

Use these labels to identify evidence from your CME activities that demonstrate the activity meets the Criterion on the label. See **Instructions for Submitting Your Performance in Practice** for more information.

Label #1	Verification that the activity is developed from a professional practice gap connected to your own learners. <b>(C2)</b>	Label #15	Attach a list of all Commercial supporters for the activity, <i>if applicable</i> . <b>(C8; SCS 3.4-3.6)</b>
Label #2	Verification that educational needs (knowledge, competence or performance) were derived from the professional practice gap. <b>(C2)</b>	Label #16	Attach all signed written agreements, <i>if applicable</i> . <b>(C8; SCS 3.4-3.6)</b>
Label #3	Verification that the need(s) was incorporated into the activity. <b>(C2)</b>	Label #17	Verification that teacher or author honoraria and reimbursement are paid in compliance with provider's policies <b>(C8; SCS 3.8; 3.10)</b>
Label #4	Verification of the expression of the expected change, in terms of competence, performance, or patient outcomes (e.g., goals or objectives). <b>(C3)</b>	Label #18	Verification of accurate documentation detailing the receipt and expenditure of commercial support <b>(C8; SCS3.13)</b>
Label #5	Verification of the match between the content and the scope of your learners' current or potential scope of professional activities. <b>(C4)</b>	Label #19	Verification of <u>evaluation</u> of changes in learners' competence <u>or</u> performance <u>or</u> changes in patient outcomes. <b>(C11)</b>
Label #6	Verification of the implementation of a process to ensure format is appropriate to objectives and desired results. <b>(C5)</b>	Label #20	Attach a copy of a brochure, meeting announcement, or meeting materials with the accreditation statement. <b>(ACCME Policy)</b>
Label #7	Verification that a desirable physician attribute was incorporated into the planning process. <b>(C6)</b>	Label #21	Verification of any changes made in your activities that results from your overall CME program evaluation and analysis, <i>if applicable</i> <b>(C14)</b>
Label #8	List of all individuals in control of content of CME activity. <b>(C7; SCS 2.1)</b>	Label #22	Verification of the integration of CME into the process for improving physicians' professional practice, <i>if applicable</i> . <b>(C16)</b>
Label #9	Verification that all individuals in a position to control the content disclosed relevant financial relationships to the provider. <b>(C7; SCS 2.1)</b>	Label #23	Verification that non-educational strategies were used to enhance change as adjuncts to the CME activity, <i>if applicable</i> . <b>(C17)</b>
Label #10	Verification that individuals who refuse to disclose are disqualified from CME planning and implementation, <i>if applicable</i> . <b>(C7; SCS 2.2)</b>	Label #24	Verification that factors outside the providers control that impact on patient outcomes were identified, <i>if applicable</i> . <b>(C18)</b>
Label #11	Verification of the implementation of a mechanism to <u>identify</u> conflicts of interest prior to the start of an activity. <b>(C7; SCS 2.3)</b>	Label #25	Verification that educational strategies to remove, overcome, or address barriers to physician change were implemented, <i>if applicable</i> . <b>(C19)</b>
Label #12	Verification of the implementation of a mechanism to <u>resolve</u> conflicts of interest prior to the start of an activity. <b>(C7; SCS 2.3)</b>	Label #26	Verification of efforts to build bridges with other stakeholders through collaboration and cooperation, <i>if applicable</i> . <b>(C20)</b>
Label #13	Verification that disclosure of relevant (or no) financial relationships was made to learners prior to the beginning of the activity <b>(C7; SCS 6.1-6.2, 6.4-6.5)</b>	Label #27	
Label #14	Verification that disclosure of source of commercial support was made to learners prior to activity, <i>if applicable</i> . <b>(C7; SCS 6.3-6.5)</b>	Label #28	