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## 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:** \_\_\_\_\_

|  |                      |
|--|----------------------|
| <b>Location of Program:</b><br>City:<br>County: ZIP: | <b>Speaker Name:</b> |
|--|----------------------|

**Actual Contact Hours:** \_\_\_\_\_  
**Total Number of Days of the Program:** \_\_\_\_\_  
**Fee Charged to Participants:** \_\_\_\_\_

**Program Delivery Information (check all that apply)**

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Live/In-person | <input type="checkbox"/> Video            | <input type="checkbox"/> Audio Cassette |
| <input type="checkbox"/> CD-Rom         | <input type="checkbox"/> Web-based/online | <input type="checkbox"/> Other:         |

**Program Type (Check all that apply)**

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Continuing Education | <input type="checkbox"/> Faculty Training/Faculty Development | <input type="checkbox"/> Curriculum Development |
| <input type="checkbox"/> Fellowship/Residency | <input type="checkbox"/> Faculty Retraining                   |   |
| <input type="checkbox"/> Clinical Training    | <input type="checkbox"/> Interdisciplinary Team               |   |

**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)**

- |   |   |
|---|---|
| <ul style="list-style-type: none"> <li><input type="checkbox"/> Adolescent Health</li> <li><input type="checkbox"/> Alternative Medicine</li> <li><input type="checkbox"/> Ambulatory Care</li> <li><input type="checkbox"/> American Indian</li> <li><input type="checkbox"/> Behavioral Health</li> <li><input type="checkbox"/> Bioterrorism</li> <li><input type="checkbox"/> Border Health Activities</li> <li><input type="checkbox"/> Community-Based Continuity of Care</li> <li><input type="checkbox"/> Cultural Competence</li> <li><input type="checkbox"/> Distance Learning</li> <li><input type="checkbox"/> Domestic Violence</li> <li><input type="checkbox"/> Evidence Based Medicine</li> <li><input type="checkbox"/> Faith Based</li> <li><input type="checkbox"/> Faculty Development</li> <li><input type="checkbox"/> Health Promotion/Disease Prevention</li> <li><input type="checkbox"/> Home Health</li> <li><input type="checkbox"/> Homeless</li> <li><input type="checkbox"/> Informatics</li> <li><input type="checkbox"/> Genetics</li> <li><input type="checkbox"/> Geriatrics</li> </ul> | <ul style="list-style-type: none"> <li><input type="checkbox"/> HIV/AIDS</li> <li><input type="checkbox"/> Interdisciplinary Training</li> <li><input type="checkbox"/> Long Term Care</li> <li><input type="checkbox"/> Managed Care</li> <li><input type="checkbox"/> Maternal Child Health</li> <li><input type="checkbox"/> Medical Economics</li> <li><input type="checkbox"/> Mental Health</li> <li><input type="checkbox"/> Minority Health Issues</li> <li><input type="checkbox"/> Nutrition</li> <li><input type="checkbox"/> Oral Health</li> <li><input type="checkbox"/> Patient Safety/Medical Errors</li> <li><input type="checkbox"/> Quality Improvement in Health Profession</li> <li><input type="checkbox"/> Research</li> <li><input type="checkbox"/> Rural Health</li> <li><input type="checkbox"/> Substance Abuse/Prevention</li> <li><input type="checkbox"/> Telemedicine/Telehealth</li> <li><input type="checkbox"/> Urban Health</li> <li><input type="checkbox"/> Women's Health</li> <li><input type="checkbox"/> Other</li> </ul> |
|---|---|

**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)**

- |   |  |  |
|---|--|--|
| <ul style="list-style-type: none"> <li><input type="checkbox"/> Allopathic Medicine</li> <li><input type="checkbox"/> Chiropractic</li> <li><input type="checkbox"/> Clinical Laboratory Sciences</li> <li><input type="checkbox"/> Clinical Psych/Counseling</li> <li><input type="checkbox"/> Dental Hygiene/Asst/Tech</li> <li><input type="checkbox"/> Dental Public Health</li> <li><input type="checkbox"/> Dentistry</li> <li><input type="checkbox"/> EMT</li> <li><input type="checkbox"/> Gerontology</li> <li><input type="checkbox"/> Health Administration</li> <li><input type="checkbox"/> Health Education</li> </ul> | <ul style="list-style-type: none"> <li><input type="checkbox"/> Health Information</li> <li><input type="checkbox"/> Home Health Aide/Medical Assistant</li> <li><input type="checkbox"/> Law (attorney, paralegal)</li> <li><input type="checkbox"/> Law Enforcement</li> <li><input type="checkbox"/> Nursing</li> <li><input type="checkbox"/> Nursing Home Admin.</li> <li><input type="checkbox"/> Nutrition</li> <li><input type="checkbox"/> Osteopathic Medicine</li> <li><input type="checkbox"/> Other Allied Health; Specify:</li> <li><input type="checkbox"/> Other Counseling</li> </ul> | <ul style="list-style-type: none"> <li><input type="checkbox"/> Pastoral Care</li> <li><input type="checkbox"/> Pharmacy</li> <li><input type="checkbox"/> Physician Assistant</li> <li><input type="checkbox"/> Podiatry</li> <li><input type="checkbox"/> Protective Services</li> <li><input type="checkbox"/> Public Health</li> <li><input type="checkbox"/> Rehabilitation Specialists</li> <li><input type="checkbox"/> Rehabilitation Therapies</li> <li><input type="checkbox"/> Social Behavioral Sciences</li> <li><input type="checkbox"/> Social Work</li> <li><input type="checkbox"/> Technician</li> </ul> |
|---|--|--|

|   |   |
|---|---|
| <p><b>Are you targeting any of these Clinical Sites in Underserved Areas?</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Community Health Centers</li> <li><input type="checkbox"/> Governor Designated Area</li> <li><input type="checkbox"/> Health Departments</li> <li><input type="checkbox"/> HPSA-Health Professions Shortage Area</li> <li><input type="checkbox"/> Migrant Health Centers</li> <li><input type="checkbox"/> Rural Health Clinics</li> <li><input type="checkbox"/> Other Clinical Site</li> </ul> | <p><b>Are you targeting any specific Minority Learners?</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> African American</li> <li><input type="checkbox"/> American Indian/Alaskan Native</li> <li><input type="checkbox"/> Hispanic</li> <li><input type="checkbox"/> Native Hawaiian</li> </ul> |
|---|---|