

Required COPE Course and Activity Information for Jointly Accredited Providers

The following information is required in order to receive a **COPE Course ID Number**:

Instructor Name, Degree:			
Adjunct/Co-Instructor Name(s), Degree (if applicable):			
Course Title:			
Brief Course Overview:			
Course Learning Objectives			
Course Learning Objectives:			
Total Course Hours:			
Course Category:			
Contact Lenses (CL)		Functional Vision/Pediatrics (FV)	
General Optometry (GO)		Low Vision/Vision Impairment & Rehabilitation (LV)	
Public Health (PB)		Glaucoma (GL)	
Injection Skills (IS)		Laser Procedures (LP)	
Peri-Operative Management of Ophthalmic Surgery (PO)		Surgery Procedures- Optometric (SP)	
Treatment & Management of Ocular Disease (TD)		Neuro-Optometry (NO)	
Pharmacology (PH)		Systemic Disease (SD)	
Practice Management (PM)		Ethics/Jurisprudence (EJ)	
Course Format: Synchronous In-Person (examples: Face-to-face, Hands on workshop)			
Synchronous Virtual (examples: -Interactive webinars in real time, Videoconferences)			
Asynchronous (examples: Recorded webinar without instructor interaction, Journal article, recorded Webcast/podcast			
Please Note: COPE does NOT provide partial course credit. If you are offering multiple learning sessions led by multiple instructors, please complete the top portion of this form for each individual session.			
The following information is required in order to receive a COPE Activity Number:			
Activity Title:			
Activity Start Date:	Activi	ty End Date:	
Activity Venue and Address (If Synchronous In-Person):			
Activity Website (If Synchronous Virtual or Asynchronous):			
Activity Description:			

Please email the information along with a copy of your invitation/marketing materials to <u>arbo@arbo.org</u> prior to your activity date and someone will respond to you with the appropriate COPE numbers.

Important: The COPE course and activity numbers must be on the certificate of attendance in order for the credit to be accepted by the optometry licensing boards.