

## Help for distance learning programmes

- Please carefully complete the following application and submit it to EBAC at least 3 months before the Distance Learning Programme is released.
- Your application will be reviewed by EBAC and you will receive a first decision with recommended changes to be made to your Distance Learning Programme.
- Once the requested changes have been performed, the EBAC evaluators will release their final decision on accreditation (with final number of credits granted) within 4 weeks after receipt of your modified CME programme.

### Important advice

It may take some time to complete the application form. You can choose between two options:

- Download and print an empty form, complete it off-line, and come back to this website to fill it in on-line (Use the last option of the left menu to download the form).
- Complete the application form directly on-line. We advise you to save the form, from time to time (by clicking on the "save" button on the left menu). You can easily re-open it from your home page to continue to fill it in.

**Saving the form will prevent you from losing all your entries in case of computer or Internet connection problems.**

### 1 - General information

Type :  **Web based contents**

Title : **Web**

AF ID : **USERID-6AKHLH34B**

Created on : **17 Mar 2005 14:17 CET**

Society / Institution : **Scientific or Academic Institution Name**

Provider ID : **USERID**

Status : **Draft**

Evaluation date :

### 2 - Contacts

Contact person responsible for this application :

\* Title :  Mr  Ms

\* First name: \_\_\_\_\_

\* Last name: \_\_\_\_\_


\* Job title: \_\_\_\_\_

\* Address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

\* City: \_\_\_\_\_

\* Code:

Province / State: \_\_\_\_\_

\* Country: <Select from the list...> 

\* Telephone: \_\_\_\_\_

\* Fax: \_\_\_\_\_

\* **E-mail 1:** \_\_\_\_\_  
 \_\_\_\_\_

E-mail 2: \_\_\_\_\_

\* Web site: \_\_\_\_\_

#### Help :

Address same as the one of the contact person entered in your registration form ?  
[Click here.](#)

#### Help :

Tel & Fax: Please do not use any symbols like "/"  
 () - + " enter only numbers

**VERY IMPORTANT :**  
**This e-mail will be used everytime we contact you about this event.**

**Course Director appointed by the scientific institution**

(Person responsible for the scientific content of the programme, for CME articles/texts = Journal Editor)

\* Title :  Mr  Ms

\* Medical Doctor :  Yes  No

\* First name: \_\_\_\_\_

\* Last name: \_\_\_\_\_

\* Job title: \_\_\_\_\_

\* Academic appointment :  Yes  No


**If yes, specify :** \_\_\_\_\_

\* Address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

\* City: \_\_\_\_\_

\* Code:

Province / State: \_\_\_\_\_


\* Country: <Select from the list...> 

\* Telephone: \_\_\_\_\_

\* Fax: \_\_\_\_\_

\* E-mail 1: \_\_\_\_\_

E-mail 2: \_\_\_\_\_

 **Help :**  
 Address same as above ?  
[Click here.](#)

 **Help :**  
 Tel & Fax: Please do not use any symbols like "/"  
 ( ) - + " enter only numbers

**3 - The programme submitted for accreditation - Internet-based course**

\* Title of the web based course: \_\_\_\_\_

\* The Accreditation will concern:  
 **The entire website**  
 **A part of the content**

\* If only a part of the content, please specify which part:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

\* Is there a fee to pay when connecting to the web based course?  Yes  No

If yes, what is the amount of the fee? \_\_\_\_\_ EUR

\* What is the URL of the Internet-based course?  
 \_\_\_\_\_

\*

Will you provide technical support to users of the Internet-based course?  Yes  No  
 If yes, in what form? (manual, hotline number to call, online support, etc.)

**4 - Educational objectives and target audience**

 [Glossary](#)

\* Please describe the educational objectives/expected learning outcomes of the programme:


\* Please indicate how the educational needs for this programme were determined:

 [Glossary](#)

\* Please indicate the target audience (click on one or more boxes):

- Trained Cardiologists**
- Cardiologists in training**
- Other physicians**
- Nurses and technicians**
- Non-physicians**
- Others (please specify) :** \_\_\_\_\_

 [Glossary](#) : Cardiologists in training

 [Glossary](#) : Trained cardiologists

**5 - Scientific content of the programme**

**Duration of the course**

\* The accredited CME Course lasts: \_\_\_\_\_ minutes

**Structure of the content**

\* Is the content divided in several sections/sessions/modules?  **Yes**  **No**


If yes, for which of the sessions do you wish to obtain accreditation?

**All of them**  **For selected ones (see below)**

Please list the sessions/modules of the course **that you wish to accredit:**  
**For each of them, please specify the title, duration and content.**

Title: _____
Duration: _____ minutes
Content: <input type="checkbox"/> Voice
<input type="checkbox"/> Video
<input type="checkbox"/> Slides
<input type="checkbox"/> Text
<input type="checkbox"/> Other (please specify) : _____

Add to list

 **Help :**  
 - To add a module, fill in the fields and click on the "Add to list" button.

Move up

Move down

Please add modules here.....

Remove selected

**Contributors**

**Please list the persons contributing to the course.**

Note that they must complete and sign the "EBAC disclosure form", which should be sent to EBAC by fax or by mail prior to accreditation being awarded.

**Members of the Scientific Committee**

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Note that they must complete and sign the "Disclosure Form"

Please indicate the respective roles and specify the Director/Chairman of the Scientific Committee.

Title :  Mr  Ms    Medical title :  Prof.  Dr  No medical title

First and last name:

Role in the programme:

Institutional Affiliation :

City :

Country :

\* Please add the committee members here.....

**Course Faculty (speakers/presenters) (mandatory)**

Note that they must complete and sign the "Disclosure Form"

Do you want to type in the names or do you prefer to attach a file ?

Option 1 : Enter names in a list

Option 2 : Attach list as a file

 **Help :**

- In case of many speakers, you can attach the list as an electronic file
- Please keep the following format:  
**Name, title, country.**

**Option 1 : Enter names in a list**

Title :  Mr  Ms    Job title :  Prof.  Dr

First and last name:

Institutional Affiliation :

City :

Country :

\*

Please add the faculty members here.....

**Option 2 : Attach the list as a file**

Click on the button below to select a file on your disk.

Browse...

**Help :**

- Once the form has been submitted, attached files can be seen at the bottom of the form.
- Click [here](#) to go to the end of the form to see previously attached files (if any).
- Please give an easy to understand name to the file.

**6 - Commercial support and disclosure of conflict of interest**

**Disclosure of conflict of interest**

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Please note that any potential conflicts of interest must be disclosed by:

- Members of organizing and scientific committees
- Faculty members
- Course Directors

You should use the "EBAC Disclosure Form" for this purpose.

**Click here** to see it.

EBAC requires also that providers of accredited CME programmes inform their audience about the disclosed/indicated conflicts of interest by placing relevant information:

- For CD-Roms: on the CD-Roms cover and at the beginning of the CME programme/presentation.
  - For Internet-based course: on the Home Page and at the beginning of the CME programme/presentation.
- EBAC recommends using the "EBAC standard text on disclosure"

\* Do you want to use EBAC standard text on disclosure ?  Yes  No

**EBAC standard text on disclosure**

***In compliance with EBAC/ EACCME guidelines, all speakers/ chairpersons/ course directors/ authors, participating in this programme have disclosed potential conflicts of interest that might cause a bias in the presentations.***

***The Organizing Committee is responsible for ensuring that all potential conflicts of interest relevant to the programme are declared to the participants prior to the CME activities.***

If no, please type in the text of disclosure of conflicts of interest that will be placed:

- For CD-Roms: on the CD-Roms cover and at the beginning of the CME programme/presentation.
- For Internet-based course: on the Home Page and at the beginning of the CME programme/presentation.

**Commercial support for the accredited programme**

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\* Will you use commercial support for the programme?  Yes  No

If yes, please indicate the type and the origin of this support (name of the company, type of service and form of support: grant, donation, etc.):







