"MEMO TO MYSELF" PROCESS FOR JOURNAL CLUBS AND RECURRING CASE CONFERENCES:

- 1. Once each calendar year, each journal club or case conference will submit a CME application with the overall activity/series objectives. The activity is accredited once a year.
- 2. Each journal club or case conference series requires a facilitator.
 - The facilitator is a physician who is willing to attend each of the sessions, choose the articles and
 cases presented for review and/or decided which articles or cases will be presented. The
 facilitator should guide the process of the conference, not the content. It is helpful if the facilitator
 is a same-specialty opinion leader, because this assists in gaining buy-in from the other
 attendees when you introduce change to how you structure your journal clubs and case
 conferences.
- 3. Attendees must sign in to each session attended in order to receive CME credit.
- 4. Each attendee must also complete a disclosure form in order for the activity to receive CME credit.
 - Disclosure information of all participants will be gathered on one form and is given to the
 facilitator. It is then the facilitator's responsibility to update disclosure information when necessary
 (and inform the CME Office if this is done) and to make disclosure information available when
 requested or needed.
- 5. The guidelines for articles should be as follows: The goal is to review articles that will improve practice and discuss topics that can be implemented. Articles should not be commercially biased. Whenever possible, meta-analyses should be chosen. The research must be validated and peerreviewed.
- 6. The guidelines for cases should be as follows: The goal is to review cases that will improve practice and discuss topics that can be implemented. The point is not to discuss a case of a rare combination of diseases that your colleagues will likely never encounter but rather to discuss a novel approach you found to deal with a common problem.
- 7. Each attendee should complete a "memo to myself" (MTM) at the end of each attended session, indicating new insights/learnings that attendees plan to incorporate into practice. These MTMs are for attendees to keep as reminders and reinforcements to try new things in practice. Facilitators will have a supply of MTMs to hand out at each meeting. Notes:
 - Not all cases or articles will have "incorporable learnings" (may just be articles of intellectual interest)
 - Some cases or articles may serve to verify current practice.
 - However, the goal of having these conferences is to develop and further evidence-based practice, so on the balance, **over time**, participation in these sessions should lead participants to try to incorporate new things in practice.
 - If participants are not identifying possible practice changes, facilitators should use that information (data) to alter the balance of articles/cases away from being solely intellectually interesting or validating of current practice.
 - Facilitators should encourage attendees to think about how they might use learnings from the articles or cases in discussing diagnostic or treatment options if patients initiate discussions on the topic (i.e., "I heard about this new drug on TV, what can you tell me about it?")
- 8. At the end of each session, facilitators will briefly ask the attendees (5-10 minutes) for key concepts they have gathered from the presentation. Facilitators will note these key concepts on the provided form and submit a copy (preferably electronically) with the sign in sheet to the Department of Education. Facilitators will keep a copy of the form for the next session.

- In addition to sending the sign in sheet and key concepts sheet, facilitators should also send copies of each article discussed, or a bibliography of references used in discussing the cases to the Department of Education (need to do this to meet "content validation" standards).
- 9. At the beginning of the next session, facilitators will hold a "mini-huddle" and briefly (5-10 minutes) note which key concepts from the previous session were attempted, which were successful, which were not (and why barriers are important!). Facilitators will note these remarks and submit them on the provided form (preferably electronically) to the Department of Education.
 - This creates continuity between sessions, takes advantage of huddles as a learning opportunity, and serves as a short-term outcomes assessment.
- 10. The Department of Education will consider a periodic brief email or voice mail reminder to participants in selected conferences (based on return of ideas and available resources) about ideas that attendees suggested could be incorporated into/influence/modify practice.
- 11. For 10-25 percent of sessions within each series, attendees will be asked to complete a follow-up evaluation to assess longer term self reported outcomes of the CME series.
 - You may want to work with the facilitator to include specialty- and conference-specific questions in the evaluation.

A MEMO TO MYSELF

In order to assist you in making this learning activity more valuable to you, take a moment to consider the most important aspects of the material presented and discussed.

Please write down 3 things in the space at the bottom that you will do when you return to your practice, as a result of this learning activity.

Your responses serve as a reminder and feedback to yourself. Please bring this form with you to the next

meeting.
1.
2.
3.
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1.
2.

3.

JOURNAL CLUB

Date:
Specialty:
Title of Article:
Reference:
Key concepts gathered from the presentation:
Concepts that were successfully attempted:
Concepts that were unsuccessfully attempted (and why):
Ware any harriers identified? Place list them:
Were any barriers identified? Please list them:

JOURNAL CLUB EVALUATION

1.							
Activity Objectives		I was	already	I need to	I have now		
		ab	le to	learn more in	learned about		
		demo	onstrate	order to	this issue and		
		this o	bjective	demonstrate	am ready to		
		be	efore	this objective.	try applying		
		com	ning to		this		
		this a	activity.		knowledge to		
					my practice.		
List Objective 1			1	2	3		
List Objective 2			1	2	3		
List Objective 3			1	2	3		
2.							
Attitude, Behavior							
4 = strongly agree	3 = agree	2 = disagree	1 = str	rongly disagree			
i Strongly agree	5 agree	2 disagree	1 50	origiy dibagice			
a. What I learned in this activity ha	s increased my co	nfidence in eval	uating my	patients.			
4	3	2	1	•			
b. What I learned in this activity ha	_		nt approac	thes.			
4	3	2	1				
c. What I learned in this activity wi	ll result in improve	ment in my nati	ents' healt	th status			
c. What I learned in this detivity Wi	ii result iii iiriprove	inche in my pac	crito rican	ar statas.			
4	3	2	1				
3. General Questions		_					
a. The articles selected for this	journal club were	e from peer-rev	viewed jo	urnals, evidence	-based, and valid		
Yes No							
I. The effect of the control of the	to I are Const.		. (() !-	to and all t			
b. The articles that were preser	ited were timely a	and appropriat	e for this	journal club.			
Yes No							
c. The presentations were clear	organized and	objective	Voc	No			
c. The presentations were clear	, organized and	objective.	165	140			
d. The journal club actively eng	aged learners.	Yes No)				
e. Discussion in this journal club was enthusiastic, stimulating and free of commercial bias.							
Yes No							
f. I find the Memos to Myself a I	nelpful learning to	ool. Yes_	No_				

CASE CONFERENCE EVALUATION

Date:
Specialty:
References:
Brief description of the case:
Key concepts gathered from the presentation:
Concepts that were successfully attempted:
Concepts that were unsuccessfully attempted (and why):
Were any barriers identified? Please list them:

CASE CONFERENCE EVALUATION

1.							
Activity Objectives			I was alread able to demonstrat this objectiv before coming to this activity	learn more in order to demonstrate this objective.	this issue and am ready to		
List Objective 1			11	2	3		
List Objective 2			11	2	3		
List Objective 3			1	2	3		
2. Attitude, Behavior 4 = strongly agree a. What I learned in this activity ha	_			strongly disagree my patients.			
b. What I learned in this activity ha	s changed my pation	ent mana 2	agement appr 1	oaches.			
c. What I learned in this activity wil	ll result in improven	ment in r	my patients' h	ealth status.			
4	3	2	1				
3. General Questions a. The cases that were presented were timely and appropriate to my specialty. Yes No							
b. The cases were clear, organi	zed and objective	€.	Yes	No			
c. The case conference actively	engaged learner	s.	Yes	No			
d. Discussion in this case conference was enthusiastic, stimulating and free of commercial bias. Yes No							
e. I find the Memos to Myself a	helpful learning to	ool.	Yes	No			