



CLINICAL CONTENT REVIEW AND VALIDATION

Name of reviewer:	<input type="text"/>	Date of submission:	<input type="text"/>
Name of activity:	<input type="text"/>		
Date of activity:	<input type="text"/>	Type of Activity:	<input type="text"/>
Commercial Supporters for this Activity:	<input type="text"/>		
Name of Speaker:	<input type="text"/>		
Topic:	<input type="text"/>		

Instructions to Reviewer: Please review the attached course materials for the above-named CME activity. As an independent reviewer for, your role is to ensure that the activity materials are fair, balanced and free of bias toward the commercial supporter(s) of the activity (if any) or manufacturers of products discussed in the activity. Moreover, you are being asked to scrutinize patient treatment recommendations to ensure they represent a standard of practice for the profession. In addition, please review the studies cited in these materials upon which recommendations are made to ensure that they are scientifically objective and conform to research principles generally accepted by the scientific community. Finally, please look at the materials from the perspective of omissions and commissions.

1. Review for Fair Balance and Bias

A. Is this activity fair balanced?	<input type="radio"/> Yes	<input type="radio"/> No	If No, indicate areas of concern:	<input type="text"/>
B. Is this activity free of commercial bias?	<input type="radio"/> Yes	<input type="radio"/> No	If No, indicate areas of concern:	<input type="text"/>

2. Patient Treatment Recommendations

A. Are patient treatment recommendations evidence-based?	<input type="radio"/> Yes	<input type="radio"/> No	If No, indicate areas of concern:	<input type="text"/>
B. Are patient treatment recommendations appropriate for the target audience?	<input type="radio"/> Yes	<input type="radio"/> No	If No, indicate areas of concern:	<input type="text"/>
C. Are the patient treatment recommendations contributing to overall improvement in patient care?	<input type="radio"/> Yes	<input type="radio"/> No	If No, indicate areas of concern:	<input type="text"/>

3. Scientific Validity

Do scientific studies cited in this activity conform to standards accepted by the scientific community?

☐ Yes

☐ No

If No, indicate areas of concern:

4. Learning Objectives

A. Does the educational content support the learning objectives?

☐ Yes

☐ No

If No, indicate areas of concern:

B. Are these objectives actionable and measurable?

☐ Yes

☐ No

If No, indicate areas of concern:

5. Omission and Commission

A. Do any slides or materials need to be deleted?

☐ Yes

☐ No

If Yes, indicate areas of concern:

B. Are there any studies, data, or best evidence that is missing?

☐ Yes

☐ No

If Yes, indicate areas of concern:

C. Are there any other issues you would like to raise with regard to the content of this activity?

☐ Yes

☐ No

If Yes, please be specific:

6. Reviewer's Certification

☐ By checking this box, I certify the above to be true and accurate.