

Provider Directed Activity Documentation Form – Due May 31

Provide information on Objectives, Content, Time Frames, Presenters, and Teaching Strategies.

Title of Activity: _____

Total Number of Contact Hours: _____ Total number of GI-specific hours (*estimate): _____

*GI specific hours to be verified by ABCGN

Objectives	Content	Time Frame	Presenter	Teaching Strategies
List the educational objectives.	Provide an <u>outline</u> of the content/topic presented and indicate to which objective(s) the content/topic is related	Provide a time frame for topic/ content area.	List the presenter for each topic or content area.	List the teaching strategies by each presenter for each topic or content area.
At the conclusion of this presentation, the participants will be able to:				