AMERICAN COLLEGE OF SURGEONS • DIVISION OF EDUCATION
ACCREDITED EDUCATION INSTITUTES
ENHANCING PATIENT SAFETY THROUGH SIMULATION

CME ACTIVITY CALENDAR SUBMISSION FORM

ACTIVITY INFORMATION

ACS Sponsoring Division Education	
Name of Accredited Education Institute	
Title of Event (if applicable)	
Location	
City	State
General Web address	
Event Start DATE	Event End DATE
Event Start TIME (HH:MM AM/PM)	Event End TIME (HH:MM AM/PM)
Event web address (if applicable)	
Number of maximum CME	
Event Category Accredited Education Institute	

Event Type/Interest (Select all that apply)

☐ Bariatric	☐ General Surgery	☐ Opthalmology	☐ Plastic Surgery	☐ Ultrasound
☐ Cancer	☐ Humanitarian	☐ Orthopaedic	☐ Simulation	☐ Urology
☐ Colon-Rectal	☐ Neurology	☐ Otolaryngology	☐ Thoracic	☐ Vascular
☐ Ethics	☐ OB/Gyn	☐ Patient Safety	☐ Trauma	☐ Other Type/Interest

CONTACT INFORMATION

First Name	Last Name	Professional Suffix
Email Address		
Institute		
Telephone	Fax	

ADDITIONAL INFORMATION

To help promote this CME activity, please add descriptive information regarding this particular event below

NOTES

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