

**PLANNING FORM FOR EXPEDITED ACCREDITED ACTIVITIES  
RELATED TO COVID-19 – Spring 2020**

Provide responses to the following questions prior to the learning activity:

What's your name & email?	Name: Email:
When will the activity take place?	Date:
Do you have a title? If yes, please note it to the right, if no, leave blank. Examples include: <i>Emergency Department Morning Brief</i> or <i>Oto COVID-19 Case Webinar</i> .	Activity Title:
Number of people likely to attend?	
Is the activity designed to address the current public health and other issues related to COVID-19?	<input type="checkbox"/> Yes <input type="checkbox"/> No <i>(proceed)</i>
Is the expected outcome an improvement in response to the public health crisis (including improved teamwork, communication, patient care)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <i>(proceed)</i>
Is the group developing its own learning through discussion or is it being led by a facilitator or faculty member?	<input type="checkbox"/> Yes <input type="checkbox"/> No <i>If no, please provide leader's name:</i> _____
If there is a facilitator or faculty member, is that person an employee or owner of a pharmaceutical company or device manufacturer?	<input type="checkbox"/> Yes * <input type="checkbox"/> No <i>* If yes, an alternate person must lead the activity.</i>
Will you collect the attendance information and send it to the CME Department in order for credit to be awarded? <b>Names can be listed on the back of this form.</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
How much time do you anticipate the activity will take?	_____minutes or hours in 15 min increments (so credit can be awarded).
<i>After the activity:</i> Outline any intended practice changes identified by those who participated in the discussion.	<i>Insert brief statement here:</i>

Note to the CME Department: This completed form provides the necessary information to demonstrate the professional practice gap, expected results, appropriate format, changes in learners, independence, and administrative information needed to award CME credit to learners. Please enter this activity in ACCME PARS following your normal process, and provide your accreditation statement, the credit designation statement, and any applicable MOC statements to learners. If you have awarded MOC credit, please report learners in PARS as soon as convenient. For questions or assistance, contact ACCME at [info@accme.org](mailto:info@accme.org).