This handbook contains the following:

- Introduction and General Information
- Course Materials Preparation Instructions
- Appendix
  - Learning Objectives and Verb List for Learning Objectives
  - Audience Response Question Instructions
  - Examples of Good/Poor ARS Slides
INTRODUCTION AND GENERAL INFORMATION FOR COURSE CHAIRS

A major mission of the American Society for Reproductive Medicine is to provide continuing education for its physician and non-physician members. The Society fulfills this mission through an ongoing educational program consisting of Postgraduate courses and presentations at the Scientific Congress. The ASRM is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide CME credits to physicians. However, accreditation is awarded only if the Society adheres to very specific guidelines. The CME Committee and Program Planning Committees of the ASRM meet regularly to plan educational activities that address specifically identified educational needs, to evaluate specific educational activities, and to assess the effectiveness of the overall educational programs. While many of the requirements and guidelines presented to Postgraduate Program Course Directors may seem capricious or trivial, be assured that these guidelines reflect strict adherence to ACCME requirements coupled with many years of experience at the ASRM in producing high-quality Postgraduate medical educational programs. For these reasons, we ask you to carefully review all the material being provided. It is essential you comply with all the requirements. Please note the following:

- Postgraduate courses are based on educational needs identified by participants in previous activities, gap analyses, surveys of the members, and discussions among experts. The ASRM welcomes suggestions of topics for future courses.

- Lectures are prepared as Microsoft PowerPoint slide presentations on the required ASRM PowerPoint Template. Each PowerPoint presentation must be complete and freestanding and contain all the information to be taught, including learning objectives and the presenter’s disclosure information. PowerPoint presentations must have appropriate literature citations with the complete references submitted on the required References slide within the PowerPoint Template (slide 4 on the required ASRM PowerPoint Template).

- The Course Chair is responsible for making certain that each lecture presentation meets the standards for content, fulfillment of learning objectives, organization, and format. **As the chair for this course, it is your responsibility to review all course content to ensure that AMA and ACCME guidelines are followed by your course faculty on their lecture materials. Importantly, the Course Chair is responsible for ensuring that the material is unbiased and evidence based.**

The ASRM recognizes that participation in the Postgraduate Program as a Course Chair is a significant imposition on your time. Your tremendous dedication and commitment of time are appreciated by the Society and course participants. Please let us know how we can assist you.

**IMPORTANT DEADLINES:**

- **Upload “attendee copy” of lecture presentation(s) for registered attendees of course – AUGUST 1, 2022**
  - ASRM PowerPoint template is required, and this copy must include a full references list on slide 4.
  - Does not have to be complete presentation since those will continue to be edited through the next upload. This is more of a general representation of what will be presented. Do not include any unpublished data you don’t want in the attendee’s hands.
  - Instructions for upload will be mailed out closer to the deadline.

- **Upload actual presentation slides for presenting in-person – SEPTEMBER 30, 2022**
  - I understand I can continue to make small edits to my presentation up until the day before my presentation is scheduled and I can load these changes in the Speaker Ready Room at the in-person meeting.
  - ASRM PowerPoint template required to be used. Please view the ASRM Congress site for the ASRM PowerPoint template, Speaker FAQ, and other resources.
Creating Your Course

The most important elements for a successful course are:

◆ **Finalize the Lecture Schedule**
  ● ASRM will ask you to determine final lecture titles, speakers, and order.

◆ **Learning Objectives for Overall Course and Each Lecture (APPENDIX 1)**
  ● There must be a minimum of 3 to 6 behaviorally stated learning objectives for the overall Postgraduate Course which the chair should go over as part of the course introduction & orientation at the beginning of the course. Your course may have specific CE credits that require additional learning objectives. If this is the case, ASRM will let you know.
  ● Learning objectives for each lecture are listed in Slide 2 of each presentation in the required ASRM PowerPoint Template.

◆ Each presenter must disclose commercial/financial relationships with any entity producing, marketing, reselling, or distributing health care goods or services consumed by, or used on, patients.
  o These are reviewed by ASRM and any conflicts of interest resolved.
  o Disclosures are listed on Slide 3 of each presentation in the required ASRM PowerPoint Template.

◆ **PowerPoint Lectures: 1 file for each lecture**
  ● Prepare each lecture as a PowerPoint slide presentation. If you use a Macintosh computer, please verify on a Windows-compatible computer that the symbols and fonts are reproduced as you intend.
  
  ● The first four slides for each lecture should be as follows:
    o **Slide 1** - Lecture title, your full name, highest medical/academic degree and affiliation and/or professional title.
    
    ![Lecture Title Slide](image1)

    o **Slide 2** – List the Learning Objectives for the specific lecture. Each lecture should have 2-3
Slide 3 - Disclosure list of commercial and/or financial relationships with any entity producing, marketing, re-selling, or distributing health care goods or services consumed by, or used on, patients. If no relationships, state “Nothing to disclose.”

Slide 4 - Complete list of EVERY reference cited in the presentation without exception; Compiled following the citation format used in *Fertility and Sterility* (authors, article titles, journal/book, year, volume, inclusive pages); Arranged in alphabetical order.

- Logos, ads, or names of pharmaceuticals/manufacturing companies **cannot be located on any slide**. The only exception is a company name in regular typeface for the reference of a figure.
- Use only generic names of drugs/products. Registered trademarked names of commercial products should NOT be used unless multiple preparations of the same product are being compared or the generic name is extremely cumbersome. Trade names might have to be used in the case of unique specialized pieces of equipment or in citing a published study in which a specific trade-name drug or product is used.
- Previously published graphs, images, and charts must be referenced.
- Citations of previously published work on individual slides may consist of the name of the first author, “et al.” if necessary, and the year of publication. Citations must be **fully referenced** on the Reference slide (slide 4) for each lecture.
- A brief tutorial on how to prepare excellent PowerPoint presentations is available at on our Presenter Resources page [here](#).

**Audience Response Questions (APPENDIX 2)**

- ASRM is encouraging all Postgraduate courses to be more engaging with the audience. If the content of a course cannot be hands-on, then utilization of the Audience Response System (ARS) and other dynamic forms of presentation (debate, team-based learning, etc.) should be utilized for the course.
- The ARS allows you to ask interactive multiple-choice questions on PowerPoint slides embedded throughout your presentation. ARS is optional and available for a limited number of Postgraduate courses. The audience will use their mobile devices to answer questions and their responses will be tabulated instantly on the presentation slide.
- You will receive further communication regarding using the ARS in your course.
◆ Uploading Files

- All faculty will receive a link and instructions for both upload deadlines once the upload sites open regarding uploading presentation materials for both the attendees of your course and the meeting. Chairs should ask faculty to share their presentation files to review for content, bias, etc. Chairs should encourage all faculty to upload by the September 30th deadline. This is to ensure all above guidelines regarding non-biased, evidence-based materials are followed.

- You will have access to edit in-person presentation files until the day before your presentation. You can do this online at any time before the meeting. Once on-site, you should make edits in the Speaker Ready Room.

- If videos are included as part of the lecture, please embed each video in the PowerPoint presentation and upload the file separately as well into the Presentation Upload site (links will be provided closer to the meeting).

- The copy of your presentation(s) for attendees should not include videos, as those will not be viewable in the copy version they will receive. Feel free to share a link to the video if available.
APPENDIX 1

LEARNING OBJECTIVES

There must be behaviorally stated learning objectives for each lecture specific to the content.

Participants learn more from a presentation when they have been told precisely what they stand to gain. That is why learning objectives are a requirement for each presentation. They should be a part of the slide presentation at the beginning of each lecture (slide 2). They give participants a way to organize the information presented. In addition, learning objectives provide the basis for evaluating the effectiveness of the lecture.

Therefore, the instructor should develop several objectives for each presentation. These should be expressed in terms of the knowledge, skills, or values that the participants can demonstrate by an action or behavior.

- When possible, an objective should name a behavior directly describable in terms of patient care, (i.e., to diagnose primary ovarian insufficiency).
- When the outcome is an understanding not directly describable in terms of patient care, the objective should name a behavior showing the participant has, in fact, acquired the desired understanding (i.e., to diagram the regulation of prolactin secretion).
- Avoid objectives for a lecture that can only be achieved with hands-on experience (i.e., to perform a linear salpingostomy).

A clue to good learning objectives is carefully selected verbs that describe what the participant will be able to do because of having attended this presentation. The following page contains a list of such verbs.

Examples of learning objectives:

LEARNING OBJECTIVES
At the conclusion of this presentation, participants should be able to:

1. List, according to incidence, the causes of delayed sexual development.
2. Cite the parameters of normal fertility in the general population against which the functioning of the infertile couple must be judged.

LIST OF VERBS FOR FORMULATING LEARNING OBJECTIVES

1. Those that communicate KNOWLEDGE

<table>
<thead>
<tr>
<th>Information</th>
<th>Comprehension</th>
<th>Application</th>
<th>Analysis</th>
<th>Synthesis</th>
<th>Evaluation</th>
</tr>
</thead>
<tbody>
<tr>
<td>cite</td>
<td>associate</td>
<td>apply</td>
<td>practice</td>
<td>appraise</td>
<td>arrange</td>
</tr>
<tr>
<td>count</td>
<td>classify</td>
<td>calculate</td>
<td>predict</td>
<td>contract</td>
<td>assemble</td>
</tr>
<tr>
<td>define</td>
<td>compare</td>
<td>complete</td>
<td>relate</td>
<td>criticize</td>
<td>collect</td>
</tr>
<tr>
<td>describe</td>
<td>compute</td>
<td>demonstrate</td>
<td>report</td>
<td>debate</td>
<td>compose</td>
</tr>
<tr>
<td>draw</td>
<td>contrast</td>
<td>dramatize</td>
<td>restate</td>
<td>detect</td>
<td>construct</td>
</tr>
<tr>
<td>indicate</td>
<td>describe</td>
<td>employ</td>
<td>review</td>
<td>diagram</td>
<td>create</td>
</tr>
<tr>
<td>list</td>
<td>differentiate</td>
<td>examine</td>
<td>schedule</td>
<td>differentiate</td>
<td>design</td>
</tr>
<tr>
<td>name</td>
<td>discuss</td>
<td>illustrate</td>
<td>sketch</td>
<td>distinguish</td>
<td>detect</td>
</tr>
<tr>
<td>point</td>
<td>distinguish</td>
<td>interpolate</td>
<td>solve</td>
<td>experiment</td>
<td>formulate</td>
</tr>
<tr>
<td>quote</td>
<td>estimate</td>
<td>interpret</td>
<td>translate</td>
<td>infer</td>
<td>generalize</td>
</tr>
<tr>
<td>read</td>
<td>explain</td>
<td>locate</td>
<td>use</td>
<td>inspect</td>
<td>integrate</td>
</tr>
<tr>
<td>recite</td>
<td>express</td>
<td>operate</td>
<td>utilize</td>
<td>inventory</td>
<td>manage</td>
</tr>
<tr>
<td>--------</td>
<td>---------</td>
<td>---------</td>
<td>---------</td>
<td>-----------</td>
<td>--------</td>
</tr>
<tr>
<td>record</td>
<td>extrapolate</td>
<td>order</td>
<td>question</td>
<td>organize</td>
<td>revise</td>
</tr>
<tr>
<td>repeat</td>
<td>interpolate</td>
<td>separate</td>
<td>plan</td>
<td>score</td>
<td></td>
</tr>
<tr>
<td>select</td>
<td>interpret</td>
<td></td>
<td></td>
<td>prepare</td>
<td>test</td>
</tr>
<tr>
<td>state</td>
<td>predict</td>
<td></td>
<td></td>
<td>produce</td>
<td></td>
</tr>
<tr>
<td>tabulate</td>
<td>report</td>
<td></td>
<td></td>
<td>propose</td>
<td></td>
</tr>
<tr>
<td>tell</td>
<td>restate</td>
<td></td>
<td></td>
<td>specify</td>
<td></td>
</tr>
<tr>
<td>trace</td>
<td>review</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>translate</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2. Those that impart **SKILLS**

<table>
<thead>
<tr>
<th>diagnose</th>
<th>hold</th>
<th>internalize</th>
<th>measure</th>
<th>pass</th>
<th>project</th>
</tr>
</thead>
<tbody>
<tr>
<td>empathize</td>
<td>integrate</td>
<td>massage</td>
<td>palpate</td>
<td>percuss</td>
<td>visualize</td>
</tr>
</tbody>
</table>

3. Those that convey **ATTITUDES**

<table>
<thead>
<tr>
<th>acquire</th>
<th>exemplify</th>
<th>realize</th>
<th>reflect</th>
</tr>
</thead>
</table>

4. **These verbs are BETTER AVOIDED.** They are often used, but are open to many interpretations.

<table>
<thead>
<tr>
<th>appreciate</th>
<th>believe</th>
<th>have faith in</th>
<th>know</th>
<th>learn</th>
<th>understand</th>
</tr>
</thead>
</table>
APPENDIX 2

Audience Response (ARS) Questions (only in pre-approved courses)

ASRM will send out a call for courses that would like to participate in ARS with a deadline in May. Selected courses have the option of using the Audience Response questions during their lectures. ARS questions will not appear in the syllabi. The ARS system allows you to ask interactive multiple-choice questions on PowerPoint slides embedded throughout your presentation. The audience will answer questions via their own mobile devices and their responses will be tabulated instantly on the presentation slide. The ARS is an excellent way to find out what your audience is thinking about a topic, or to develop a case presentation, challenging them to choose the best “next-step” in care.

Approved ARS courses will be given directions on submitting their ARS questions/answers (in Word document). If your course is approved:

1. Decide how many questions to ask. Each question and answer review will take 1 - 2 minutes—so you should allow 6 to 8 minutes in your lecture time for 4 ARS questions.
2. Choose a format for your questions/answers. See sample good/bad ARS slides on the next pages or at the following link: http://scientific.asrmcongress.org/Portals/1/PresentPDFs/Good-Bad_Example_ARC_Questions.pdf
3. Submit your proposed questions to ASRM; wait for approval and receipt of edits.
4. Insert the approved ARS questions into your presentation at the spots where you would like to ask your questions.
5. Reupload your presentations with the inserted questions.
✓ DO USE these types of ARS Questions/Answers

**Learner Knowledge (could use as pre/post)**

In which disease is there a high risk of minimal residual disease in ovarian tissue?

- Leukemia: 76%
- Hodgkin’s disease: 6%
- Breast cancer: 12%
- Rectal cancer: 6%

**Controversial/Opinion**

How old is too old to be a parent?

- >45: 11%
- >50: 51%
- >60: 25%
- >60: 9%
- No limits: 3%

**Practice Patterns**

How often do you use non-surgical management of fibroids?

- None: 13%
- <25%: 38%
- 25%-50%: 50%
- >50%: 1%

**Case Study/Next Step**

2. 46 y/o woman complains of difficulty sleeping and premenstrual migraines. She has noted some increased irregularity in her cycles, but continues to bleed. LMP 3 months before this visit. Next step?

- FSH/E2 level on day 2-4: 21%
- TSH and prolactin levels: 42%
- No evaluation: 37%

**TRUE/FALSE**

The best screening test for diabetes in adolescents with PCOS is serum HbA1c.

- TRUE: 23%
- FALSE: 77%

**Audience Demographics**

How do you characterize your specialization?

- Reproductive Endocrinologist: 37%
- Urologist/Andrologist: 47%
- Embryologist/ Lab Personnel: 5%
- Nurse: 2%
- Other: 9%
DO NOT USE THESE TYPES of ARS Questions/Answers

- **Too Basic** – the audience already knew the answer
  - Example: How many chromosomes does a mature sperm have?
    - Image shows a bar chart with 23 as the correct answer, marked with an 'X'.

- **Question is too complicated**
  - Example: The World Health Organization (WHO) has participated actively in reproductive medicine issues globally by all of the following EXCEPT
    - Image shows a bar chart with options like Funding ART programs in low-resource environments, Sponsoring meetings to standardize definitions in ART, etc., marked with an 'X'.

- **Too many answer choices/ negative question**
  - Example: Which is not a risk associated with IVF and PGD?
    - Image shows options like Premature ovarian failure, No success, High recurrence of treatment failure, marked with an 'X'.

- **Answers are too long**
  - Example: FDA testing for male same sex couples can get complex. Which of the following are true?
    - Image shows options like 13% (43%) and 14% (43%), marked with an 'X'.