



AREA L AHEC
AHEC PARK
1631 SOUTH WESLEYAN BOULEVARD
POST OFFICE DRAWER 7368
ROCKY MOUNT, NORTH CAROLINA 27804-0368
TELEPHONE: (252) 972-6958 FAX: (252) 972-0419
www.AreaLAHEC.org

Investing in Health Care through Education, Training, and Workforce Diversity

CME CREDIT REQUIREMENTS

It is recommended that you keep this in your program file and use it as a checklist for any programs you have that offer CME credit.

Step One:

- Completed CME Application
- Data to support the need for the particular program

Submit the following to Shanté 30 days prior to the program date. You may fax, email or scan the content to Shante West.

- A copy of the completed
 - Should include learning objectives and basic program information
- A CV for each speaker
- A completed disclosure form for each speaker
- A copy of the final flier/brochure that was distributed for the program
- A printed or emailed copy of presentation slides and handouts
 - You may not have these 2 wks prior but you should have them before the program date (NC Medical Society requires that we review slides prior to the program date)

After the program:

- This form with everything checked off and attached as requested
- Return the CME paperwork to Shante (roster, CME evals, etc...)
- The completed CME Application and supporting data
- A copy of the regular roster
- Post handouts on AHEC's website if it was not given prior to the program date
- A copy of the final budget analysis, where applicable
- A copy of the evaluation composite

COMMENTS: