

CHECKLIST RSS Enduring

Use this as your Learner's Information Document



Program Name:

Date

Estimated time (minutes) to complete

30

45

60

75

120

Title of the lecture

Objectives (at least one)

Speaker(s) name and any possible conflicts/disclosures if applicable

Is there anything to disclose

YES

NO

If YES, were all conflicts resolved

YES

NO

Any Commercial Support

YES

NO

If **YES**, please list:

Pre/Post-test questions, multiple choice (including answers)

Attached

Link to video

If you have any questions, please feel free to email karen.whitcomb@med.uvm.edu or mary.gagne@med.uvm.edu