

**PACE PILOT STUDY FORM**

**COMPANY NAME and Contact Information:**

Click or tap here to enter text.

***The Pilot Study must be conducted prior to the approval of CEs, must include a minimum of 6 subject matter experts to determine course timing, and the completion of the pilot study form by each reviewer. Completed forms are submitted back to CCMC for determination of CE amount. Each form must be uploaded into the Uploads section of the PACE application.***

Thank you again for agreeing to pilot-test/review this CE activity. This form is completed by activity reviewers to help:

1. Assess the time for completion of activity to determine CE Contact Hour awards;
2. Provide feedback, comments, concerns about the CE activity or content for the author(s) and CE provider staff.
3. Review enduring materials already in place as their renewal date approaches.

If you have any questions, please contact the provider.

**Review Date:**

Click or tap here to enter text.

**Program Title:**

Click or tap here to enter text.

**Your Name:**

Click or tap here to enter text.

**Your Credentials:**

Click or tap here to enter text.

**Program Review:**

**Please check the box below (all that apply) to indicate that the activity meets your expectations for the following areas:**

[ ] Content well organized

[ ] Content was accurate

[ ] Tables, figures, and/or illustrations (if any) were relevant to the course content

[ ] Appropriate references were used (at least 3 references listed within the last 5 years)

[ ] Content/topic was timely and interesting

**Industry bias:**

**Was this activity free from commercial (industry) bias?** Yes [ ]  No [ ]

**Were generic names used in place of trade names?**  Yes [ ]  No [ ]

**If trade names were used, were names of multiple drug/devices in the same class displayed without bias over one or another?**

Yes [ ]

No [ ]

**If you answered No to any questions above, please explain:**

Click or tap here to enter text.

**Additional Comments:**

Click or tap here to enter text.

**How long did it take you to complete this activity?**Please provide the number of minutes it took you to complete this activity. Your time assessment should include everything from the start of the course through the end of the course evaluation.

Click or tap here to enter text.

 **Level of difficulty:**

[ ]  **Very Easy:** The subject area is generally familiar, and the content is generally less complex for the target audience.

[ ]  **Somewhat Easy:** The portion of the subject area is generally familiar, and a portion of the content is somewhat less complex for the target audience.

[ ]  **Moderate:** The familiarity of the subject area and the complexity of the content would be average for the average member of the target audience.

[ ]  **Difficult:** A portion of the subject area is unfamiliar, and a portion of the content is complex for the target audience.

[ ]  **Very Difficult:** The subject area is unfamiliar, and the content is complex for the target audience.

**Target audience:**

[ ]  Entry level knowledge and skills in subject area

[ ]  Average knowledge and skills in subject area

[ ]  Advanced knowledge and skills in subject area

**Overall recommendation:**

Click or tap here to enter text.

**Signature:**

By signing below, I attest that all the submitted information is true and accurate.

Click or tap here to enter text.