



ACCME Documentation of CME Need and Professional Practice Gaps

One participant is required to complete this form and submit with your attendance sheet to your series coordinator or CME Field Agent

Name of individual completing form: Title: Attending Physician House Staff PA NP Other:	
performance) that underlie	equire that: into CME activities the educational needs (knowledge, competence or the professional practice gaps of their learners. The provider generates o change competence, performance or patient outcomes.
Activity Name:	
Type of CME Activity:	M & M ConferenceTumor BoardCase Conference Journal Club Quality Assurance/Improvement Conference
Date of Session:	
Session Topic:	
Please describe the professi during the course of the dis	ional practice gaps/quality issues that were identified and addressed scussion today:
What changes in practice n	nay (or will) be implemented as a result of this session?
Which ACGME competend	cies were addressed?
<u>Medical Knowledge</u> Communications	Patient Care Professionalism

____Practice-based Learning

____Systems-based Practice