MINNESOTA BOARD OF OPTOMETRY

335 Randolph Avenue Suite 210 St. Paul MN 55102
(651) 201-2762 Fax (651) 201-2763

APPLICATION FOR CONTINUING EDUCATION-SPECIALIZED APPROVAL

Name and address of sponsoring organization or Minnesota Licensed OD:
_____
_____
_____
_____

Speaker Name _____

How many total hours of credit are you requesting? _____

Date(s) of event: _____

Specific details of the program learning objectives:
_____
_____
_____
_____

What type of CE are you requesting?

- **Mini-Fellowship or Grand Rounds: Experiential CE**: Identify what learning objectives or what areas of clinical observation is expected for the event that will advance the professional skill and knowledge of the Optometrists.

  Identify Specifically:
  - Oculo-medical rounds
  - Cornea (refractive surgery, keratoconus, transplant)
  - Cataract
  - Glaucoma
  - Oculoplastics
  - Vitreo-retinal
  - Strabismus
  - Other

- **Presentation of a lecture:**

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- **Published articles/books:**

As program sponsor, do you agree the content and learning objectives will promote educational principals to improve quality in optometric healthcare and avoid commercial bias or promotion of a specific commercial interest? Yes ____ No ___

As program sponsor, do you agree to **validate** participants' attendance for Minnesota licensed optometrists by confirming and submitting attendance electronically to OE Tracker?
Yes____No____

Name of requestor_____ Date_____
Signature of requestor_____ Phone_____
Email address_____

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Continuing Education: Specialized Approval

APPLICATION PROCESS

- Enter the requested information on the "Application for Continuing Education Program Specialized Approval-Experiential Education"
  - A separate application must be made for *each* course requesting CE approval.

- File with the Board Office:
  1. Completed Application
  2. Detailed outline of course(s) including learning objectives.
  3. $45.00 application fee for *each* speaker if not a Minnesota licensed OD.

Mini-Fellowship or Grand Rounds: Experiential CE: Identify what learning objectives or what areas of clinical observation is expected for the event that will advance the professional skill and knowledge of the Optometrists. Identify:

- Oculo-medical rounds
- Cornea (refractive surgery, keratoconus, transplant)
- Cataract
- Glaucoma
- Oculoplastics
- Vitreo-retinal
- Strabismus
- Other

Presentation of a lecture: Provide syllabus or lecture manuscript to receive clock hour approval. 2:1 clock hours for hour of presentation for initially prepared presentations and 1:1 for repeated sessions.

Published articles/books: Up to three clock hours for publication of articles in journals and up to nine clock hours for book publications.

APPROVAL PROCESS:

- Within 21 days of the receipt of the request, board members will review and approve/deny or recommend modification.
- An approval form including a Minnesota CE approval ID number, approved hours and instructions to submit the validated attendance to OE Tracker will be emailed to the sponsor within 48 hours following board approval.

ATTENDANCE VERIFICATION

- Sponsors may use the board form to validate attendance or submit the listed required fields on an excel spread sheet within five business days of the event directly to arbo@arbo.org.