Institute for Healthcare Communication
CME/CE Workshop Cover Sheet

SECTION 1 - WORKSHOP DETAIL

Workshop:	☐ CPC 4.0 hours	☐ C&C 4.25 hours	☐ DCPR 3.5 hours	☐ CARMT 2.0 hours	☐ CNC 3.5 hours	☐ CNC 7.0 hours	☐ PCMH 4.25 hours	☐ SIC 6.75 hours
☐ DUMO 3.25 hours	☐ DUMO 2.0 hours	☐ Situation Manager 11.0 hours	☐ Connected 2.75 hours	☐ Connect 8.0 hours	☐ Coaching for Impressive C.A.R.E. 6.25 hours			

Treating Patients With C.A.R.E.	☐ Full Day 6.0 Hours	☐ Module I 2.0 Hours	☐ Module II 2.0 Hours	☐ Module III 2.0 Hours	☐ Module IV 2.0 Hours
Treating Patients With C.A.R.E. *Accelerated Learning Version*---------- 1.0 Hour		☐ Module I 3.0 Hours	☐ Module II 1.0 Hours	☐ Module III	

OTHER: Describe below. **If greater number of CME/CE hours requested please attach copy of agenda

Sponsoring Organization: _____

Organization Contact: _____

Workshop Location: _____
Address

_____
City *State* *Zip Code*

Date of workshop: _____ Number of participants: _____

Trainer(s): _____ _____ _____

SECTION 2 - FACULTY DISCLOSURE

ATTESTATION OF DISCLOSURE TO LEARNERS

☐ **I (we) attest to showing my (our) disclosure slide(s) to all attendees prior to the start of presentation**

SECTION 3 - INSTRUCTIONS FOR CME/CE CERTIFICATES

☐ E-mail certificates directly to participants ☐ No certificates required

☐ E-mail all certificates to: _____

☐ In addition to the Trainer(s), E-mail evaluation reports to: _____

_____

Comments:

If no E-mail address is listed for a participant we will send via regular mail unless otherwise instructed

THE FOLLOWING MUST BE RETURNED IN ORDER TO PROCESS CME/CE CERTIFICATES:

- **CME/CE Workshop Cover Sheet**
- **Sign-In Sheet or Typed List**
- **Faculty Disclosure (complete Section 2 above)**
- **Learner and Evaluation Forms (from workbook)**

RETURN TO: Mary Barrett
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