Accredited providers seeking to have CME activities recognized for ABIM medical knowledge MOC points may use this *Extended Performance in Practice Abstract* to document the activity. The activity must meet the ACCME accreditation requirements, including ABIM requirements marked with an asterisk. ABIM Requirements are marked below as **(ABIM1), (ABIM2), (ABIM3), (ABIM4),** (**ABIM Policy) (ABIM PS1) and** Patient Safety **(ABIM PS). Patient Safety** credit is optional. The ACCME, on behalf of the ABIM, audits a percentage of activities entered in PARS for MOC credit.

**Note:** MSV providers may use this form to document compliance with ACCME/MSV accreditation requirements. Activities selected for review as part of an MSV accreditation survey will be reviewed only for compliance with MSV/ACCME accreditation requirements---not for compliance with ABIM requirements that are in addition to MSV/ACCME accreditation requirements. (CME providers may amend this form for their own use. Use of this guide does not guarantee compliance.)

 **Extended Medical Society of Virginia Performance in Practice Structured Abstract**

(Includes Information Required by the [ABIM Medical Knowledge Assessment Recognition Program](https://www.abim.org/~/media/ABIM%20Public/Files/pdf/cme-providers/abim-medical-knowledge-assessment-recognition-program.pdf))

|  |  |  |  |
| --- | --- | --- | --- |
| ACCME Provider ID: |       | Provider Name: | **C:\Users\pmazmanian\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.IE5\1A9KW9KP\5279314121_13f5474394_z[1].jpg (ABIM1)**       |
| Activity Title: |       |
| Activity Date (mm/dd/yyyy): |       | Activity Type: | **C:\Users\pmazmanian\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.IE5\1A9KW9KP\5279314121_13f5474394_z[1].jpg (ABIM2)**  | Providership: |  | Commercial Support Received: |  |

**Indicate the ABIM specialties for which this activity is relevant (select all that apply):**

|  |  |  |  |
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| **C:\Users\pmazmanian\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.IE5\1A9KW9KP\5279314121_13f5474394_z[1].jpg****(ABIM 3)** | * All specialties
* Adolescent medicine
* Adult congenital heart disease
* Advanced Heart Failure/transplant cardiology
* Cardiovascular Disease
* Clinical Cardiac Electrophysiology
* Critical Care Medicine
* Endocrinology, Diabetes, Metabolism
 | * Gastroenterology
* Geriatric Medicine
* Hematology
* Hospice and Palliative Medicine
* Hospital Medicine
* Infectious Disease
* Internal Medicine
* Interventional Cardiology
 | * Medical Oncology
* Nephrology
* Pulmonary Disease
* Rheumatology Sleep Medicine
* Sleep Medicine
* Sports Medicine
* Transplant Hematology
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| **C:\Users\pmazmanian\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.IE5\1A9KW9KP\5279314121_13f5474394_z[1].jpg****(ABIM3)** | 1. 1. State the **professional practice gap(s)** of your learners on which the activity was based (maximum 100 words). (C2)
 |       |
| **C:\Users\pmazmanian\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.IE5\1A9KW9KP\5279314121_13f5474394_z[1].jpg****(ABIM3)**  | 2. State the educational need(s) that you determined to be the cause of the professional practice gap(s) (maximum 50 words each). (C2)  | Knowledge need ***and/or*** |       |
| Competence need ***and/or*** |       |
| Performance need ***and/or*** |       |
| C:\Users\pmazmanian\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.IE5\X1LAMV32\1356894329[1].png | 3. State what this CME activity was designed to change in terms of learners’ knowledge and competence or performance or in patient outcomes (maximum 50 words). (C3)  |       |
| C:\Users\pmazmanian\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.IE5\X1LAMV32\1356894329[1].png | 4. Explain why this educational format is appropriate for this activity (maximum 25 words). (C5) (Optional for initial accreditation.) |       |

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| C:\Users\pmazmanian\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.IE5\X1LAMV32\1356894329[1].png | 5. Indicate the desirable physician attribute(s) (i.e., competencies) this activity addresses. (C6) |
|

**ACGME/ABMS Competencies Institute of Medicine Competencies**  **Interprofessional Education**

 **Collaborative Competencies**

[ ]  Patient Care and Procedural Skills [ ]  Provide patient-centered care [ ]  Values/Ethics for Interprofessional Practice

[ ]  Medical Knowledge [ ]  Work in interdisciplinary teams [ ]  Roles/Responsibilities

[ ]  Practice-based Learning and Improvement [ ]  Employ evidence-based practice [ ]  Interprofessional Communication

[ ]  Interpersonal and Communication Skills [ ]  Apply quality improvement [ ]  Teams and Teamwork

[ ]  Professionalism [ ]  Utilize informatics

[ ]  Systems-based Practice

 **Other Competency(ies) (specify):**

**For all INDIVIDUALS IN CONTROL OF CONTENT for the activity …**

|  |  |
| --- | --- |
| C:\Users\pmazmanian\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.IE5\X1LAMV32\1356894329[1].png | 6. Complete the table below. For each individual in control of content, list the name of the individual, the individual’s role (e.g., planner, editor, content reviewer, faculty) in the activity, the name of the [ACCME-defined commercial interest](http://accme.org/requirements/accreditation-requirements-cme-providers/policies-and-definitions/definition-commercial-interest) with which the individual has a [relevant financial relationship](http://accme.org/requirements/accreditation-requirements-cme-providers/standards-for-commercial-support/standard-2) (or if the individual has no relevant financial relationships), and the nature of that relationship. (Note: Please ensure that when you are collecting this information from individuals, that you are using the most current definitions of what constitutes a relevant financial relationship and ACCME-defined commercial interest.) (C7 SCS 2.1, 2.2, 2.3) |

|  |  |  |  |
| --- | --- | --- | --- |
| **Name of individual** | **Individual’s role in activity** | **Name of commercial interest** | **Nature of relationship** |
| *Example: Jane Smythe, MD* | *Course Director* | *None* | *---* |
| *Example: Thomas Jones* | *Faculty* | *Pharma Co. US* | *Research grant* |
|       |       |       |       |
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(If there are additional individuals in control of content for the activity, please attach a separate page using the same column headings.)

**If the activity was COMMERCIALLY SUPPORTED …**

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| C:\Users\pmazmanian\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.IE5\X1LAMV32\1356894329[1].png | 7. Complete the table below. List the names of the commercial supporters of this activity and the dollar value of any monetary commercial support and/or indicate in-kind support (C8 SCS 3.4-3.6). (Do not indicate the dollar amount of in-kind support.) |
|
|

|  |  |  |
| --- | --- | --- |
| **Name of commercial supporter** | **Amount of monetary commercial support** | **In-kind**  |
| *Example: XYZ Pharma Company* | *$5,000* | *☐* |
| *Example: ABC Medical Device Company* |  | *☒* |
|       |       | [ ]  |
|       |       | [ ]  |
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(If there are additional commercial supporters, please attach a separate page using the same column headings.)

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| C:\Users\mkopelow\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.IE5\XSYU1EK2\MC900442155[1].png | **ATTACHMENTS** |
| **Attachment 1** | The **activity topics/content**,e.g., agenda, brochure, program book, or announcement. |
| **Attachment 2** | The form, tool, or mechanism used to **identify** **relevant financial relationships** of all individuals in control of content. (C7 SCS 2.1) (ACCME Definition of CME)  |
| **C:\Users\pmazmanian\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.IE5\1A9KW9KP\5279314121_13f5474394_z[1].jpg****Attachment 3****(ABIM 4)** | Evidence that you implemented your mechanism(s) to **resolve conflicts of interest** forall individuals in control of content prior to the start of the activity. (C7 SCS 2.3)  For enduring materials, journal-based CME and live activities-Verification that the content of the activity was **peer-reviewed by two reviewers**, during the planning process, who were not the original authors/presenters.1. The name, credentials, affiliations and qualification of the reviewers
2. The results/conclusion of the reviewers.

NOTE: As it relates to ABIM’s Medical knowledge Assessment Recognition Program, the process of peer review means that the educational materials are reviewed by other clinicians who are sufficiently familiar with the material to be able to render an opinion as to whether the materials are fair, accurate, and free of commercial bias.  |
| **Attachment 4** | The disclosure information as provided to learners about the relevant financial relationships (or absence of relevant financial relationships) that each individual in a position to control the content of CME disclosed to the provider. (C7 SCS 6.1-6.2, 6.5) |
| **C:\Users\pmazmanian\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.IE5\1A9KW9KP\5279314121_13f5474394_z[1].jpg** **(ABIM 4)** | Documentation relevant to the method of evaluation that was utilized for live activities, including committee learning, courses, internet live courses, and regularly scheduled series, that measured learner’s change including (C11):1. A **copy** of the evaluation tool that utilizes an evaluation method with a passing standard (e.g., multiple choice, fill-in-the-blank, or longer-form tests, written or shared responses; or other formative and summative content-relevant exercises);
2. A **description** of how the evaluation is conducted, including what the passing standard is for that evaluation mechanism (e.g., score, correct written or shared responses, etc.) A **description** of the process by which **feedback** was provided to learners that includes the rational for the correct answers and relevant citations; and
3. **Verification** that the learners successfully met the passing standard for the activity (i.e., met a specific score threshold, as determined by the CME provider). **[Refer to ABIM and ABP evaluation/assessment examples]**
 |
| **C:\Users\pmazmanian\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.IE5\1A9KW9KP\5279314121_13f5474394_z[1].jpg** (**ABIM Policy)** | The MSV accreditation statement for this activity and the ABIM MOC Statement as provided to learners. The ABIM MOC statement is: “*Successful completion of this CME activity, which includes participation in the evaluation component, enables the participant to earn up to [insert maximum allowable MOC points] MOC points [and patient safety MOC credit, if applicable] in the American Board of Internal Medicine’s (ABIM) Maintenance of Certification (MOC) program. Participants will earn MOC point’s equivalent to the amount of CME credits claimed for the activity.” [NOTE: If only sessions or modules of the activity are being offered for MOC credit, omit the sentence “Participants will earn MOC point’s equivalent to the amount of the CME credits claimed for this activity.]*  |
| **C:\Users\pmazmanian\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.IE5\1A9KW9KP\5279314121_13f5474394_z[1].jpg****Attachment 6B**Optional - for patient safety credit only(**ABIM PS1)** | **Patient Safety Credit**: Accredited provider may also register activities for ABIM patient safety MOC credit, as long as the activity meets the ABIM Patient Safety requirements.The activity must address one of the following, 1) Foundational Knowledge or 2) Prevention of Adverse Events:1. **Foundational Knowledge (must include *all* of the following):**
* Epidemiology of error: should prepare physicians to discuss the key definitions that underpin current patient safety efforts
* Fundamentals of patient safety improvement (plan, do, study, act or PDSA): should engage physicians in a PDSA cycle focused on patient safety
* Culture of safety: should identify the specific elements, (i.e., the beliefs, attitudes and values about work and risks) that contribute to safety culture
1. **Prevention of Adverse Events (examples include, but are not limited to):**
* Medication safety: examples include medication reconciliation, safe use of analgesics and sedatives, identification and remediation of polypharmacy in the elderly
* Prevention of healthcare-acquired infections
* Falls prevention
* Teamwork and care coordination
* Other (describe):

**[Refer to ABIM Verification of Participation Form]** |
| **C:\Users\pmazmanian\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.IE5\1A9KW9KP\5279314121_13f5474394_z[1].jpg** **(ABIM Policy)** | Evidence that learners were informed that their participation information would be shared with ABIM through PARS**[Refer to ABIM Verification of Participation Form]**  |
| **C:\Users\pmazmanian\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.IE5\1A9KW9KP\5279314121_13f5474394_z[1].jpg** **(ABIM Policy)** | Verification that the number of MOC points submitted for the participant is equivalent to the amount of CME claimed for the activity for the ABIM diplomats reported in PARS**[Refer to ABIM Verification of Participation Form]** |
| **C:\Users\pmazmanian\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.IE5\1A9KW9KP\5279314121_13f5474394_z[1].jpg** **(ABIM Policy)** |  If participant data (individually or in aggregate) is to be shared with the funder of the activity or any other commercial entities, the participant must be informed prior to the activity. |

**If the activity was COMMERCIALLY SUPPORTED …**

|  |  |
| --- | --- |
| **Attachment 7** | The income and expense statement for this activity that details the receipt and expenditure of all of the commercial support. (C8 SCS 3.13) |
| **Attachment 8** | Each executed commercial support agreement for the activity. (C8 SCS 3.4-3.6) |
| **Attachment 9** | The commercial support disclosure information as provided to learners. (C7 SCS 6.3-6.5) |

**Note: If this activity is an enduring material, journal-based CME, or Internet CME, please include the actual CME product (or a URL and access code – if applicable) with this performance in practice abstract and attachments.**