Continuing Education and Professional Development Log

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Reporting Period:

☐ Group II: October 1, 2016-September 30, 2019 ☐ Group III: October 1, 2017-September 30, 2020 ☐ Group I: October 1, 2018-September 30, 2021				
INTRAVENOUS INFUSION THERAPY CREDITS (Category A)				
This category includes activities that relate to Naturopathic Doctors as health professionals and as members of their communities. Some activities in this category might include: authoring clinical research in a peer-reviewed journal, acting as a course presenter/lecturer, participating as a preceptor, etc.				Outcome: 1. I plan to modify my practice based on this activity. 2. I plan to pursue additional
Activity Number Course Provider List individual	Description of Activity courses/workshops attended (not just the conference name)	Date of Activ	Number of Credits/Hours	learning in this area. 3. No change is needed to my practice at this time. 4. Other (please specify)
IV.1				
IV.2				
IV.3				
IV.4				
IV.5				
IV.6				
IV.7				
IV.8				
IV.9				
IV.10				
Minimum Credit Hours: Group II – 6 credits / Group II – 6 credits / Group I – 6 credits / Group I – 6 credits				
Member Name:	Registration Number:	Date:		Signature:

^{*}Please note: If you have been selected to submit proof of completion in addition to your CE & PD log, please write the number from the 'Activity Number' column (on the far left of this form) on the corresponding CE certificate, letter, etc. and attach all supporting documentation to this log.