# 2014 Application for Review of an Educational Program for Maintenance of Certification For Continuing Medical Education Programs (CME)

Once the Application is open, complete all parts of the editable document. Print your completed application, along with any attachments ( including the signed form ), your payment ( check or credit card ) and return it to the address or email indicated in the "How to Submit your application section of the application (Page 6 of the Provider Information Package).

## Section 1. Educational Program Identification

Sponsoring Institution:

Program Title:

Program Date: Program Time: Program Location:

Type of Program: ☐ Web-based ☐ Paper-based ☐ Lecture Other:

Enclose or attach a copy of the program or a representative sample.

☐ **Attachment A** Program/representative sample

Contact Name: *(to whom questions should be directed)*

Address:

Email: Telephone: Fax:

## Section 2. Continuing Medical Education

**A. Number of (Category 1) CME Credit Hours Approved for this Program:**

☐ **Attachment B: Documentation of CME Accreditation of Sponsoring Institution.** Please provide a copy of the letter or certificate from the ACCME or Canadian accreditation organization showing the current accreditation status of the sponsoring institution for granting CME credits, including the date of expiration.

☐ **Attachment C: Documentation of CME credits granted for this program.** Please provide a copy of the letter or certificate from the sponsoring institution confirming the number of CME credits granted for this program.

**D. Verify that your product meets the following requirements. Check all that apply.**

- ☐ Cover current knowledge and/or current best practices in one or more of the required competency areas in addiction medicine.
- ☐ Must award (Category1) CME credits.
- ☐ Meet the requirements of the ACCME or by the Royal College of Physicians and Surgeons of Canada.

## Section 3. Educational Program Content

**A. Please provide a description of your Program:**

**B. RELEVANT ABAM EXAMINATION CONTENT AREAS**

1. Definitions: ☐
2. Genetics: ☐
3. Pharmacokinetic and Pharmacodynamic Principles: ☐
4. Pharmacology: ☐
5. Neurobiology of Addiction: ☐
6. Epidemiological Concepts: ☐
7. Epidemiological Trends of Substance Use Disorders: ☐
8. Prevention: ☐
9. Screening, Assessment, and Brief Intervention: ☐
10. Overview of Addiction Treatment: ☐
11. Management of Inpatient and Outpatient Intoxication and Withdrawal: ☐
12. Pharmacologic Interventions for Addictions: ☐
13. Behavioral Interventions: ☐
14. Co-Occurring and Medical Disorders among Patients with Alcohol and Other Drug Use and Addiction: ☐
15. Co-Occurring and Medical Disorders among Patients with Alcohol and Other Drug Use and Addiction: ☐
16. Pain and Addiction: ☐
17. Ethical, Legal and Liability Issues in Addiction Practice: ☐

**C. RELEVANT SUBSTANCE TYPES**

1. Alcohol: ☐
2. Sedatives: ☐
3. Stimulants: ☐
4. Opioids: ☐
5. Cannabinoids: ☐
6. Nicotine: ☐
7. Hallucinogens: ☐
8. Dissociatives: ☐
9. Inhalants: ☐
10. Anabolic steroids: ☐
11. Other substances: ☐
12. Nonsubstance addiction: ☐

## Section 4. Education Program Faculty

Program Director _____ Degree: _____ ☐ ABAM Certified

Institution *(if different from sponsoring institution):* _____

Program Co-Director (optional): _____ Degree: _____ ☐ ABAM Certified

Institution *(if different from sponsoring institution):* _____

List Other Educational Program Faculty:

| NAME | DEGREE | INSTITUTION *(if different from sponsoring institution):* |
|---|---|---|
| | | |
| | | |
| | | |
| | | |
| | | |

If more than 5 faculty, attach a separate page providing the same information about other faculty as **Attachment D.**

## Section 5. Education Program Syllabus

**A.** ☐ **Attachment E.** Provide a complete description of the material to be taught, and the activities of the program. Show the number of hours for each activity. Identify which faculty members will be teaching in each activity.

**B.** Provide a brief course description that will be displayed on the ABAM MOC Web Portal.

## Section 6. Marketing Materials

**A.** Enclose a sample of marketing materials for the proposed program. The American Board of Addiction Medicine must approve the marketing materials prior to the program being advertised as approved by ABAM.

☐ Marketing materials enclosed or attached

**B. Does your organization charge a fee for this Program?**

☐ Yes ☐ No

**C. Please provide a URL of the Educational Program**