

Category 1 Directly Sponsored Series for Grand Rounds/internal Conferences to be displayed.

INFORMATION SHEET: OERP Educational Outreach Series # 115 Assessment and Treatment of Eating Disorders (T221)

(SERIES TITLE)

DATE: January 14, 2009

PRESENTER(S): Jill Gaskill, CRNP; Liz McCabe, PhD

OVERALL GOALS OF PROGRAM:

1. Describe the complex interaction of factors needed to make an accurate diagnosis of an eating disorder
2. Utilize skills in the assessment of eating disorders
3. List empirically validated treatment strategies for eating disorders

The University of Pittsburgh School of Medicine is accredited by the Accreditation Council for Continuing Medical Education to sponsor continuing medical education for physicians.

The University of Pittsburgh School of Medicine designates this educational activity for a maximum of 2.0 Category 1 credit toward the AMA Physician's Recognition Award. Each physician should claim only those credits that he/she actually spent in the educational activity.

Presenter Disclosure(s)

1. Have any relationships with proprietary entities producing healthcare goods or services been disclosed?

NO Skip Question 2

YES

The following relationships have been disclosed (use attachment if necessary).

Faculty Name	Company	Nature of Relationship(s)

2. Conflicts of interest have been resolved prior to the activity using the following procedures (check at least one):

- Content was reviewed by the course director or his/her designee
- Course director or his/her designee discussed the presentation with the faculty member
- Other (please describe):

Results of conflict resolution (check at least one):

- Presenter's relationships have no bearing on the topic.
- Reviewer found the presentation to be balanced, non-biased and scientifically rigorous.
- Speaker revised the presentation based on feedback and second review demonstrated the content to be balanced, non-biased and scientifically rigorous
- Speaker was given guidelines for the nature of the information to be presented
- Other (please describe):

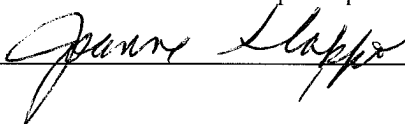
3. Was this session or speaker expenses supported by an educational grant from a proprietary entity producing healthcare goods or services ?

NO YES

If Yes, Please list the company(ies) or organization(s) and the type of support (funding or in-kind):

I attest that this information is accurate and that it was made available to participants prior to the beginning of the educational activity.

Signature (Course Director or Designee):



Date: 1/08/2009