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Feinberg School of Medicine

CME Bootcamp: Cloud CME for Conference Course Coordinators

December 2017

Presented by: Sheryl Corey, Jennifer Banys & Allison McCollum

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Introductions

-Rhea Alexis Banks (RSS Coordinator)
-Jennifer Banys (Senior Associate Administrator)
-Sheryl Corey (CME Director)
-Allison McCollum (Senior Associate Coordinator)
-Clara Schroedl (CME Medical Director)

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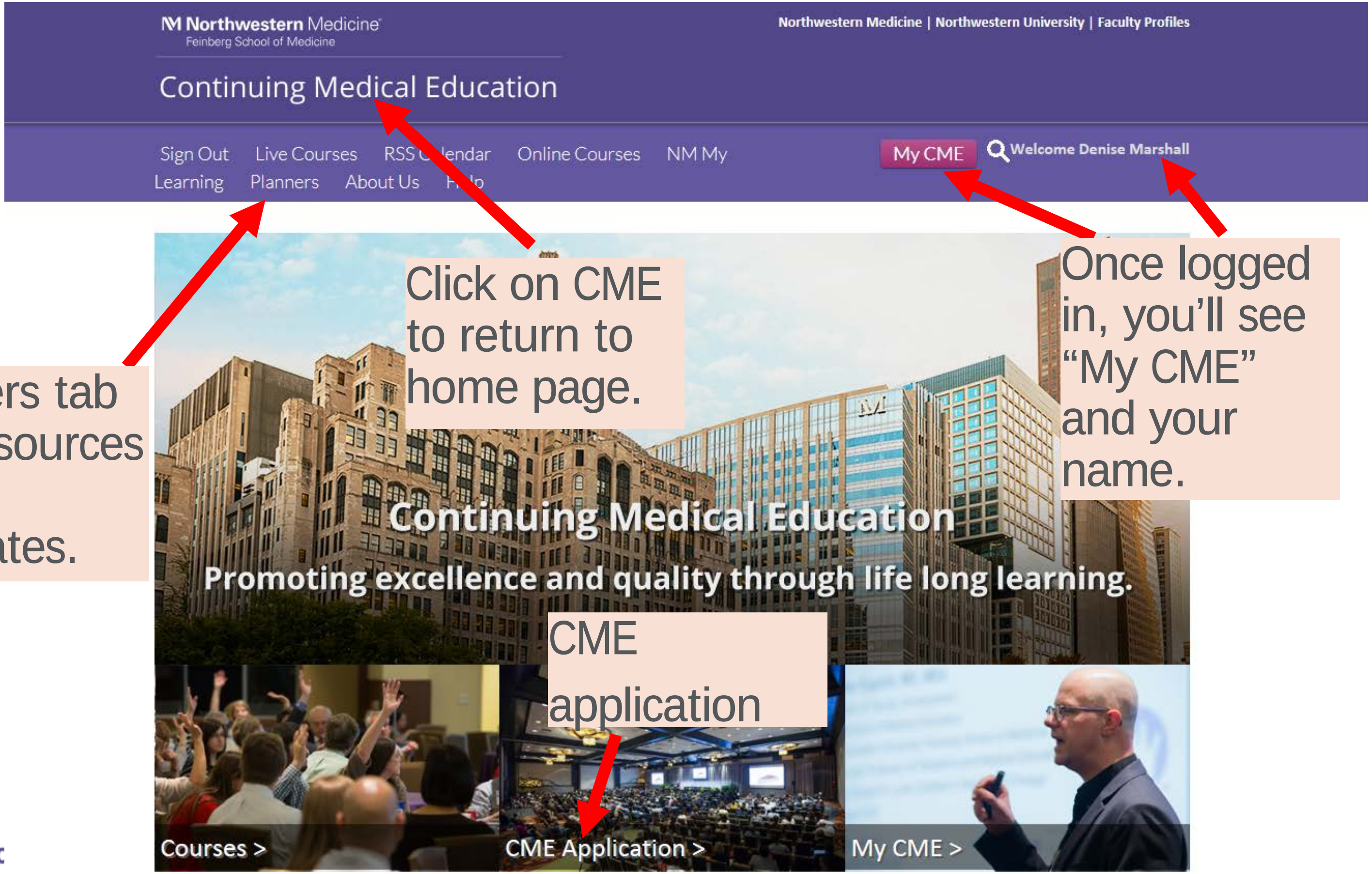
Agenda

- Overview of new website
- New application
- Disclosures
- Adding in attendance
- Evaluation
- Offerings & the future of the CME Portal

New website



Click on CME to return to home page.

Once logged in, you'll see "My CME" and your name.

Planners tab has resources and templates.

CME application

CME application

Start a new CME application

CME Application

Instructions: Complete the various sections of the application and scroll to the bottom of each form and click Save. Note that you will need the email addresses of any planners/faculty you identify in the application. The forms can be edited as needed until all required information is entered. When finished, click the 'Submit For Review' button to send it for peer review and possible approval. Review times vary and you will be contacted via email.

New Application

Admin User Lookup ☑ Hide Approved ☐ Hide Submitted

Export XLS

ACTIVITYID	ACTIVITY NAME	AUTHOR	LAST REVISED	DISCLOSURE STATUS			
	WR Delnor Perinatal M&M Review	Jennifer Perkins	11/27/2017 11:59:28 AM	Caroline Mills, MD does not have a disclosure on file. Caroline Mills, MD does not have a disclosure on file.	Disclosures Required	Copy	Delete
58706	2018 IRB Panel Meeting Series	Olga Jonas, MS, CIP	11/27/2017 11:25:35 AM	All disclosures on file.	Submit For Review	Copy	Delete
58488	WR-KH Breast Cancer Conference(Tumor Board)	Debbie Mitchell	11/22/2017 3:18:01 PM	All disclosures on file.	Activity Submitted	Copy	Delete

Existing application

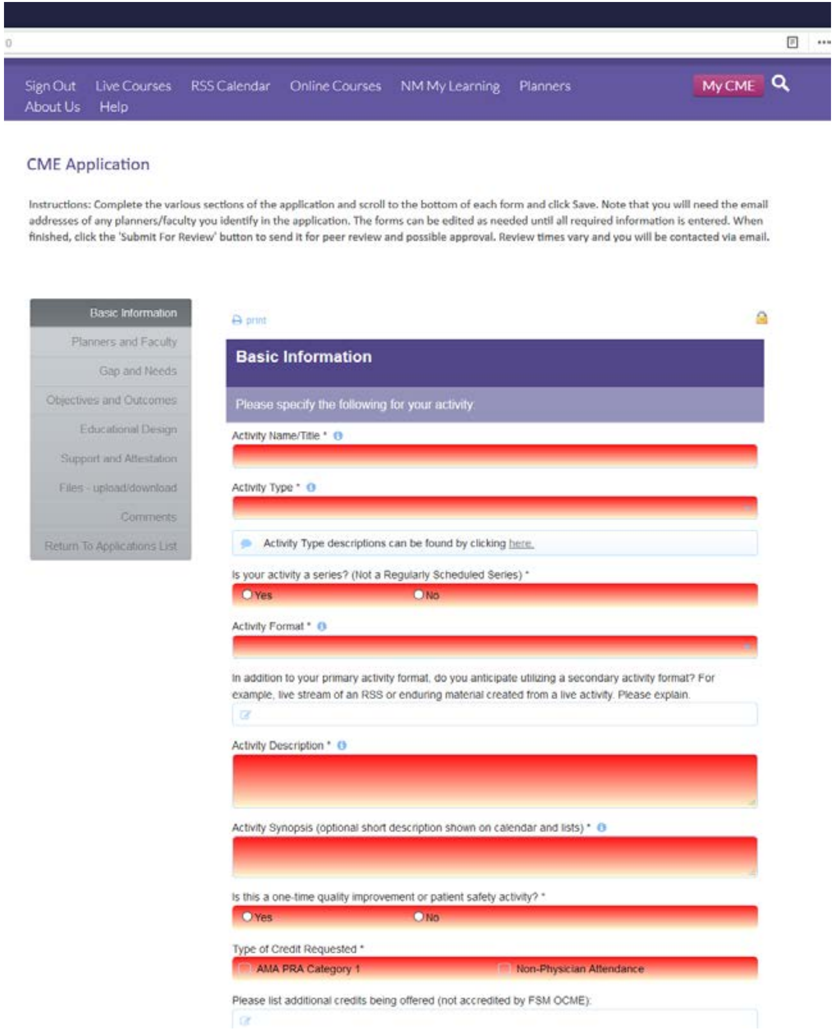
CME application

Caroline Mills, MD does not have a disclosure on file. Caroline Mills, MD does not have a disclosure on file.	Disclosures Required	Copy	Delete
All disclosures on file.	Submit For Review	Copy	Delete
All disclosures on file.	Activity Submitted	Copy	Delete

CME application

Multiple tabs

- **Basics**
- Planning & Faculty
- Documents
  - Faculty spreadsheet
  - Budget
  - Agenda
- Signature



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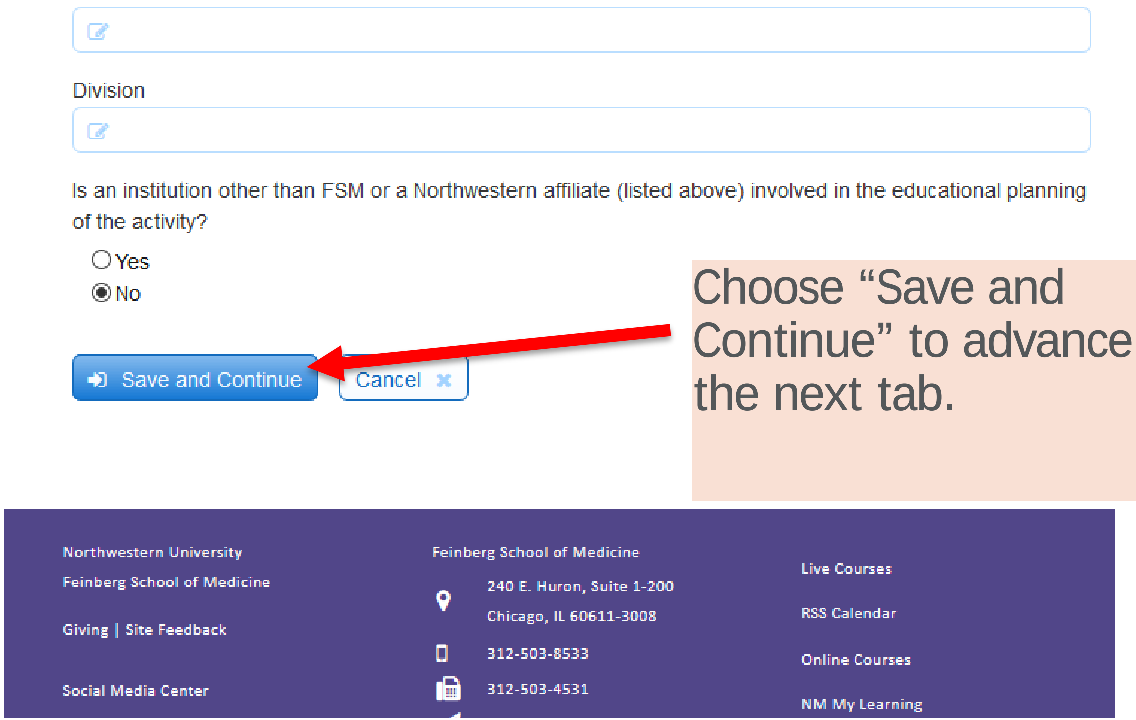
CME application

Multiple tabs

- **Basics**
- Planning & Faculty
- Documents
    - Faculty spreadsheet
    - Budget
    - Agenda
- Signature



Choose “Save and Continue” to advance to the next tab.

CME applicatio

member, click the red minus (-) icon to the left of the table row for that committee member.

	Email Address	Committee Member Full Name	Degree and Credentials	Institution	Role on Committee	Disclosure
	c-schroedl@northwest	Clara Schroedl, MD	MD	FSM	Course I	Disclosure
	jbarsuk@nm.org	Jeffrey Barsuk	MD, MS	FSM	Planninç	
	lwilliam@nm.org	Lisa Williams	MS, APN-CNS,	NM	Planninç	
	dwayne@northwestern	Diane B Wayne, MD	MD		Planninç	Disclosure

Multiple tabs

- Basics
- **Planning & Faculty**
- Documents
  - Faculty spreadsheet
  - Budget
  - Agenda
- Signature

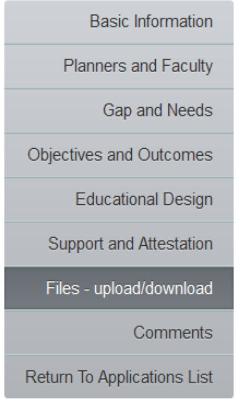
- Add email address then hit “tab”.
- Will auto populate name and degree and whether they have a disclosure form on file.
- If you add an email address and tab and nothing comes up for ***internal faculty***, then it’s the wrong email on file. If this happens, hit the red circle to delete.
- If you add an email address and tab and nothing comes up for ***external faculty***, then doing this will make them a profile on our system.

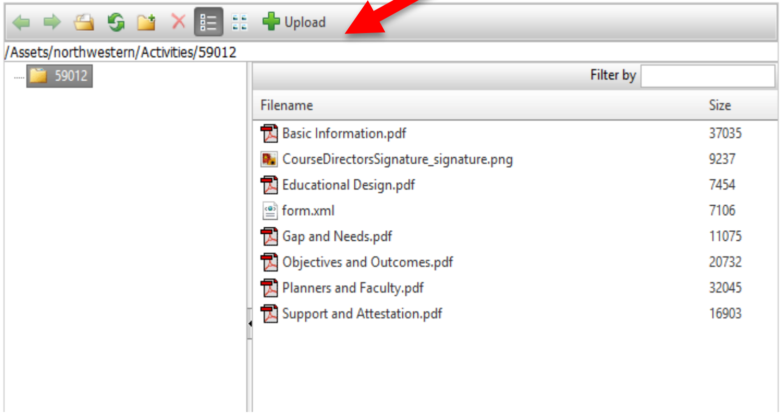
CME application

To add files to your application.

Multiple tabs

- Basics
- Planning & Faculty
- **Documents**
  - Faculty spreadsheet
  - Budget
  - Agenda
- Signature





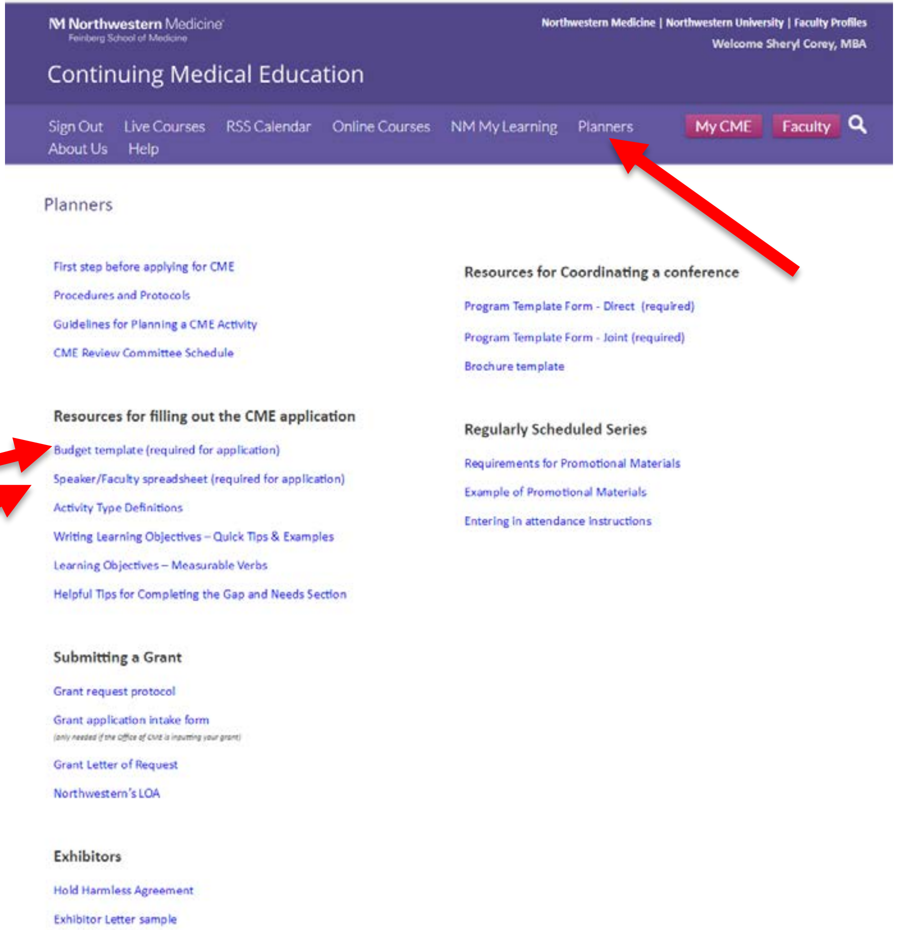
Documents needed:

- Faculty speaker list with disclosure information – template under “Planner” tab
- Budget – template under “Planner” tab
- Agenda
- Additional supporting documentation for application

CME application

Multiple tabs

- Basics
- Planning & Faculty
- **Documents**
  - Budget
  - Faculty spreadsheet
  - Agenda
- Signature



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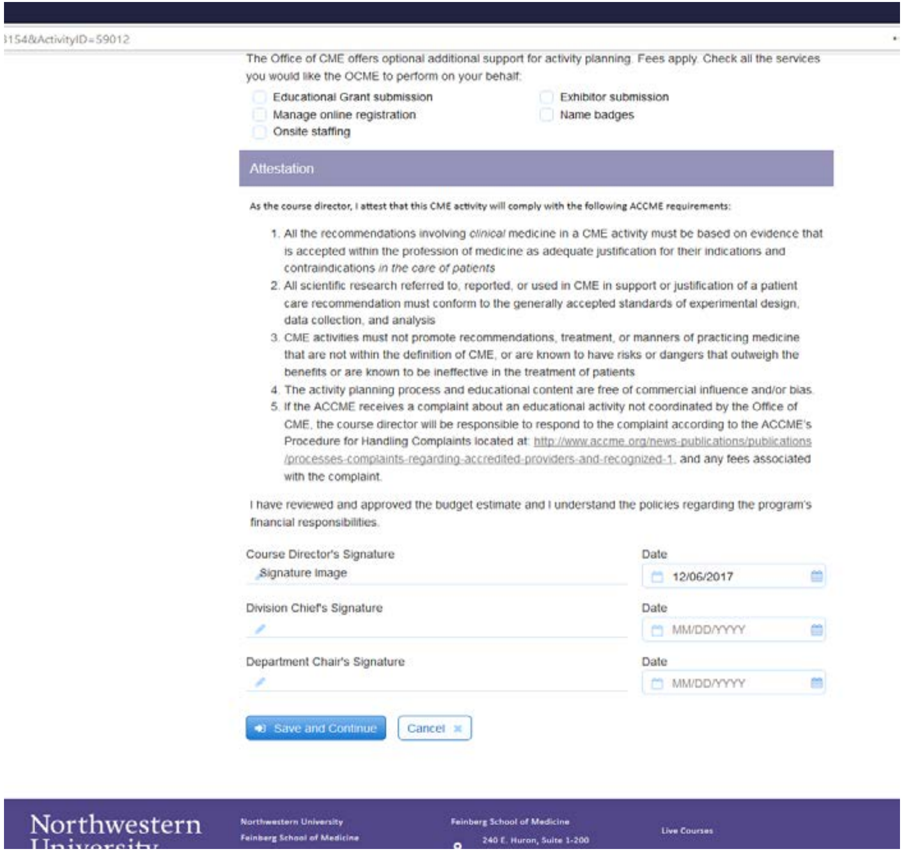
CME application

Multiple tabs

- Basics
- Planning & Faculty
- Documents
  - Faculty spreadsheet
  - Budget
  - Agenda
- **Signature**



3154&ActivityID=59012

The Office of CME offers optional additional support for activity planning. Fees apply. Check all the services you would like the OCME to perform on your behalf:

- Educational Grant submission
- Manage online registration
- Onsite staffing
- Exhibitor submission
- Name badges

Attestation

As the course director, I attest that this CME activity will comply with the following ACCME requirements:

1. All the recommendations involving *clinical* medicine in a CME activity must be based on evidence that is accepted within the profession of medicine as adequate justification for their indications and contraindications *in the care of patients*
2. All scientific research referred to, reported, or used in CME in support or justification of a patient care recommendation must conform to the generally accepted standards of experimental design, data collection, and analysis
3. CME activities must not promote recommendations, treatment, or manners of practicing medicine that are not within the definition of CME, or are known to have risks or dangers that outweigh the benefits or are known to be ineffective in the treatment of patients
4. The activity planning process and educational content are free of commercial influence and/or bias.
5. If the ACCME receives a complaint about an educational activity not coordinated by the Office of CME, the course director will be responsible to respond to the complaint according to the ACCME's Procedure for Handling Complaints located at: http://www.accme.org/news-publications/publications/processes-complaints-regarding-accredited-providers-and-recognized-1, and any fees associated with the complaint.

I have reviewed and approved the budget estimate and I understand the policies regarding the program's financial responsibilities.

Course Director's Signature	Date
Signature Image	12/06/2017
Division Chief's Signature	Date
	MM/DD/YYYY
Department Chair's Signature	Date
	MM/DD/YYYY

Save and Continue | Cancel

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Disclosure Forms

Who should complete the disclosure form?

- Course Director(s)
- Planning Committee Member(s)
- Faculty / Presenters

In other words…

anyone who has **influence** over the **educational content** of the activity.

Where can I find the disclosure form?

The most direct way to access the disclosure form is from the CME website:

www.cme.northwestern.edu

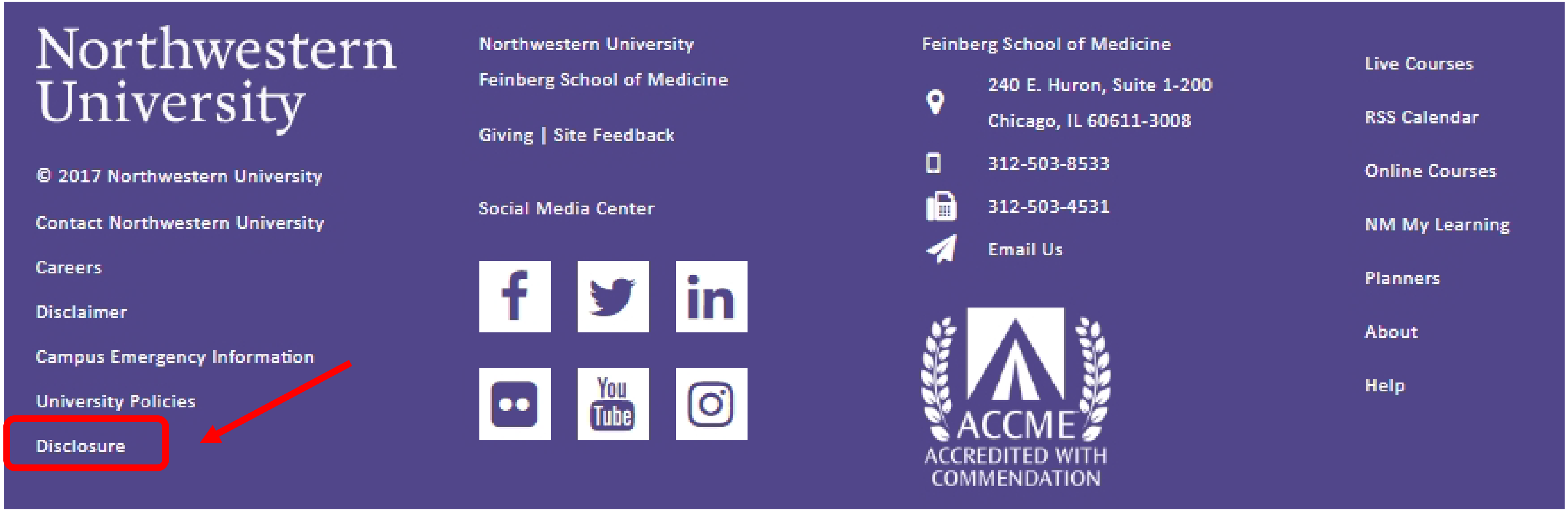
Northwestern Medicine | Northwestern University | Faculty Profiles

Continuing Medical Education

Sign In | Live Courses | RSS Calendar | Online Courses | NM My Learning | Planners | About Us | Help

Your medical education is a life-long pursuit rooted in your commitment to excellence in your field. The Office of Continuing Medical Education at Northwestern University Feinberg School of Medicine promotes excellence in patient care and safety through accredited education activities based on up-to-date, clinically relevant, scientifically rigorous, evidence based medical information.

Scroll to the bottom of the home page:



Alternatively, you can share the direct link:

https://northwestern.cloud-cme.com/Form.aspx?FormID=58

There's A Cheat Sheet!

Use the cheat sheet to help your Course Directors, Planners and Faculty login and find the disclosure form.

Yes, you can share it with them.

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Logout Attendee Portal

Disclosure of Relevant Financial Relationships for Continuing Professional Education

As a provider approved by the Accreditation Council for Continuing Medical Education (ACCME), Northwestern University Feinberg School of Medicine (NUFSM) requires written, signed disclosure of the existence of relevant financial relationships with industry from any individual in a position to control the content of a CME activity sponsored by NUFSM. Individuals who refuse to disclose relevant financial relationships or refuse to attest to the statements at the end of this form will be disqualified from all aspects of associated CME activities.

Please complete the information below, and then scroll to the bottom of the screen and click Submit. Note that any red highlighted items are required fields and the form cannot be submitted without an answer.

A commercial interest, as defined by the ACCME, is any entity producing, marketing, re-selling, or distributing healthcare goods or services consumed by, or used on, patients. The ACCME does not consider providers of clinical service directly to patients to be commercial interests.

Relevant financial relationships are those in which an individual (including spouse/domestic partner) has both:

1. A personal financial relationship (any amount) with a commercial interest in the past 12 months (whether relationship has ended or is currently active) AND

2. Control in planning or presenting educational content addressing specific products/agents/devices of the commercial interest (not simply a whole class of products or content about the whole disease class)

Within the past 12 months, have you and/or your spouse or life partner received support from, or had a relationship with, a commercial interest? *

- Yes. I or my spouse/life partner have at present and/or have had within the past 12 months a relevant financial relationship with a commercial interest as listed below.
- No

ATTESTATION OF CE VALUE STATEMENTS

Please indicate your understanding of and willingness to comply with each statement below. If any statements do not apply to your participation in this activity, please select N/A. If you require clarification of these statements or have questions regarding your ability to comply, please contact us immediately.

I have disclosed all relevant financial relationships and I will disclose this information to learners. *

Agree Disagree N/A

The content and/or presentation of the information with which I am involved will promote quality or improvements in health care and will not promote a specific proprietary business interest of a commercial interest. Content for this activity, including any presentation of therapeutic options, will be balanced, evidence-based and commercially unbiased. *

Agree Disagree N/A

I have not and will not accept any honoraria, additional payments or reimbursements directly from a commercial interest for my participation in this activity. *

Agree Disagree N/A

I understand that my presentation/content may need to be reviewed prior to this activity, and I will provide educational content and resources in advance as requested. *

Agree Disagree N/A

If I am providing recommendations involving clinical medicine, they will be based on evidence that is accepted within the profession of medicine as adequate justification for their indications and contraindications in the care of patients. All scientific research referred to will conform to the generally accepted standard of experimental design, data collection and analysis. *

Agree Disagree N/A

If I am discussing specific healthcare products or services, I will use generic names to the extent possible. If I need to use trade names, I will use trade names from several companies when available, and not just trade names from any single company. *

Agree Disagree N/A

If I am discussing any product use that is off label, I will disclose that the use or indication in question is not currently approved by the FDA. *

Agree Disagree N/A

If I have been trained or utilized by a commercial interest or its agent as a speaker (e.g. speaker's bureau) for any commercial interest, the promotional aspects of that presentation will not be included in any way with this activity. *

Agree Disagree N/A

If I am presenting research funded by a commercial interest, the information presented will be based on generally accepted scientific principals and methods, and will not promote the commercial interest of the funding company. *

Agree Disagree N/A

My signature below indicates that I have read and completed this form myself and to the best of my ability provided current and accurate information. I am aware that financial disclosure information provided in this form will be shared with learners prior to their engagement in this CME/CE activity.

Signature

Signature Image

Date *

Please review your responses above to make sure all required fields (* indicates required) are completed before continuing.

Submit Reset

If the person has no relationships to disclose…

- Click No
- Click Agree, Disagree or N/A for the remaining questions
- Sign and date at the bottom
- Click Submit
- ALL DONE!

But what if they have relationships to disclose?!?!

Within the past 12 months, have you and/or your spouse or life partner received support from, or had a relationship with, a commercial interest?

- (selected) Yes. I or my spouse/life partner have at present and/or have had within the past 12 months a relevant financial relationship with a commercial interest as listed below.
- No

Please specify your relationship:

Type of Financial Relationship

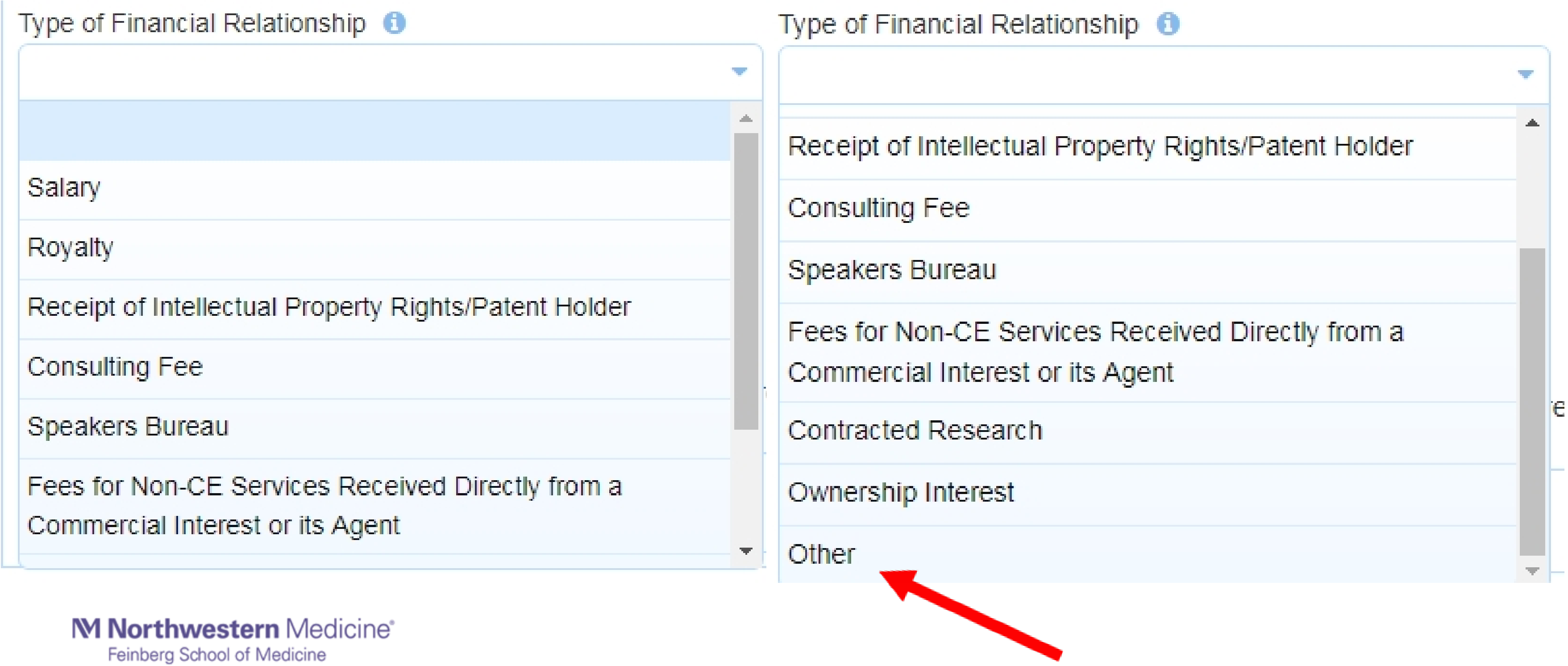
Indicate Applicable Manufacturer

Relationship, If other:

Manufacturer, If other:

Relationship Status: Current or date ended

Types of Financial Relationships



Applicable Manufacturer

Indicate Applicable Manufacturer

- Other
- 3F Therapeutics
- 3M
- Aastrom Biosciences, Inc.
- Abbott Laboratories
- Abbott Vascular
- Abiomed, Inc.
- Abt. Associates

Relationship Status

Within the past 12 months, have you and/or your spouse or life partner received support from, or had a relationship with, a commercial interest?

- (●) Yes. I or my spouse/life partner have at present and/or have had within the past 12 months a relevant financial relationship with a commercial interest as listed below.
- ( ) No

Please specify your relationship:

Type of Financial Relationship

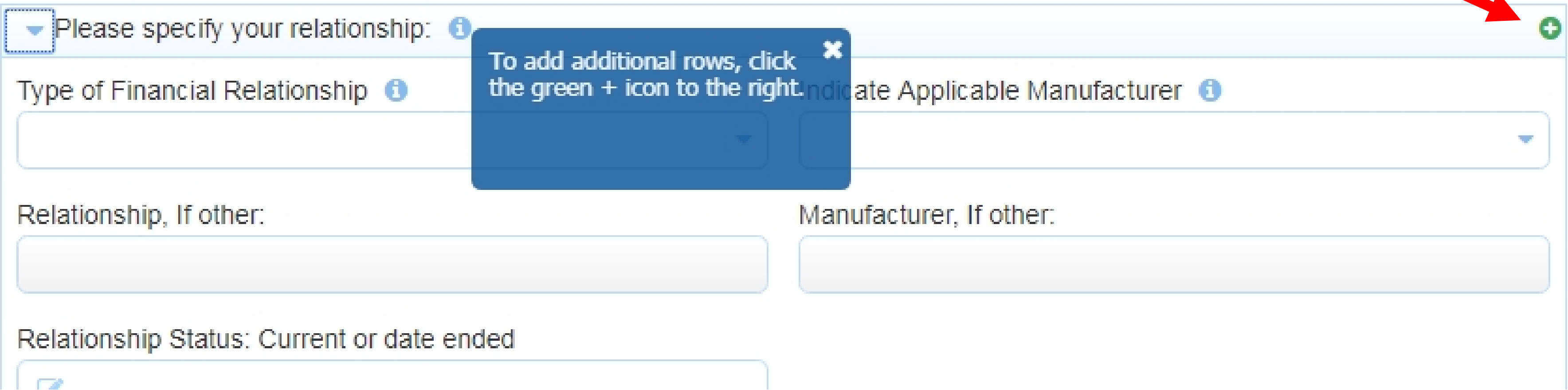
Indicate Applicable Manufacturer

Relationship, If other:

Manufacturer, If other:

Relationship Status: Current or date ended

More than one relationship?
ADD MORE ROWS!

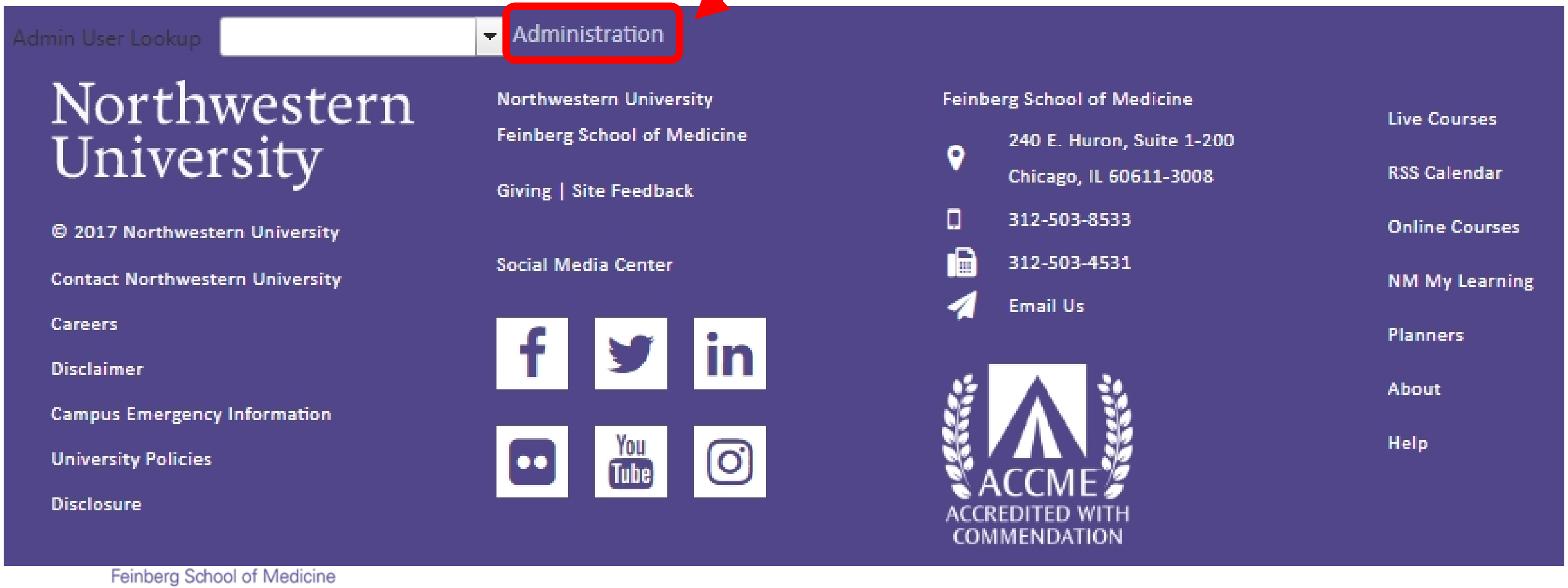


Once they have added all financial relationships…

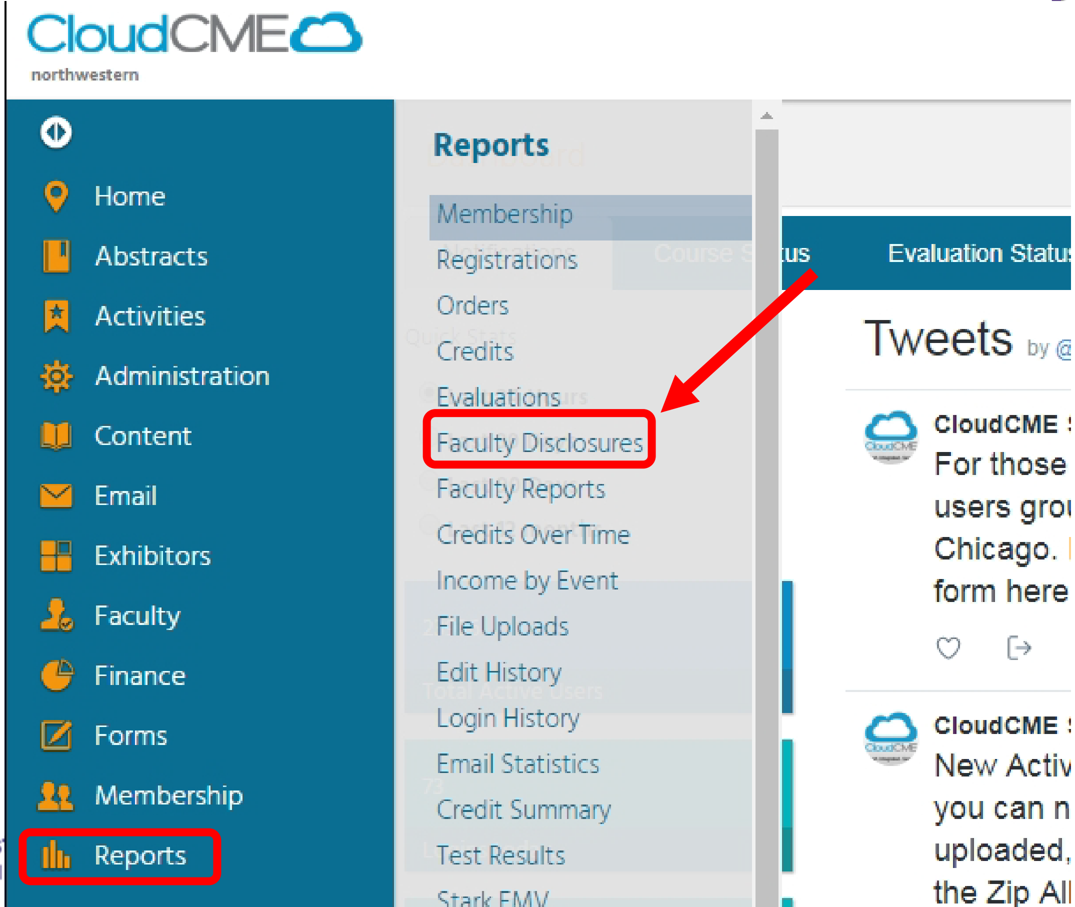
- Click Agree, Disagree or N/A for the remaining questions
- Sign and date at the bottom
- Click Submit
- ALL DONE!

Accessing disclosure forms for your activity

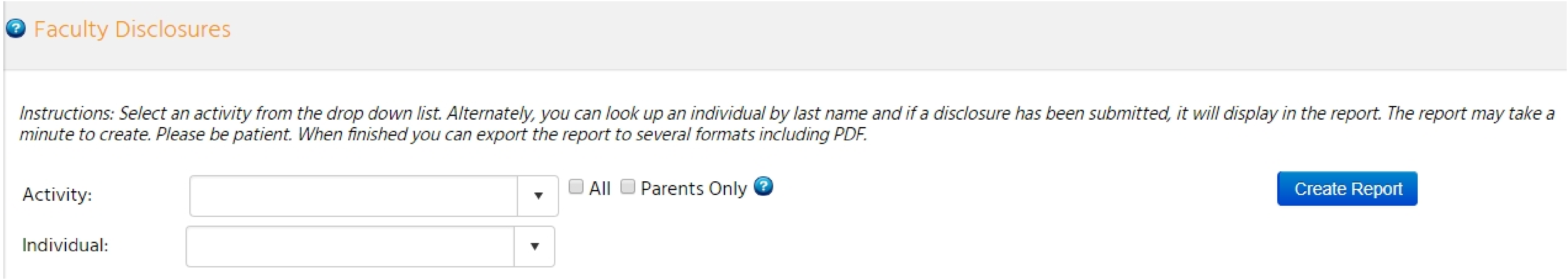
From the Home Screen, click on Administration at the bottom of the page:



CLOUD CME Administration Home page

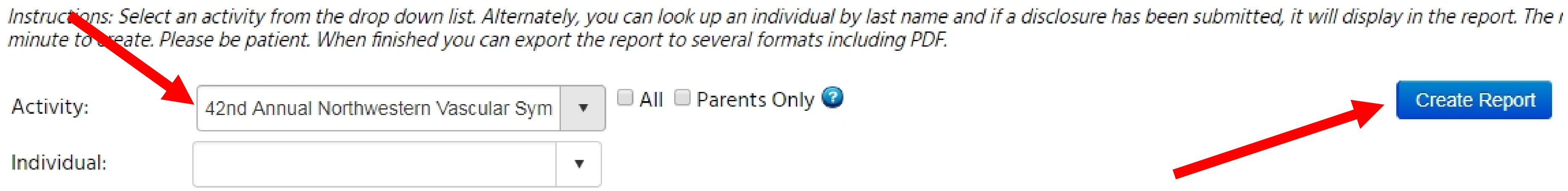


You can now look for any disclosure form either by Activity or by the person's last name.



Searching By Activity

- Begin typing the name of the activity in the box.
- Choose the correct activity from the drop down options
- Click Create Report (you'll see a small pop up window indicating the progress of loading your report)



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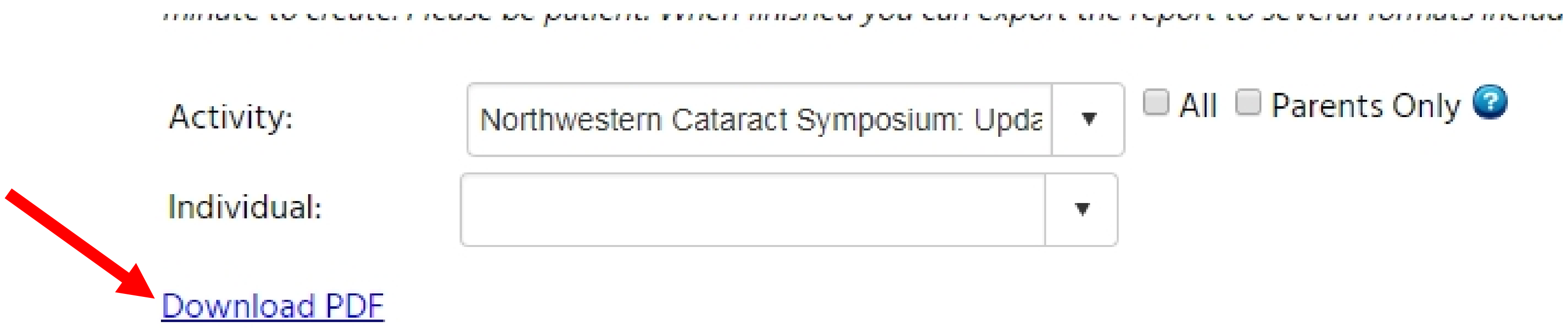
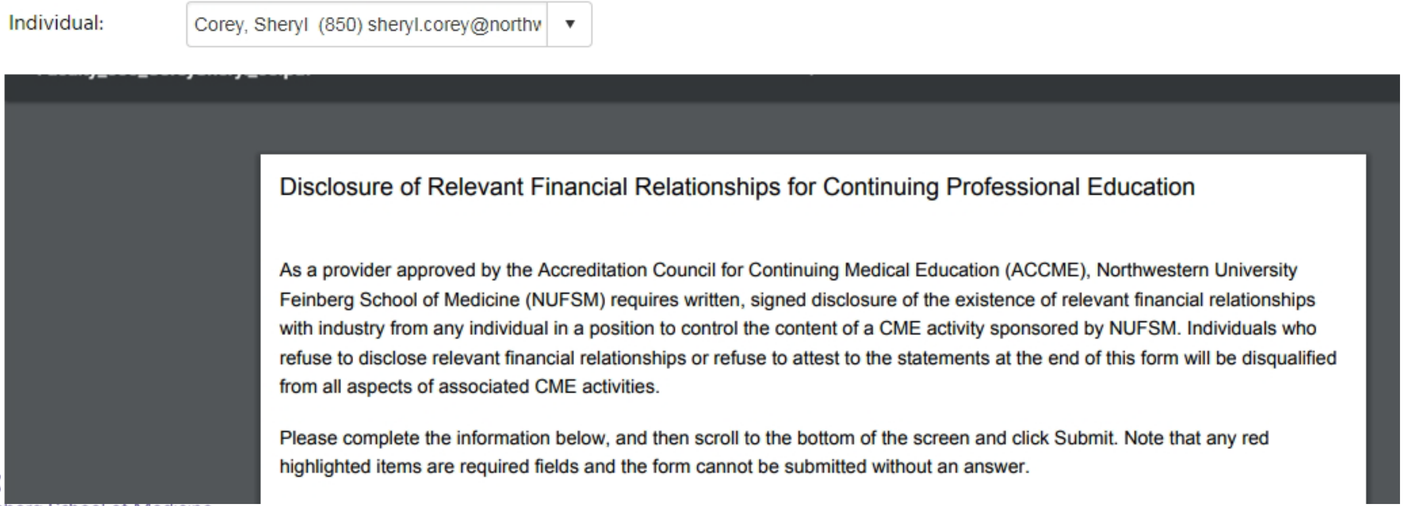
Searching By Activity

Once complete, you will be able to download/ print the PDFs of all the submitted disclosures associated with this activity



Searching By Individual

- Begin typing the person’s last name in the box.
- Choose the correct person from the drop down
- Their disclosure will appear (but only if they completed one!)


Individual: Corey, Sheryl (850) sheryl.corey@northv

Disclosure of Relevant Financial Relationships for Continuing Professional Education

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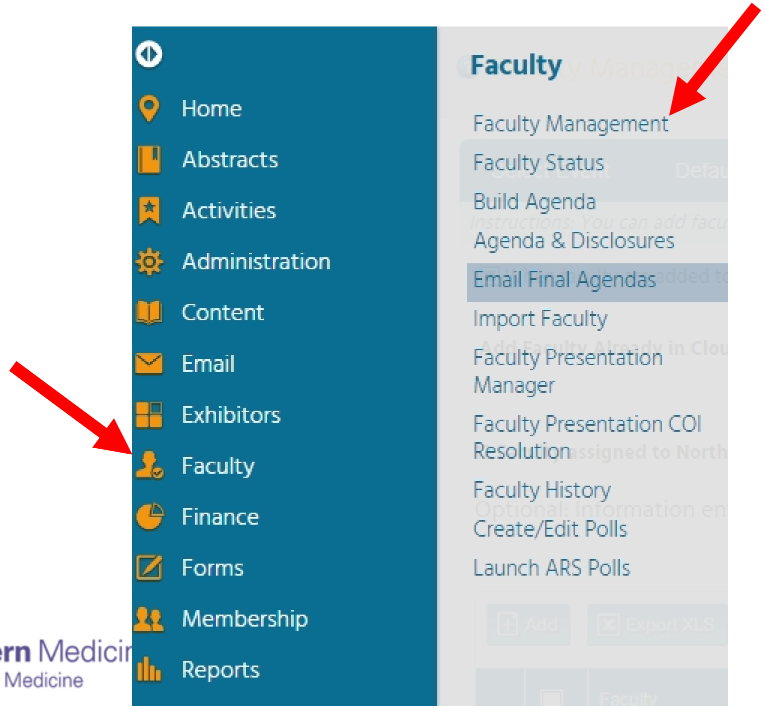
Please complete the information below, and then scroll to the bottom of the screen and click Submit. Note that any red highlighted items are required fields and the form cannot be submitted without an answer.

Another way to view Faculty and their disclosure is by going to Faculty → Faculty Management and searching by Activity.

This will be covered more in depth during our next training.



ANY QUESTIONS?

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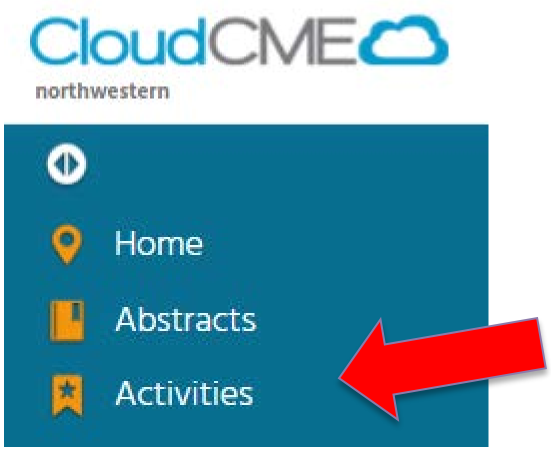
Recording Attendance

Online Registration Through Cloud CME

Online registration for your activity through the Cloud CME portal is a service that the Office of Continuing Medical Education can now provide (for an additional fee). Please ask your CME coordinator for details!

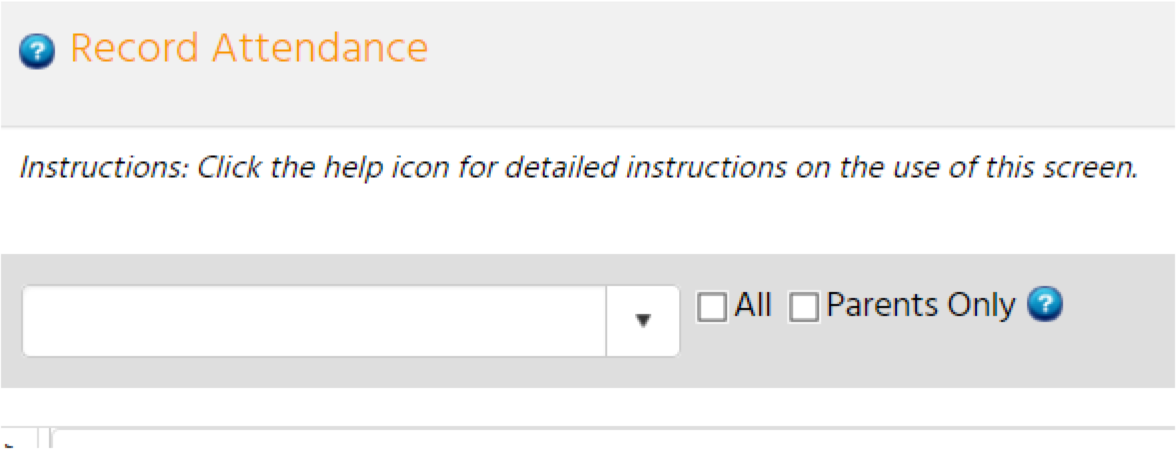
Recording Attendance – An Overview

Attendance can be recorded via the Activities → Record Attendance Screen



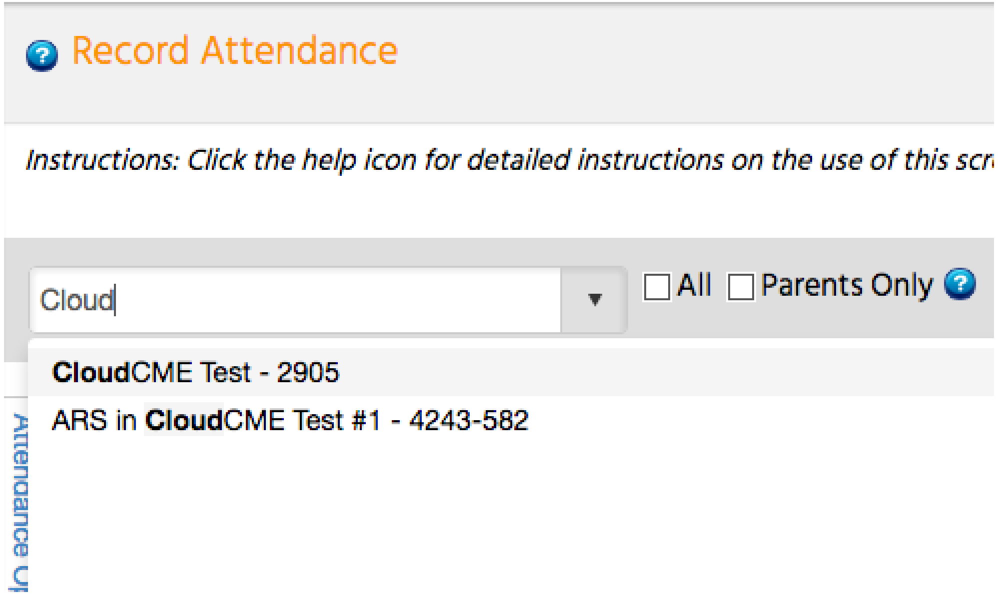
Recording Attendance – An Overview

You will now be at the main record attendance page:



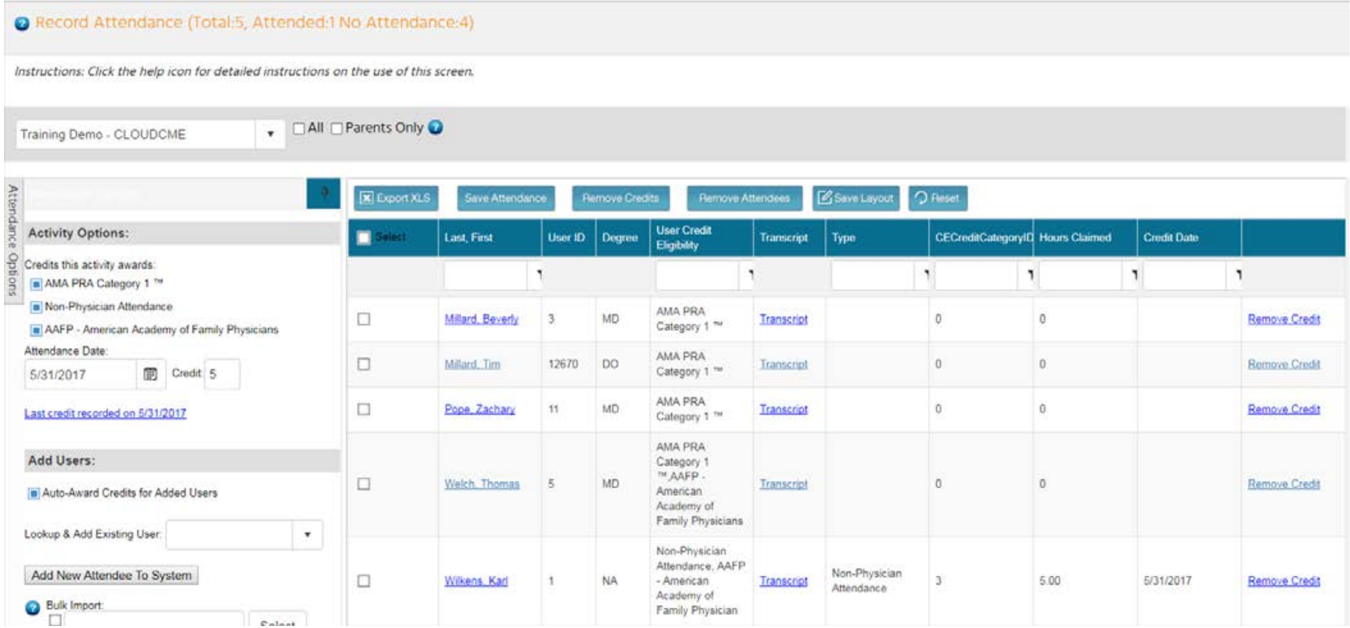
Recording Attendance – An Overview

Begin by typing the name of your activity (using the unique identifier) to select it from the dropdown menu. Click on the activity to select it:



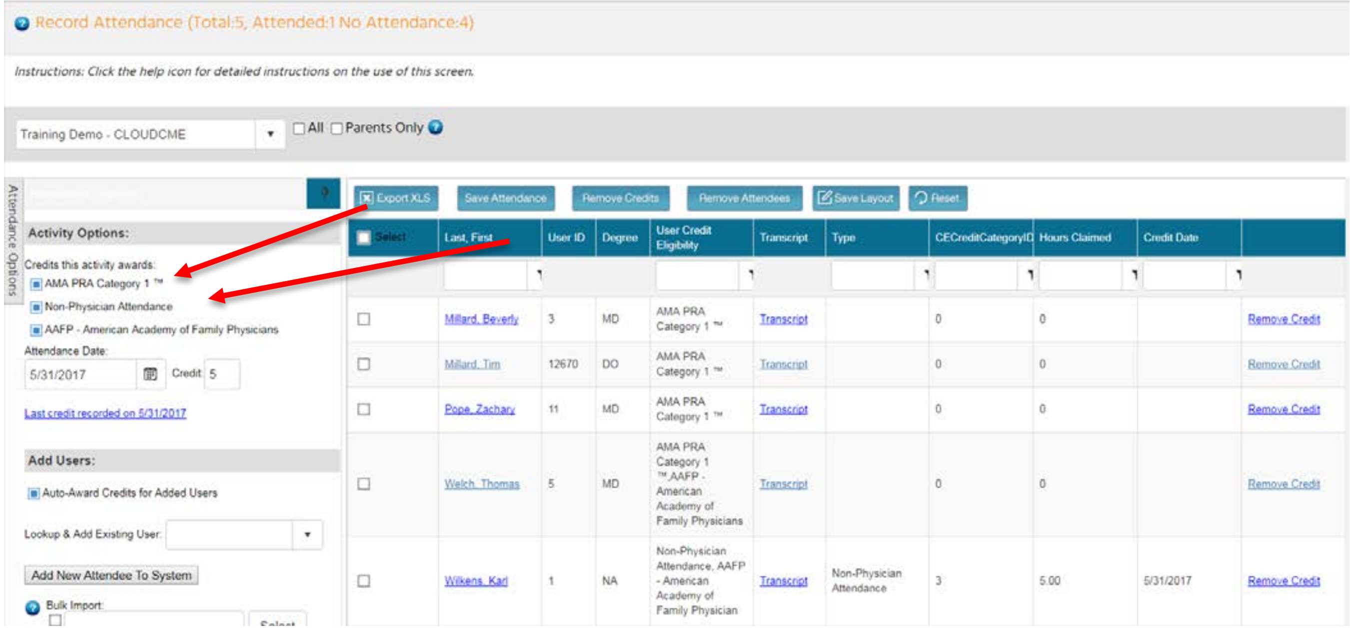
Recording Attendance – An Overview

The screen will then reload with details specific to your activity and the existing roster for the activity:



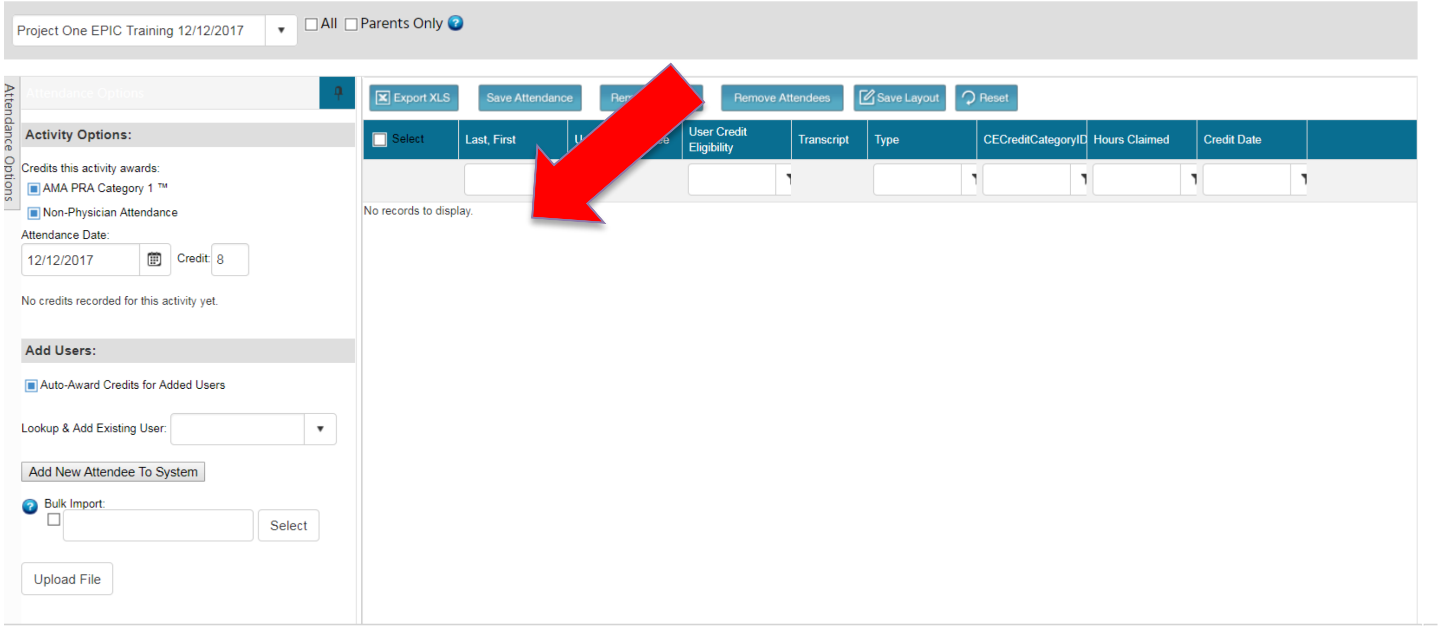
Recording Attendance - Overview

NOTE: Both PRA Category 1 ™ *and* Non-Physician Attendance credits should be selected; AAFP will not be an available option.



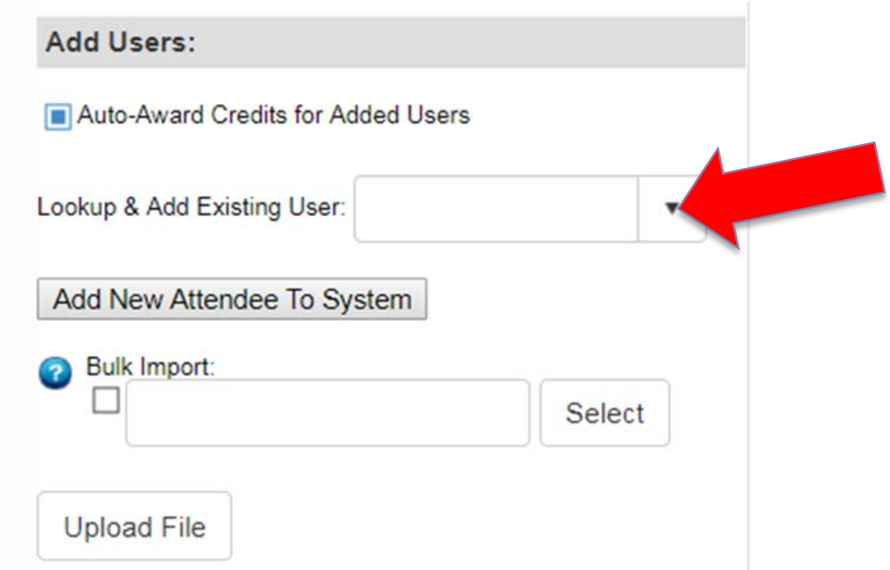
Recording Attendance – Non-Cloud CME Registration

If registration was NOT done via Cloud CME, there will be no records to display, and attendees will need to be added manually.



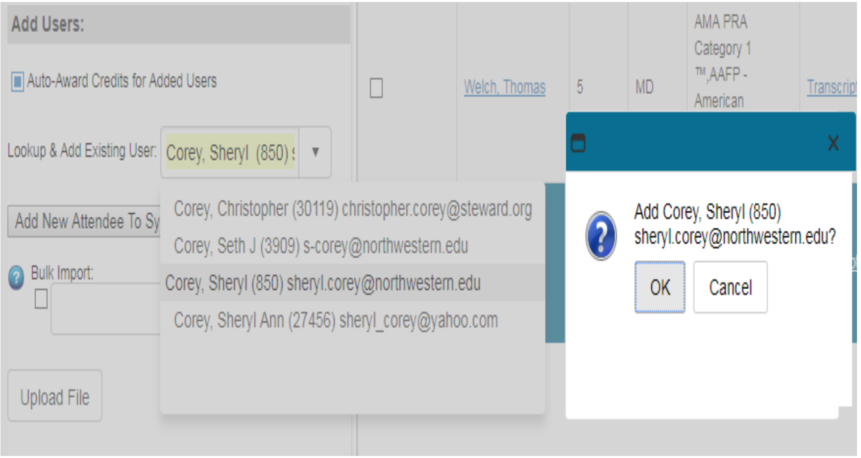
Recording Attendance – Adding Non-Cloud CME Users

Step 1: Determine if your attendee is already in the system by typing in the last name under “Lookup & Add Existing User”.



Recording Attendance – Adding Non-Cloud CME Users

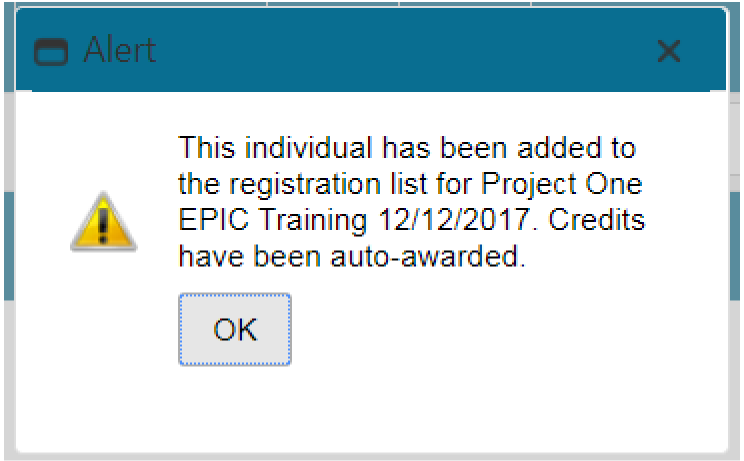
Step 2: If they are in the system, select their name form the drop down menu and click “OK”.



Recording Attendance – Adding Non-Cloud CME Users

Step 3:

A second pop-up box will appear confirming; click **"OK"**. The individual has now been added to your activity attendance roster.



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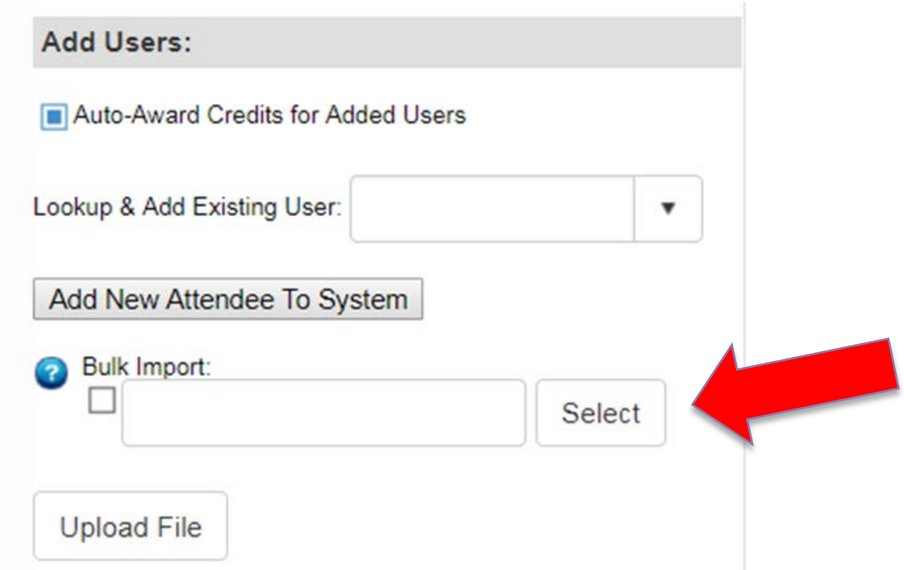
Recording Attendance – Adding Non-Cloud CME Users

If they are NOT in the system, add new attendee by checking “**Add New Attendee To System**”. You will need their **first name, last name, degree and email address**.



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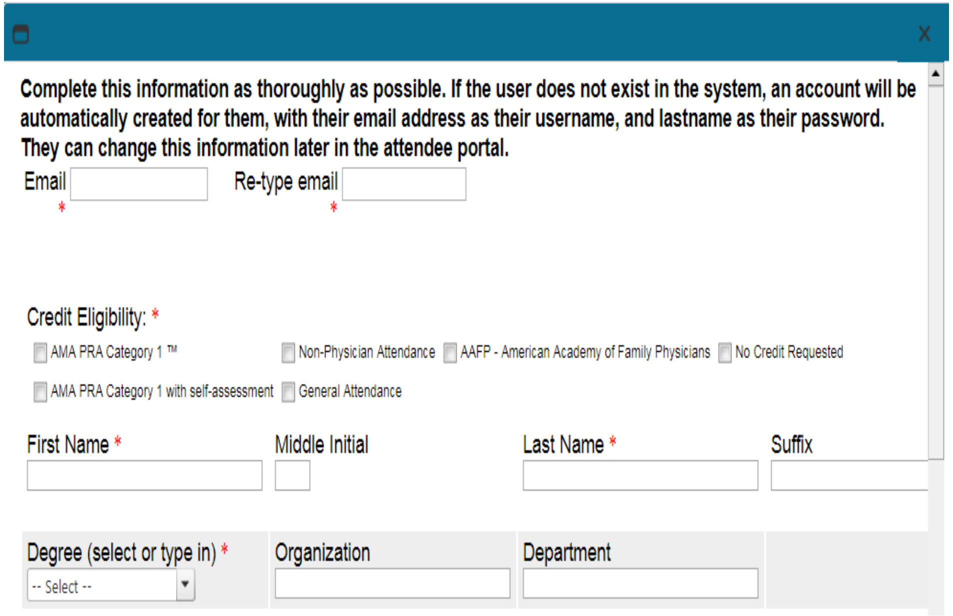
Recording Attendance – Adding Non-Cloud CME Users

Step 2:

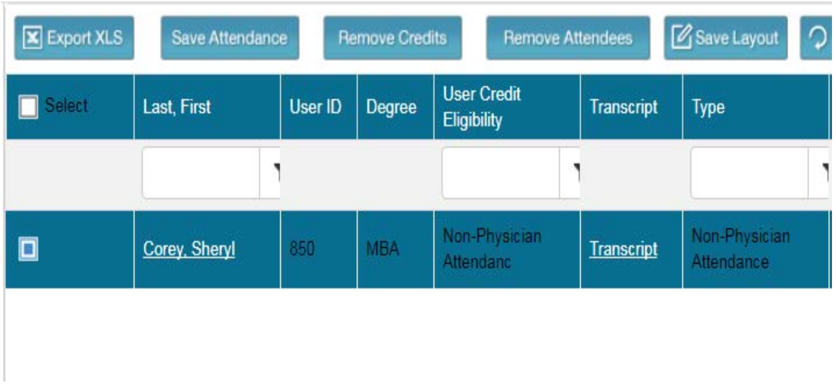
A pop-up box will appear. Enter the required information and click "Create New Attendee".

*For Credit eligibility, you will either select AMA PRA Category 1 (MD/DO) or Non-Physician Attendance (all others).



Recording Attendance – Adding Non-Cloud CME Users

Your user will now appear on the attendance roster, highlighted in **blue**.



Recording Attendance – Cloud CME Users

For those individuals already in the system from online registration through Cloud CME, they will NOT be highlighted (see below). Only those highlighted in blue can view the syllabus and evaluation.

Step 1: All attendees must be highlighted in blue to complete their evaluation.

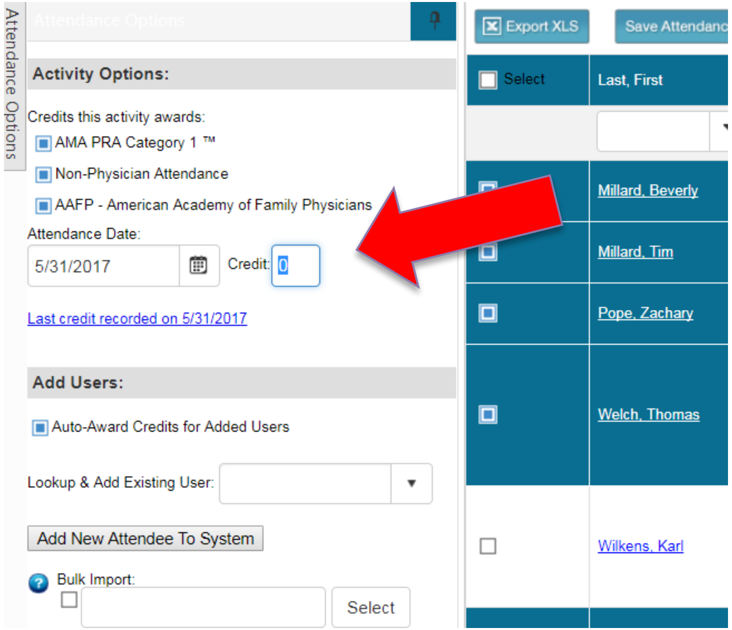
You will need to check/highlight the row of the attendee (make sure no one else is highlighted as to not change the other learners' credits).

Select	Last, First	User ID	Degree	User Credit Eligibility	Transcript	Type	CECreditCategoryID	Hours Claimed	Credit Date	
	Millard, Beverly	3	MD	AMA PRA Category 1 ™	Transcript		0	0		Remove Credit
	Millard, Tim	12670	DO	AMA PRA Category 1 ™	Transcript		0	0		Remove Credit
	Pope, Zachary	11	MD	AMA PRA Category 1 ™	Transcript		0	0		Remove Credit
	Welch, Thomas	5	MD	AMA PRA Category 1 ™,AAFP - American Academy of Family Physicians	Transcript		0	0		Remove Credit

Recording Attendance – Cloud CME Users

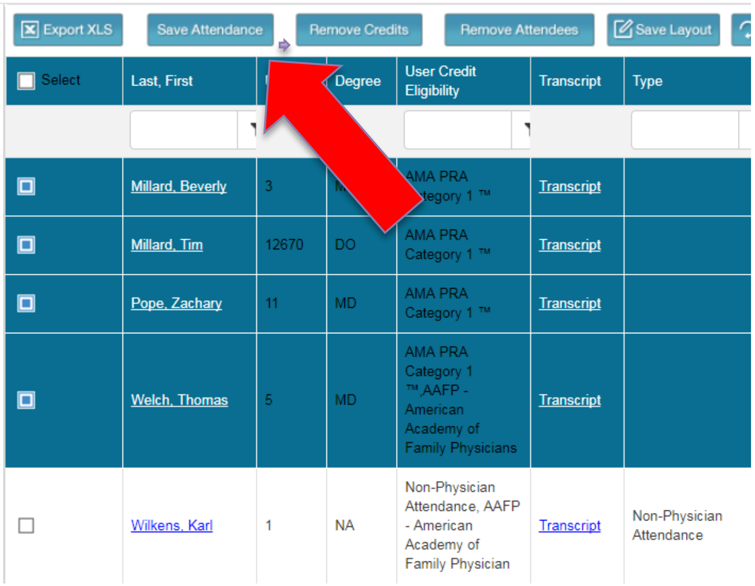
Step 2: Change the number of credits to "0".

*Please note: If you will not be requiring your attendees to complete an evaluation in order to get CME credit (i.e., *you* will be entering the credits directly), you can leave the number of credits as is – you do not need to change to "0".



Recording Attendance – Cloud CME Users

Step 3: click “**Save Attendance**”.



Select	Last, First		Degree	User Credit Eligibility	Transcript	Type
	Millard, Beverly	3	M	AMA PRA Category 1 ™	Transcript	
	Millard, Tim	12670	DO	AMA PRA Category 1 ™	Transcript	
	Pope, Zachary	11	MD	AMA PRA Category 1 ™	Transcript	
	Welch, Thomas	5	MD	AMA PRA Category 1 ™,AAFP - American Academy of Family Physicians	Transcript	
	Wilkens, Karl	1	NA	Non-Physician Attendance, AAFP - American Academy of Family Physician	Transcript	Non-Physician Attendance

Recording Attendance – Adding Users

Step 4:

In this example, Mr. Wilkens row will turn **blue**, and his credits will read "0". Once he goes into his evaluation, he'll be able to update the number of hours for which he participated.

	Wilkens, Karl	1	NA	Non-Physician Attendance,AAFP - American Academy of Family Physicians	Transcript		0	0.00	

QUESTIONS?

Evaluations

Can now be done online via Cloud CME!

There are 2 evaluation templates currently available:

- Basic evaluation *(strongly recommended)*
  - Participants can claim credits and answer all the CME required questions

- Extended evaluation
  - Same as above plus…
  - Includes each presentation & speaker for evaluation

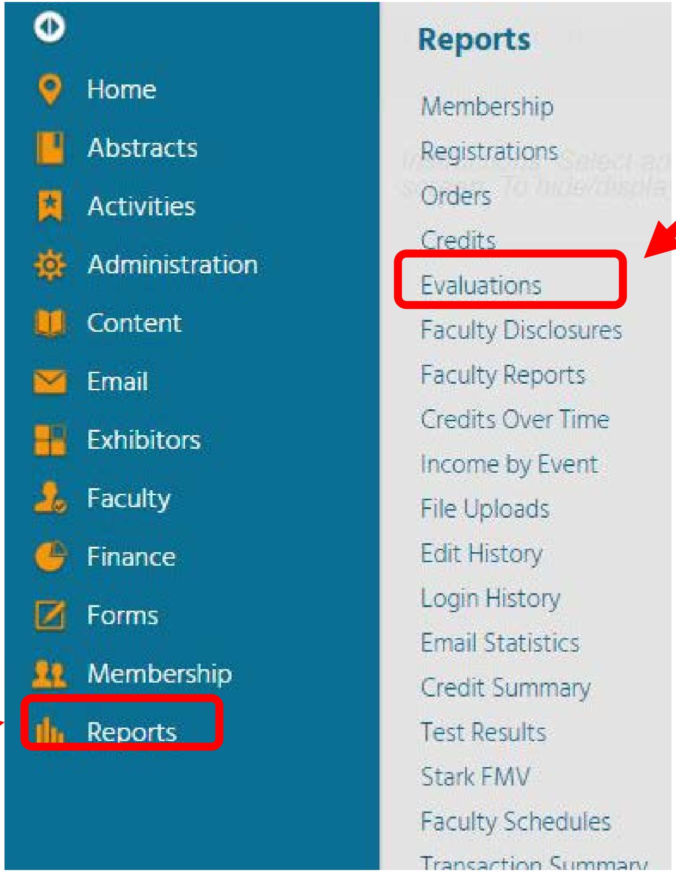
Things to know:

- Using the evaluation via Cloud CME is not *currently* required…although we strongly recommend it.

- If you wish to use the online evaluation, simply communicate to your coordinator which template you want to use and they will set it up for you.
  - Using the extended evaluation will require that you first add your complete agenda with speakers into Cloud CME.

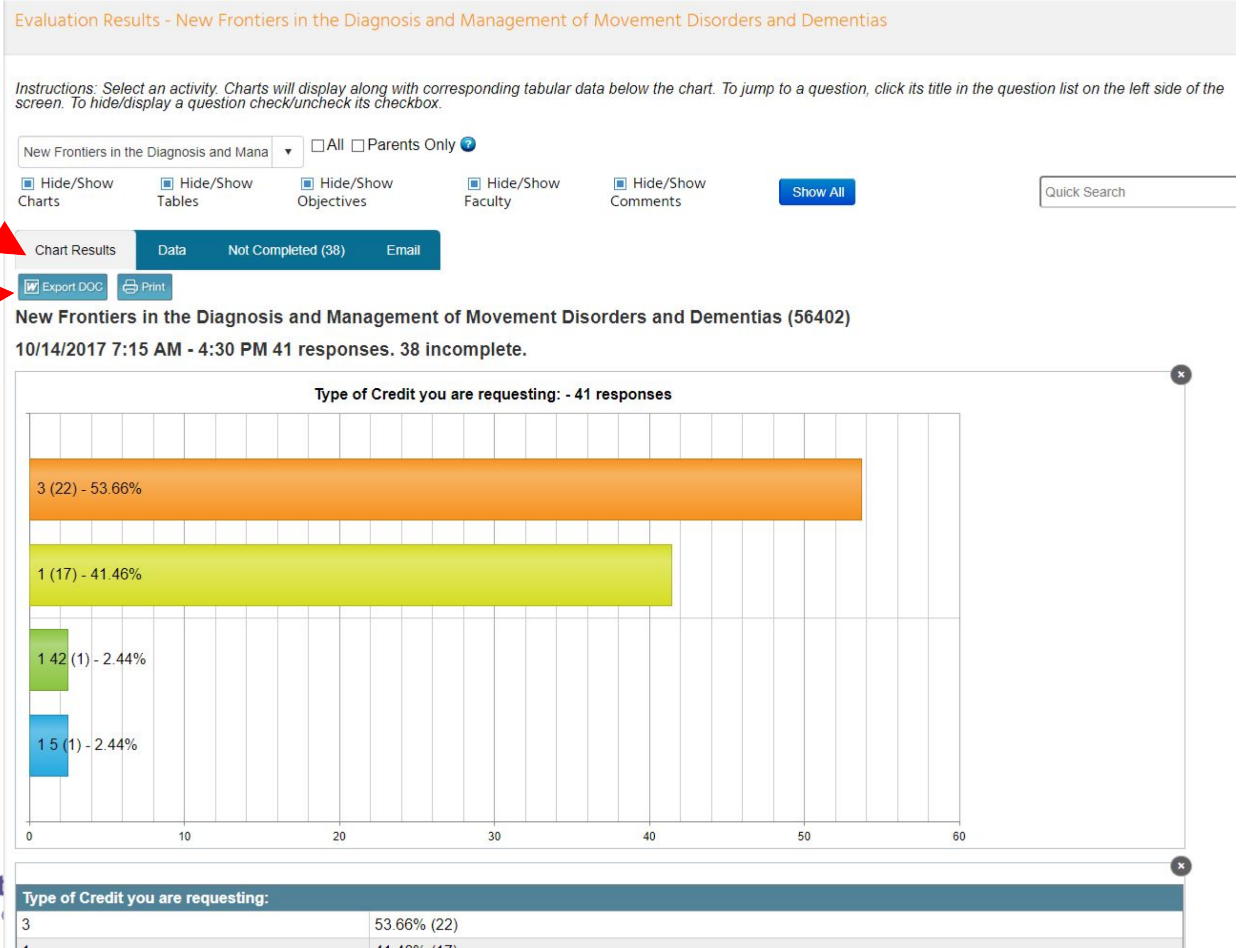
- Once the eval is connected to your program, you are responsible for management, downloading reports, etc.

To access Evaluation Reports start from the CLOUD CME administration home page

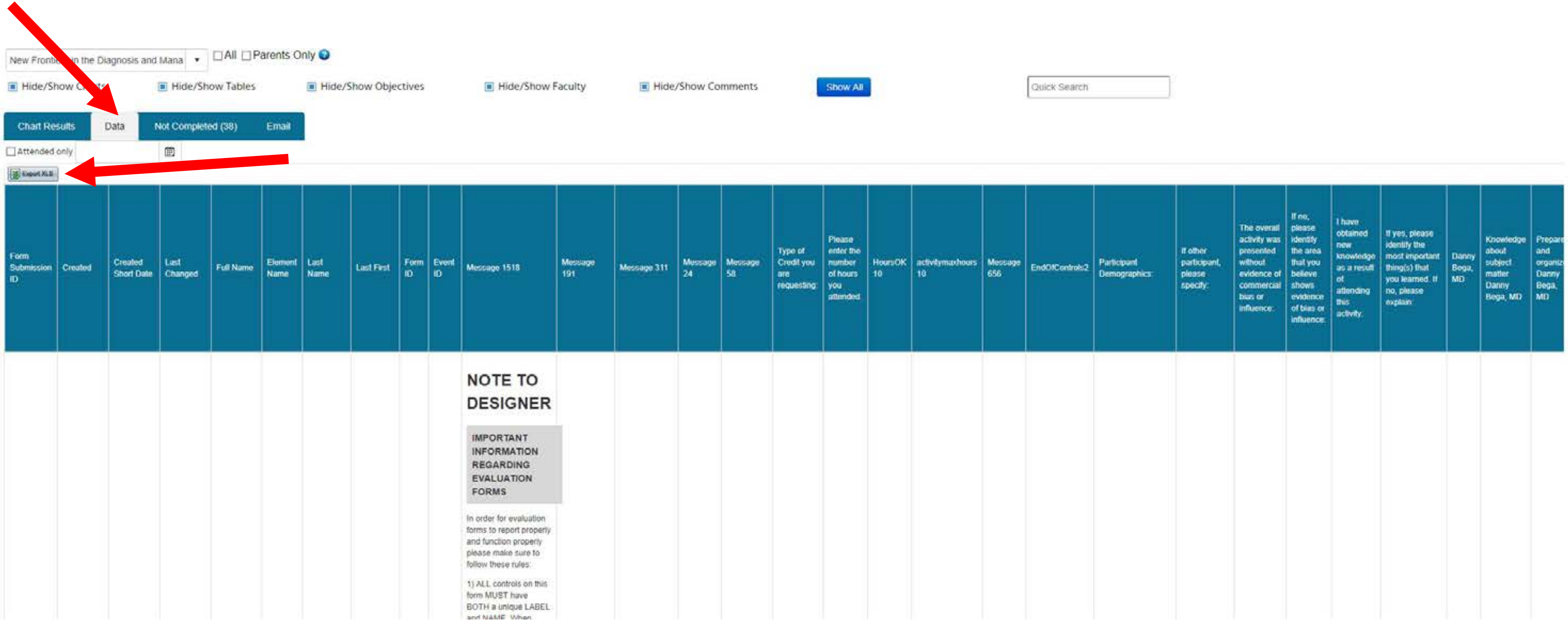


Search by Activity name

The Chart Results report is the first report you will see:



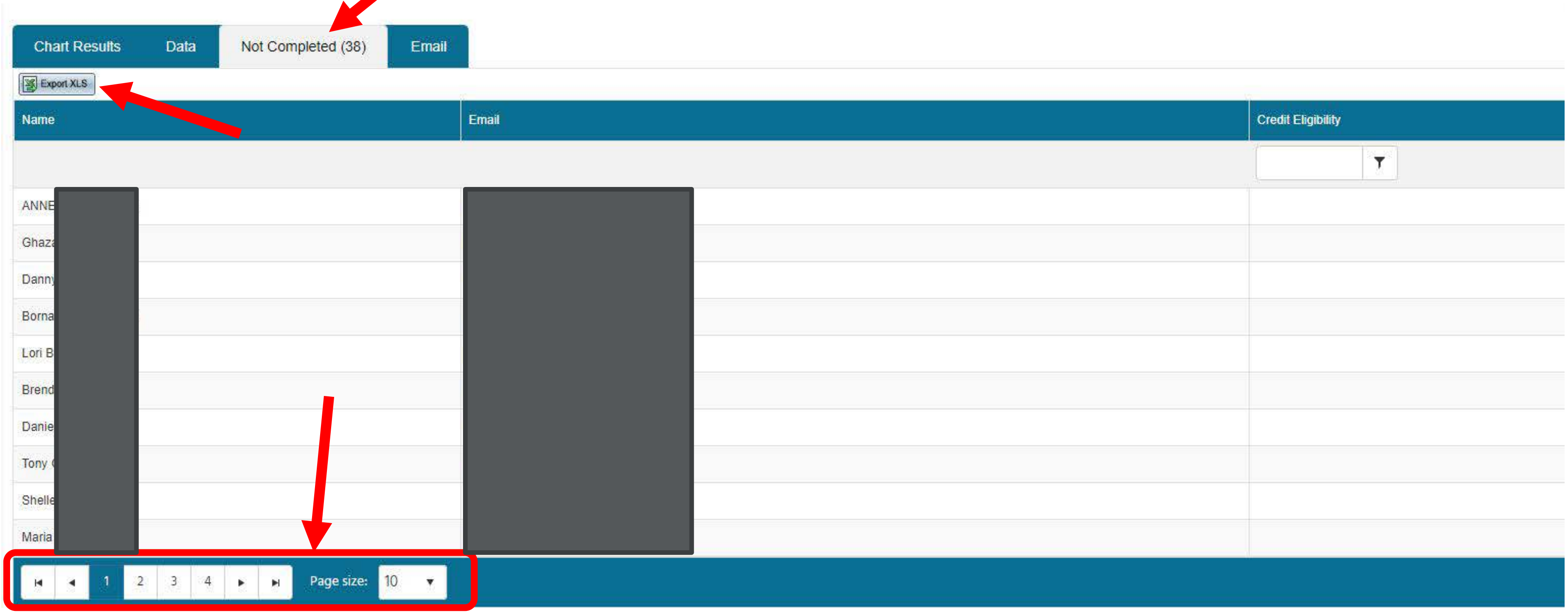
Next is the Data Report:



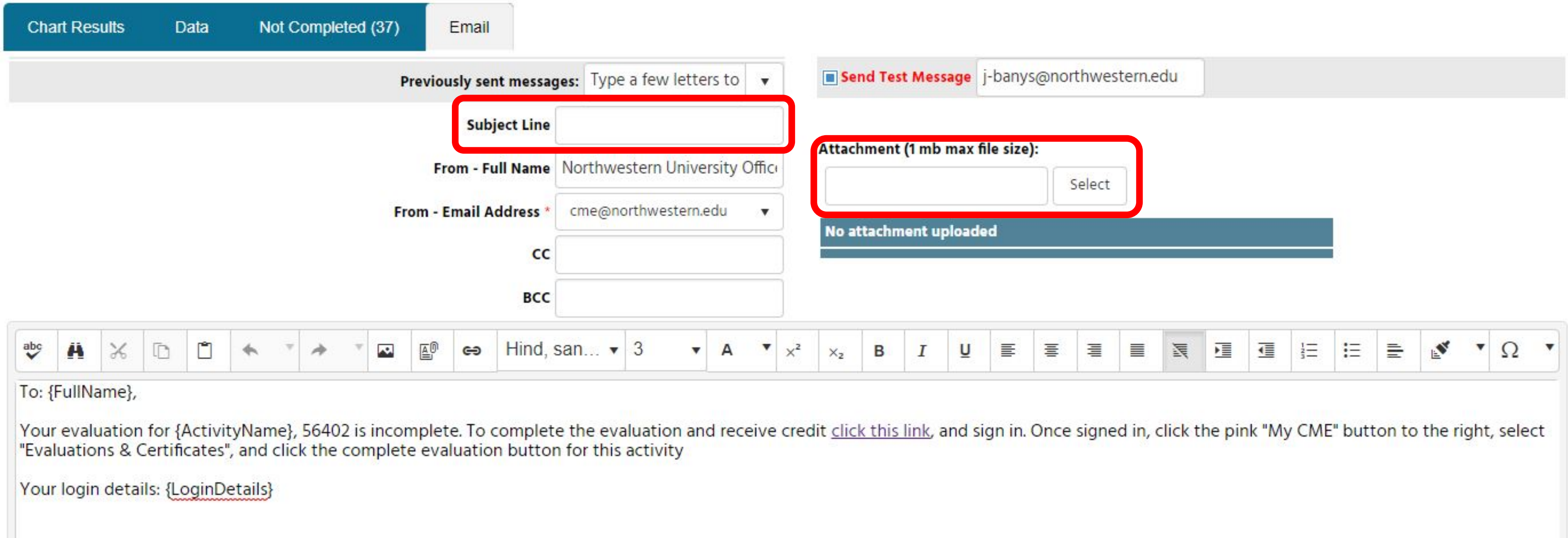
Downloaded Data report shows in an Excel Spreadsheet:

	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T	U	V	W	X	Y	Z
1	FormSubn	Created	CreatedSh	LastChang	FullName	ElementNa	LastName	LastFirst	FormID	EventID	NoteToDes	evaluationt	eventdetail	EndOfCont	CreditConf	PhysicianT	HoursClair	HoursOK	activitymax	MaxCredit	EndOfCont	Participant	IfOtherPart	WasThisA	IfNotFreeO	WereYo
2	1041	########	43024	########	[redacted]	[redacted]	[redacted]	[redacted]	104	56402	<h1>NOTE	New Fronti	Northweste	End of sec	You canno	1	8		8		End of sec	Physician_	(MD/DO)	Yes		Yes
3	1039	########	43024	########	[redacted]	[redacted]	[redacted]	[redacted]	104	56402	<h1>NOTE	New Fronti	Northweste	End of sec	You canno	3	8		8		End of sec	Other	CME Adm	Yes		Yes
4	1446	########	43040	########	[redacted]	[redacted]	[redacted]	[redacted]	104	56402	<h1>NOTE	New Fronti	Northweste	End of sec	You canno	3	8		8		End of sec	Other	Occupatio	Yes		Yes
5	1020	########	43023	########	[redacted]	[redacted]	[redacted]	[redacted]	104	56402	<h1>NOTE	New Fronti	Northweste	End of sec	You canno	1	6		8		End of sec	Physician_	(MD/DO)	Yes		Yes
6	1124	########	43025	########	[redacted]	[redacted]	[redacted]	[redacted]	104	56402	<h1>NOTE	New Fronti	Northweste	End of sec	You canno	1	8		8		End of sec	Physician_	(MD/DO)	Yes		Yes
7	1264	########	43032	########	[redacted]	[redacted]	[redacted]	[redacted]	104	56402	<h1>NOTE	New Fronti	Northweste	End of sec	You canno	3	8		8		End of sec	Other	Occupatio	Yes		No
8	1389	########	43037	########	[redacted]	[redacted]	[redacted]	[redacted]	104	56402	<h1>NOTE	New Fronti	Northweste	End of sec	You canno	3	8		8		End of sec	Other	Physical T	Yes		Yes
9	1025	########	43023	########	[redacted]	[redacted]	[redacted]	[redacted]	104	56402	<h1>NOTE	New Fronti	Northweste	End of sec	You canno	3	8		8		End of sec	Other	Physical T	Yes		Yes
10	1295	########	43033	########	[redacted]	[redacted]	[redacted]	[redacted]	104	56402	<h1>NOTE	New Fronti	Northweste	End of sec	You canno	1	8		8		End of sec	Physician_	(MD/DO)	Yes		Yes
11	1273	########	43032	########	[redacted]	[redacted]	[redacted]	[redacted]	104	56402	<h1>NOTE	New Fronti	Northweste	End of sec	You canno	3	8		8		End of sec	Other	Physical T	Yes		Yes
12	1149	########	43026	########	[redacted]	[redacted]	[redacted]	[redacted]	104	56402	<h1>NOTE	New Fronti	Northweste	End of sec	You canno	3	8		8		End of sec	Other	Physical T	Yes		Yes
13	1128	########	43025	########	[redacted]	[redacted]	[redacted]	[redacted]	104	56402	<h1>NOTE	New Fronti	Northweste	End of sec	You canno	3	8		8		End of sec	Other	Occupatio	Yes		Yes
14	1259	########	43031	########	[redacted]	[redacted]	[redacted]	[redacted]	104	56402	<h1>NOTE	New Fronti	Northweste	End of sec	You canno	1	8		8		End of sec	Physician_	(MD/DO)	Yes		Yes
15	1051	########	43024	########	[redacted]	[redacted]	[redacted]	[redacted]	104	56402	<h1>NOTE	New Fronti	Northweste	End of sec	You canno	3	8		8		End of sec	Other	Physical T	Yes		Yes
16	1260	########	43031	########	[redacted]	[redacted]	[redacted]	[redacted]	104	56402	<h1>NOTE	New Fronti	Northweste	End of sec	You canno	1	8		8		End of sec	Midlevel_Pracitioner_(		Yes		Yes
17	1180	########	43027	########	[redacted]	[redacted]	[redacted]	[redacted]	104	56402	<h1>NOTE	New Fronti	Northweste	End of sec	You canno	3	8		8		End of sec	RN/LPN		Yes		Yes
18	1093	########	43025	########	[redacted]	[redacted]	[redacted]	[redacted]	104	56402	<h1>NOTE	New Fronti	Northweste	End of sec	You canno	1 42	8		8		End of sec	Physician_	(MD/DO)	Yes		Yes
19	1031	########	43024	########	[redacted]	[redacted]	[redacted]	[redacted]	104	56402	<h1>NOTE	New Fronti	Northweste	End of sec	You canno	1	8		8		End of sec	Physician_	(MD/DO)	Yes		Yes
20	1032	########	43024	########	[redacted]	[redacted]	[redacted]	[redacted]	104	56402	<h1>NOTE	New Fronti	Northweste	End of sec	You canno	1	8		8		End of sec	Physician_	(MD/DO)	Yes		No
21	1394	########	43038	########	[redacted]	[redacted]	[redacted]	[redacted]	104	56402	<h1>NOTE	New Fronti	Northweste	End of sec	You canno	1	8		8		End of sec	Physician_	(MD/DO)	Yes		Yes
22	1202	########	43028	########	[redacted]	[redacted]	[redacted]	[redacted]	104	56402	<h1>NOTE	New Fronti	Northweste	End of sec	You canno	3	8		8		End of sec	Other	Social Wo	Yes		Yes
23	1090	########	43025	########	[redacted]	[redacted]	[redacted]	[redacted]	104	56402	<h1>NOTE	New Fronti	Northweste	End of sec	You canno	3	8		8		End of sec	Other	Occupatio	Yes		Yes
24	1017	########	43022	########	[redacted]	[redacted]	[redacted]	[redacted]	104	56402	<h1>NOTE	New Fronti	Northweste	End of sec	You canno	3	8		8		End of sec	Other	Allied Heal	Yes		Yes

See who hasn’t completed the evaluation…



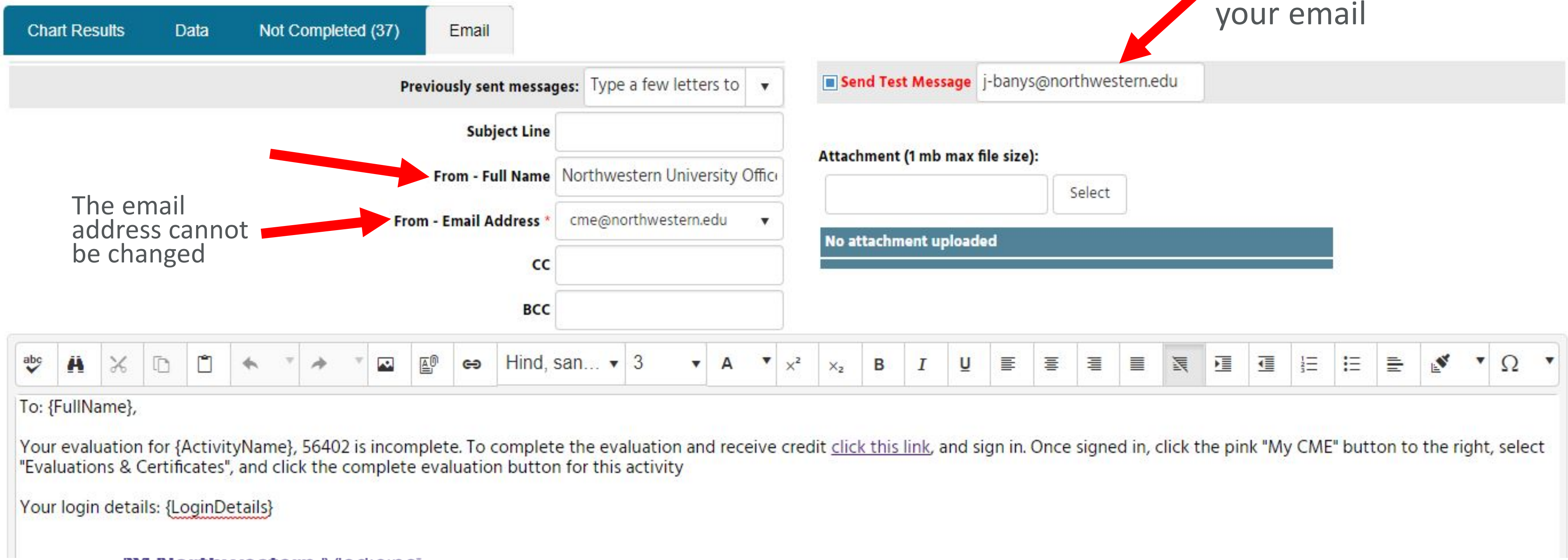
...and send them an email!



Change the Full Name field to <u>your</u> name!

This should autofill to your email

The email address cannot be changed



ANY QUESTIONS?

Northwestern Medicine
Feinberg School of Medicine

CME Offerings & the future of the CME portal

The Office of CME fees:

- No increase in Application or Administrative fees to FY 2018
- “Per certificate” now “Per participant”

CME Offerings & the future of the CME portal

The Office of CME Offerings:

- Online registrations through the CME Portal
- Grant submission
- Exhibitor management
- Printing of name badges
- Onsite staffing

CME Offerings & the future of the CME portal

The future:

- Trainings on online syllabus; mobile app; faculty management
- Vendor, Cloud CME, is continually making improvements.
    - Next roll out of updated portal – January 2018

Thank You!

Northwestern Medicine
Feinberg School of Medicine