



CONTENT REVIEW FORM FOR LIVE ACTIVITIES
PENNSYLVANIA OSTEOPATHIC MEDICAL ASSOCIATION
1330 Eisenhower Boulevard, Harrisburg, PA 17111

Overview of POMA's Content Review Process

This Content Review Form may be used as a mechanism to manage a potential conflict of interest in an activity approved for AOA Category 1 CME Credit or AMA PRA Category 1 Credit™ by the Pennsylvania Osteopathic Medical Association (POMA) as well as ensure clinical content is valid. The reviewer should complete all of the required information, sign, and return the form to POMA.

POMA is accredited by the American Osteopathic Association (AOA) to provide osteopathic continuing medical education for physicians. POMA is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians. As such, POMA must ensure balance, independence, objectivity and scientific rigor in all its educational projects. Fair, unbiased education serves as part of the foundation for development of quality CME. This review form provides a standardized mechanism for identification, review and analysis of a CME activity.

Meeting Information *(To be completed by a member of the Curriculum Committee)*

Title of CME Activity:

Date of Activity:

Title of Presentation to be Reviewed:

Presenter:

Meeting outcome(s) that this session fulfills (these can be either overall meeting outcomes or specific session objectives):

At the conclusion of this session, the participant should be able to:

- Click or tap here to enter text.

Disclosure Information *(Submitted by presenter)*

Disclosure of financial relationship(s): Click or tap here to enter text.

If yes, description of financial relationship(s):

Click or tap here to enter text.

Content Review *(To be completed by the designated reviewer)*

Please review the presentation listed above and check the appropriate answer to the following questions:

	Yes	No	N/A
1. Does the presentation promote improvements or quality in healthcare? Comments: Click or tap here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Does the presentation promote a specific proprietary business interest of a commercial entity? Comments: Click or tap here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Does this presentation discuss a specific treatment therapy or device? If yes:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
a. Are generic product names used rather than specific trade names?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Are alternative therapies or devices also discussed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Are both the benefits and risks of the therapy or device discussed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Is the presentation evidence-based, citing relevant literature, not just that which focuses on positive outcomes?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments: Click or tap here to enter text.			

Content Review (continued)

Yes No N/A

4. Does the presentation include a discussion of any off-labeled or investigational uses of a commercial product? If yes:
- a. Does the presenter disclose this in the presentation?

Comments: [Click or tap here to enter text.](#)

5. Are recommendations for patient care based on current science, evidence and clinical reasoning, while giving a fair and balanced view of diagnostic and therapeutic options?

Comments: [Click or tap here to enter text.](#)

6. Does all scientific research referred to, reported, or used in this educational activity in support or justification of a patient care recommendation conform to the generally accepted standards of experimental design, data collection, analysis and interpretation?

Comments: [Click or tap here to enter text.](#)

7. Are new and evolving topics for which there is a lower (or absent) evidence base, clearly identified as such within the education and individual presentations?

Comments: [Click or tap here to enter text.](#)

8. Does the educational activity avoid advocating for, or promoting, practices that are not, or not yet, adequately based on current science, evidence, and clinical reasoning?

Comments: [Click or tap here to enter text.](#)

9. Does the activity exclude any advocacy for, or promotion of, unscientific approaches to diagnosis or therapy, or recommendations, treatment, or manners of practicing healthcare that are determined to have risks or dangers that outweigh the benefits or are known to be ineffective in the treatment of patients?

Comments: [Click or tap here to enter text.](#)

10. Is the presentation balanced and unbiased?

Comments: [Click or tap here to enter text.](#)

11. Does this presentation accomplish (or help to accomplish) the outcomes listed above?

Comments: [Click or tap here to enter text.](#)

12. Does the presentation address one or more of the AOA seven core competencies or one of the five osteopathic models with attention to the tenets? Please describe how the osteopathic education requirement is satisfied.

Requirement for content qualifying for AOA CME credit.

Comments: [Click or tap here to enter text.](#)

13. Please list any general comments that you have about the balance and objectivity of this presentation as well as any concerns that you may have after reviewing the content:

[Click or tap here to enter text.](#)

Reviewer's Signature: _____
If sent electronically, attach and use e-mail acknowledgement.

Name (printed): [Click or tap here to enter text.](#) _____

Date: [Click or tap here to enter text.](#) _____

UPON COMPLETION RETURN TO:
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