to March 2018 within this accreditation term. In this regard, signed copy of ACCME Standard Agreement with each commercial supporter and signed copy of Memorandum of Agreement.

- Exhibit Fees - signed copy of Memorandum of Agreement.

Evaluation

- Copy of activity evaluation with all required questions
- Copy of evaluation summary for the activity
- Letters to each faculty member in which the evaluation summary is transmitted back to the faculty member, thus creating the feedback loop
- Copy of any post-activity outcomes questionnaire sent to attendees and its summary

Administration

- Sign-in sheets for each day of the activity
- One CME certificate for the activity which will be sent or was given to attendees.
- Other logistical communications (Planning log)

CME Certificates

Learner Certificates are kept for a period of six years. Learners may obtain a copy of their certificate in the CME Users Account portal.

GLOSSARY

Accreditation: The framework by which a program of CME is assessed to determine whether the program meets the accreditor's requirements. See also "Accredited CME provider."

Accreditation criteria: The requirements against which CME providers' compliance is determined in order to achieve or maintain accreditation.

Accreditation statement: The standard statement that must appear on all CME activity materials and brochures distributed by ACCME-accredited providers. There are two variations of the statement; one for directly provided activities and one for jointly provided activities.

Accreditation with Commendation: The highest accreditation status available in the ACCME System, accompanied by a six-year term of accreditation; available only to providers seeking reaccreditation, not to initial applicants.

Accredited CME: The term used to refer to continuing medical education that has been deemed to meet the requirements and standards of a CME accrediting body.

Accredited CME provider: An organization accredited as a provider of continuing medical education. Accredited CME providers assume the responsibility and accountability for developing certified educational activities. ACCME-accredited providers represent a range of organizational types and offer CME primarily to national or international audiences of physicians and other health care professionals. Intrastate-accredited providers offer CME primarily to learners from their state/territory or contiguous states.

Activity: See "CME activity."

Activity review: One of the ACCME requirements for achieving Provisional Accreditation or transitioning from Provisional Accreditation to Accreditation.

Advertising and exhibits income: Advertising and exhibits are promotional activities and not continuing medical education. Therefore, monies paid by commercial interests to providers for these promotional activities are not considered to be commercial support under the ACCME Standards for Commercial

AMA core requirements: The AMA requirements that every activity certified for AMA PRA Category 1 Credit™ must meet. They can be found in the AMA PRA booklet.

AMA Credit Designation Statement: The statement that indicates that the activity has been certified for AMA PRA Category 1 Credit™, and includes the type of activity and number of credits.

AMA Direct Credit Activities: Activities that do not occur under the auspices of an accredited CME provider and for which the AMA directly awards credit to physicians who meet the requirements as listed in the AMA PRA booklet.

AMA Physician's Recognition Award (PRA): The AMA PRA has recognized physician participation in CME since 1968. The AMA established the PRA certificate and the related

AMA PRA credit system to recognize physicians who, by participating in CME activities, demonstrate their commitment to staying current with advances in medicine. More information can be found in the AMA PRA booklet.

AMA PRA Category 1 Credit™: The type of CME credit that physicians earn by participating in certified activities sponsored by CME providers accredited by either the ACCME or an ACCME-recognized State/Territory Medical Society; by participating in activities recognized by the AMA as valid educational activities and awarded directly by the AMA; and by participating in certain international activities recognized by the AMA through its International Conference Recognition Program.

AMA PRA Category 2 Credit™: Credit that is self-claimed and self-documented by physicians by participating in activities that are not certified for AMA PRA Category 1 Credit™ and that the physician individually determines comply with the AMA definition of CME; and comply with the relevant AMA ethical opinions (see CEJA Opinions relevant to CME); and are not promotional; and the physician finds to be a worthwhile learning experience related to his/her practice.

Annual Report Data: Data that accredited providers are required to submit to the ACCME on at least an annual basis describing their overall CME program. This information includes summary data about the numbers and types of CME activities, the hours of instruction, the numbers of physician and other learner participants, and some financial information. The ACCME analyzes this data to monitor changes in individual CME programs as well as to assess trends across the CME enterprise. Each year, the ACCME publishes the aggregated information, offering a comprehensive analysis of the size and scope of the CME enterprise nationwide.

CME activity: An educational offering that is planned, implemented, and evaluated in accordance with the ACCME Accreditation Criteria, Standards for Commercial Support, and policies; the AMA Physician's Recognition Award CME credit system standards and policies; and the AMA Council on Ethical and Judicial Affairs pertinent opinions.

CME credit: The "currency" assigned to CME activities. Physicians and other healthcare professionals use credits to meet requirements for maintenance of licensure, maintenance of specialty board certification, credentialing, membership in professional societies, and other professional privileges. The requirements for credit designation are determined by the organization responsible for the credit system. Besides the AMA, other organizations in the US that administer credit systems for physicians include the American Academy of Family Physicians and the American Osteopathic Association. Please refer to those organizations for more information. See AMA PRA Category 1 Credit™ and AMA PRA Category 2 Credit™ above.

Commercial bias: Content or format in a CME activity or its related materials that promotes the products or business lines of an ACCME-defined commercial interest.

Commercial interest: Any entity producing, marketing, re-selling, or distributing health care goods or services consumed by, or used on, patients. The ACCME does not consider providers of clinical service directly to patients to be commercial interests. A commercial interest is not eligible for ACCME accreditation or participation in joint providership.

Commercial support: Monetary or in-kind contributions given by an ACCME-defined commercial interest that is used to pay all or part of the costs of a CME activity. The requirements for receiving and managing commercial support are explained in the ACCME Standards for Commercial Support. Advertising and exhibit income are not considered commercial support.

Competence: In the context of evaluating effectiveness of a CME activity in the ACCME System, the extent to which learners know how to implement (or stop doing) what the activity intended to teach them.

Compliance: The finding given when a CME provider has fulfilled the ACCME's/Recognized Accreditor's requirements for the specific criterion in the Accreditation Criteria or policy.

Conflict of interest: The ACCME considers financial relationships to create conflicts of interest in CME when individuals have both a financial relationship with a commercial interest and the opportunity to affect the content of CME about the products or services of that commercial interest. The potential for maintaining or increasing the value of the financial relationship with the commercial interest creates an incentive to influence the content of the CME—an incentive to insert commercial bias. See also "relevant financial relationships."

Continuing Medical Education (CME): The educational activities that serve to maintain, develop, or increase the knowledge, skills, and professional performance and relationships a physician uses to provide services for patients, the public, or the profession. CME represents that body of knowledge and skills generally recognized and accepted by the profession as within the basic medical sciences, the discipline of clinical medicine, and the provision of health care to the public.

Continuing Professional Development (CPD), or Continuing Physician Professional Development (CPPD): Includes all activities that doctors undertake, formally and informally, including CME, in order to maintain, update, develop, and enhance their knowledge, skills, and attitudes in response to the needs of their patients.

Co-provided activity: A CME activity presented by two or more accredited providers. One of the accredited providers must take responsibility for the activity in terms of meeting ACCME and AMA requirements and reporting activity data to the ACCME. See also "directly provided activity."

Course (see Single activity): A live CME activity where the learner participates in person. A course is planned as an individual event. Examples: annual meeting, conference, seminar.

Designation of CME credit: The declaration that an activity meets the requirements for a specific type of credit. The accredited provider is responsible to those organizations that administer credit systems for compliance with applicable credit requirements. Note: The designation of credit for CME activities is not within the purview of the ACCME or ACCME Recognized Accreditors. See also "CME credit."

Directly provided activity: One that is planned, implemented, and evaluated by the accredited CME provider. This definition includes co-provided activities (offered by two accredited providers) reported by the accredited provider that awards the credit.

Enduring material: An activity that endures over a specified time and does not have a specific time or location designated for participation; rather, the participant determines whether and when to complete the activity. Examples: online interactive educational module, recorded presentation, podcast.

Faculty: The individuals responsible for teaching, authoring, or otherwise communicating the activity content to learners.

Financial relationships: See "relevant financial relationships."

Hours of instruction: Hours of instruction represents the total hours of educational instruction in a CME activity. The information is used for the purpose of reporting the activity in PARS. {See PARS below.} For example, if a one-day course lasts eight hours {not including breaks or meals}, then the total hours of instruction reported for that course is eight. Hours of instruction may or may not correspond to the number of AMA PRA Category 1 Credits™ for which the activity is designated.

In-kind commercial support: In the context of the ACCME's Standards for Commercial Support, non-monetary resources provided by a commercial interest in support of a CME activity. Examples of in-kind support include equipment, supplies, and facilities.

Internet enduring material activity: An enduring material provided via the Internet, meaning that there is no specific time designated for participation. Rather, the participant determines when to complete the activity. Examples: online interactive educational module, recorded presentation, podcast.

Internet live activity: A live course available via the Internet at a certain time on a certain date and is only available in real-time, just as if it were a course held in an auditorium. Example: webcast.

Jointly provided activity: An activity that is planned, implemented, and evaluated by an accredited provider and one or more non-accredited entities.

Knowledge: In the context of educational needs for a CME activity in the ACCME System, the extent to which learners have a need for new information.

Learner: An attendee at a CME activity. See also "physician learners," and "other learners."

Live activity: Activity that occurs at a specific time as scheduled by the accredited CME provider. Participation may be in person or remotely as is the case of teleconferences or live internet webinars.

Monitoring: The ACCME monitors accredited providers between formal accreditation reviews by reviewing the program and activity data they submit on at least an annual basis. In addition, the ACCME and AMA each have a formal procedure for accepting and reviewing complaints from the public and the CME community about accredited providers' compliance with accreditation and credit system requirements.

Non-accreditation: The accreditation decision by the ACCME/Recognized Accreditor that a CME provider has not demonstrated compliance with the appropriate ACCME requirements.

Noncompliance: The finding given by the ACCME/Recognized Accreditor when a CME provider does not fulfill the ACCME's requirements for the specific criterion in the Accreditation Criteria or policy.

Other learners: Learners other than those who have obtained an MD, DO, or equivalent medical degree from another country.

Performance: In the context of evaluating effectiveness of a CME activity in the ACCME system, the extent to which learners do what the CME activity intended them to be able to do (or stop doing) in their practice.

Physician learners: Activity learners who are MDs or DOs, or have an equivalent medical degree from another country.

Probation: Accreditation status given by the ACCME/Recognized Accreditor to accredited providers that have serious problems meeting ACCME requirements. Probation may also be given to providers whose progress reports are rejected. The accredited provider must correct the noncompliance issues in order to return to a status of Accreditation. While on probation, a provider may not jointly provide new activities. See also "progress report."

Program of CME: The provider's CME activities and functions taken as a whole.

Progress Report: Accredited providers that receive noncompliance findings in the Accreditation Criteria or policies must submit a progress report to the ACCME/Recognized Accreditor demonstrating that they have come into compliance. If the accredited provider successfully demonstrates compliance, the progress report is accepted and the provider can then complete its accreditation term. If the progress report does not yet demonstrate compliance, the accredited provider will be required to submit a second progress report and/or the ACCME may require a focused accreditation interview to address the areas of noncompliance. The ACCME/Recognized Accreditor can also place an accredited provider on Probation or issue a decision of Non-accreditation after reviewing a progress report.

Program and Activity Reporting System (PARS): A web-based portal from the ACCME designed to streamline and support the collection of program and activity data from accredited CME providers. PARS is also used by accredited providers to register CME activities that will count for Maintenance of Certification™ and other uses, such as the Food and Drug Administration's Risk Evaluation and Mitigation Strategies (REMS).

Provider: See "Accredited CME provider."

Provisional Accreditation: A two-year term given to initial applicants in the ACCME System that comply with the necessary Accreditation Criteria.

Regularly scheduled series: A course planned as a series with multiple, ongoing sessions, e.g., offered weekly, monthly, or quarterly; and is primarily planned by and presented to the accredited organization's professional staff. Examples include grand rounds, tumor boards, and morbidity and mortality conferences.

Relevant financial relationships: The ACCME requires anyone in control of CME content to disclose relevant financial relationships to the accredited provider. Individuals must also include in their disclosure the relevant financial relationships of a spouse or partner. The ACCME defines relevant financial relationships as financial relationships in any amount that create a conflict of interest and that occurred in the twelve-month period preceding the time that the individual was asked to assume a role controlling content of the CME activity. The ACCME has not set a minimal dollar amount-any amount, regardless of how small, creates the incentive to maintain or increase the value of the relationship. Financial relationships are those relationships in which the individual benefits by receiving a salary, royalty, intellectual property rights, consulting fee, honoraria for promotional speakers' bureau, ownership interest (e.g., stocks, stock options or other ownership interest, excluding diversified mutual funds), or other financial benefit. Financial benefits are usually associated with roles such as employment, management position, independent contractor (including contracted research), consulting, speaking and teaching, membership on advisory committees or review panels, board membership, and other activities from which remuneration is received, or expected. See also "conflict of interest."

Self-study report: One of the data sources used in the ACCME process of accreditation or reaccreditation. When applying for accreditation or reaccreditation, CME providers prepare a report to explain their accomplishments and practices related to the Accreditation Criteria and policies, assess areas for improvement, and outline a plan for making those improvements.

Single activity (see 'Course'): A live CME activity where the learner participates in person. A course is planned as an individual event. Examples: annual meeting, conference, seminar.

Standards for Commercial Support: Standards to Ensure Independence in CME: ActivitiesSM ACCME requirements designed to ensure that CME activities are independent and free of commercial bias. The Standards comprise six standards: independence, resolution of personal conflicts of interest, appropriate use of commercial support, appropriate management of associated commercial promotion, content and format without commercial bias, and disclosures relevant to potential commercial bias.

ACRONYMS

ACCME - Accreditation Council on Continuing Medical Education

ACEHP - Alliance for Continuing Education in the Health Professions

AMA - American Medical Association

AMA PRA - American Medical Association Physician Recognition Award

CME - Continuing Medical Education

CNE - Continuing Nurse Education

EPIDN - Electronic Personal Identification Number

PARS - Program and Activity Reporting System

RSS - Regularly Scheduled Series