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www.ouhsc.edu/OkGEC

Program Description

Please provide us the following information. Due to our federal funding, we are required to report information about OkGEC-related programs and events partners. Thank you for completing this form.

Program Title: _____

Scholar's Name: _____

Location of Program: City: _____ County: _____ ZIP: _____	Speaker Name: _____
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Actual Contact Hours: _____

Total Number of Days of the Program: _____

Fee Charged to Participants: _____

Program Delivery Information (check all that apply)

Live/In-person

CD-Rom

Video

Web-based/online

Audio Cassette

Other:

Program Type (Check all that apply)

Continuing Education

Fellowship/Residency

Clinical Training

Faculty Training/Faculty Development

Faculty Retraining

Interdisciplinary Team

Curriculum Development

Sponsors / Co-Sponsors / Partnerships / Leveraging

Program Objectives (at least 2, please)

1. _____

2. _____

3. _____

What Special Topics Apply to This Program's Content? (Check ALL that apply)

- | | |
|---|---|
| <input type="checkbox"/> Adolescent Health
<input type="checkbox"/> Alternative Medicine
<input type="checkbox"/> Ambulatory Care
<input type="checkbox"/> American Indian
<input type="checkbox"/> Behavioral Health
<input type="checkbox"/> Bioterrorism
<input type="checkbox"/> Border Health Activities
<input type="checkbox"/> Community-Based Continuity of Care
<input type="checkbox"/> Cultural Competence
<input type="checkbox"/> Distance Learning
<input type="checkbox"/> Domestic Violence
<input type="checkbox"/> Evidence Based Medicine
<input type="checkbox"/> Faith Based
<input type="checkbox"/> Faculty Development
<input type="checkbox"/> Health Promotion/Disease Prevention
<input type="checkbox"/> Home Health
<input type="checkbox"/> Homeless
<input type="checkbox"/> Informatics
<input type="checkbox"/> Genetics
<input type="checkbox"/> Geriatrics | <input type="checkbox"/> HIV/AIDS
<input type="checkbox"/> Interdisciplinary Training
<input type="checkbox"/> Long Term Care
<input type="checkbox"/> Managed Care
<input type="checkbox"/> Maternal Child Health
<input type="checkbox"/> Medical Economics
<input type="checkbox"/> Mental Health
<input type="checkbox"/> Minority Health Issues
<input type="checkbox"/> Nutrition
<input type="checkbox"/> Oral Health
<input type="checkbox"/> Patient Safety/Medical Errors
<input type="checkbox"/> Quality Improvement in Health Profession
<input type="checkbox"/> Research
<input type="checkbox"/> Rural Health
<input type="checkbox"/> Substance Abuse/Prevention
<input type="checkbox"/> Telemedicine/Telehealth
<input type="checkbox"/> Urban Health
<input type="checkbox"/> Women's Health
<input type="checkbox"/> Other |
|---|---|

Which Targeted Diseases are Covered by this Topic? (Check all that apply)

- | | | | |
|---------------------------------|-----------------------------------|---------------------------------------|---|
| <input type="checkbox"/> Asthma | <input type="checkbox"/> Diabetes | <input type="checkbox"/> STD | <input type="checkbox"/> Other Diseases |
| <input type="checkbox"/> Cancer | <input type="checkbox"/> Obesity | <input type="checkbox"/> Tuberculosis | |

What are the Target Audiences for this Program? (Check all that apply)

- | | | |
|---|---|--|
| <input type="checkbox"/> Allopathic Medicine
<input type="checkbox"/> Chiropractic
<input type="checkbox"/> Clinical Laboratory Sciences
<input type="checkbox"/> Clinical Psych/Counseling
<input type="checkbox"/> Dental Hygiene/Asst/Tech
<input type="checkbox"/> Dental Public Health
<input type="checkbox"/> Dentistry
<input type="checkbox"/> EMT
<input type="checkbox"/> Gerontology
<input type="checkbox"/> Health Administration
<input type="checkbox"/> Health Education | <input type="checkbox"/> Health Information
<input type="checkbox"/> Home Health Aide/
Medical Assistant
<input type="checkbox"/> Law (attorney, paralegal)
<input type="checkbox"/> Law Enforcement
<input type="checkbox"/> Nursing
<input type="checkbox"/> Nursing Home Admin.
<input type="checkbox"/> Nutrition
<input type="checkbox"/> Osteopathic Medicine
<input type="checkbox"/> Other Allied Health;
Specify:
<input type="checkbox"/> Other Counseling | <input type="checkbox"/> Pastoral Care
<input type="checkbox"/> Pharmacy
<input type="checkbox"/> Physician Assistant
<input type="checkbox"/> Podiatry
<input type="checkbox"/> Protective Services
<input type="checkbox"/> Public Health
<input type="checkbox"/> Rehabilitation Specialists
<input type="checkbox"/> Rehabilitation Therapies
<input type="checkbox"/> Social Behavioral Sciences
<input type="checkbox"/> Social Work
<input type="checkbox"/> Technician |
|---|---|--|

<p>Are you targeting any of these Clinical Sites in Underserved Areas?</p> <input type="checkbox"/> Community Health Centers <input type="checkbox"/> Governor Designated Area <input type="checkbox"/> Health Departments <input type="checkbox"/> HPSA-Health Professions Shortage Area <input type="checkbox"/> Migrant Health Centers <input type="checkbox"/> Rural Health Clinics <input type="checkbox"/> Other Clinical Site	<p>Are you targeting any specific Minority Learners?</p> <input type="checkbox"/> African American <input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> Hispanic <input type="checkbox"/> Native Hawaiian
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