

LEARNING PROJECT RECORD – NON-ACCREDITED PROFESSIONAL DEVELOPMENT LONG-TERM ACTIVITY

_ SCPP #:	Licensing Year:	
-	Project Date(s):	
relevant to your pra	ctice and state your learning objective with respect	
sue in your practice.	:	
□Discu	\square Discussion with peers or others	
	back about my practice, e.g., practice review, rnal directive, patient complaint	
internet \Box Partio	cipation in a volunteer activity	
	cting on a series of similar patients or practice plems	
□Othe	r (specify in Notes)	
	ill take to complete your activity and an estimated ning activities on a monthly basis:	
	sue in your practice. Discu Eedle exter internet Partic Prob Other	

RESOURCES

Month 1: (estimate the approximat	e CEUs Claimed: (number o		
time spent on this project in increment of 0.5 hr)	hours recorded at left to a maximum of 4)		
□ Non-accredited group program (workshop, course, conference)hr.	☐ Reading (articles, texts, newsletters manuals, internet)h		
Self-study program (print, video/audio, internet)hr.	☐ Planned literature search, e.g., Medline, Internet h		
☐ Self-assessment programhr.	☐ Discussion with colleague or expertsh		
☐ Preceptorship or mentorship with an experthr.	☐ Other (specify in Notes)h		
lotes			
Month 2: (estimate the approximat time spent on this project in increment of 0.5 hr)	CEUs Claimed: (number of hours recorded at left to a maximum of 4)		
\square Non-accredited group program (workshop, course,	☐ Reading (articles, texts, newsletters manuals, internet)h		
conference)hr.			
☐ Self-study program (print, video/audio, internet)hr.	\square Planned literature search, e.g., Medline, Interneth		
☐ Self-assessment programhr.	☐ Discussion with colleague or expertsh		
☐ Preceptorship or mentorship with an experthr.	☐ Other (specify in Notes)h		
Month 3: (estimate the approximat	- e CEUs Claimed: (number o		
time spent on this project in increment of 0.5 hr)	hours recorded at left to a maximum of 4)		
□ Non-accredited group program (workshop, course, conference)hr.	☐ Reading (articles, texts, newsletters manuals, internet)h		
Self-study program (print, video/audio, internet)hr.	☐ Planned literature search, e.g., Medline, Interneth		
☐ Self-assessment programhr.	☐ Discussion with colleague or expertsh		
☐ Preceptorship or mentorship with an experthr.	\square Other (specify in Notes)h		
lotes			

Month (if required):				
Time: (estimate the approximate	CEUs Claimed: (number of			
time spent on this project in increment of 0.5 hr)	hours recorded at left to a maximum of 4)			
□ Non-accredited group program (workshop, course, conference) hr.	☐ Reading (articles, texts, newsletters manuals, internet)hr.			
Self-study program (print, video/audio, internet)hr.	☐ Planned literature search, e.g., Medline, Internethr.			
☐ Self-assessment programhr.	☐ Discussion with colleague or expertshr.			
Preceptorship or mentorship with an experthr.	☐ Other (specify in Notes)hr.			
Notes				
Month (if required): (estimate the approximate				
Time: (estimate the approximate	CEUs Claimed: (number of			
time spent on this project in increment of 0.5 hr)	hours recorded at left to a maximum of 4)			
□ Non-accredited group program (workshop, course, conference) hr.	☐ Reading (articles, texts, newsletters manuals, internet)hr.			
Self-study program (print, video/audio, internet)hr.	☐ Planned literature search, e.g., Medline, Internethr.			
☐ Self-assessment programhr.	☐ Discussion with colleague or expertshr.			
Preceptorship or mentorship with an experthr.	☐ Other (specify in Notes)hr.			
Notes — — — — — — — — — — — — — — — — — — —	_			
Month (if required): Time: (estimate the approximate	CEUs Claimed: (number of			
time spent on this project in increment of 0.5 hr)	hours recorded at left to a maximum of 4)			
□ Non-accredited group program (workshop, course, conference)hr.	☐ Reading (articles, texts, newsletters manuals, internet)hr.			
☐ Self-study program (print, video/audio, internet)hr.	\square Planned literature search, e.g., Medline, Internethr.			
☐ Self-assessment programhr.	☐ Discussion with colleague or expertshr.			
☐ Preceptorship or mentorship with an experthr.	☐ Other (specify in Notes)hr.			
Notes				

Month (if required):					
Month (if required): (estimate the approximate		CEUs Claimed: (number of			
time spent on this project in increment of 0.5 hr)		hours recorded at left to a maximum of 4)			
□ Non-accredited group program (wo	orkshop, course, hr.	☐Reading (art	icles, texts, newsletters manuals, internet)	hr.	
Self-study program (print, video/audi		□Planned lite	rature search, e.g., Medline, Internet	hr.	
Self-assessment program	hr.	☐ Discussion with colleague or experts		' hr.	
Preceptorship or mentorship with			Other (specify in Notes)		
Notes	an expertiii.	□Other (specif	y in Notes)	hr.	
Total CELIa alaime d for this laws to	CE oativite:				
Total CEUs claimed for this long-te	erm CE activity:				
If you require more space for recording	g subsequent months	of activity, photo	ocopy page three of this form and e	nter the	
Month number to reflect continuous a	•	, ,,,	,,, ,		
Outcome	_				
Identify the impact your learning will I					
☐ I plan to modify my practice ☐ Confirmed no practice needed					
	practice needed a	t this time	modify my practice		
REFLECTION NOTES					
Evaluate your learning activities:					
 Key learning points from your 	project				
2. Was your approach the most		one			
3. How you plan to use your new	v knowledge/skills in y	our practice; and	d		
4. Any additional learning that is	needed				
Notes					