

SPEAKER INFORMATION FORM
(Medical Society of Delaware - 11.18.21)

Event Name:

Event Date:

This Presentation Title:

Location:

Speaker Name:

Presentation Time (from – to):

If the planners of this activity want to make your presentation available to the attendees as a PDF via a website, flash drive, or handout, may your presentation be included? **Yes, my presentation may be provided as a pdf.**

Please identify the Practice Gap for your learners: <i>defined as a problem or issue that needs to be addressed – a gap in what learners are doing now, and what you want them to be able to do after your educational activity. EXAMPLE: diagnose, apply, describe, etc.</i>		What is the Educational Need of your learners: <i>defined as the underlying cause of the gap – a deficit of knowledge (specific information or strategy), ability to apply knowledge (competence), or actually using the knowledge in practice (performance) EXAMPLE: This educational need is caused by an increase in or a lack of education in . . .</i>	
Educational Objectives: What knowledge/competence do you want the attendees to walk away with? What will be the main takeaways from the presentation?	Corresponding Content for each objective: Include topic area to be covered & description of the topic	Time Frame: State time for each objective (i.e. 20 min.)	Instructional Strategy/Method: Describe the method to be used. Check all that apply
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Case Presentations <input type="checkbox"/> Lecture <input type="checkbox"/> Panel <input type="checkbox"/> Q/A <input type="checkbox"/> PowerPoint <input type="checkbox"/> Ha
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Case Presentations <input type="checkbox"/> Lecture <input type="checkbox"/> Panel <input type="checkbox"/> Q/A <input type="checkbox"/> PowerPoint <input type="checkbox"/> Handouts



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			<input type="checkbox"/> Case Presentations <input type="checkbox"/> Lecture <input type="checkbox"/> Panel <input type="checkbox"/> Q/A <input type="checkbox"/> Power point <input type="checkbox"/> Handouts
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Content for this activity was chosen from (choose all that apply and provide sources/citations below, attach a separate page if necessary):

- Organization/website
- Expert Resource
- Peer Reviewed Journal/Resource
- Clinical Guidelines
- Textbook Reference
- Other

SOURCES (please provide sources (citations) – you may attach a list):

Final Presentation: Please note that educational materials that are part of this activity cannot contain any logos, advertising, trade names, or product-group messages. Please also send to MSD: Disclosure Form & FPA CV/Bio Form Brief Narrative for Introduction Purposes