1. Review the stated learning objectives on the first page of the CME article and determine if these objectives match your individual learning needs.

2. Read the article carefully. Do not neglect the tables and other illustrative materials, as they have been selected to enhance your knowledge and understanding.

3. The following quiz questions have been designed to provide a useful link between the CME article in the issue and your everyday practice. Read each question, choose the correct answer, and record your answer on the CME REGISTRATION FORM at the end of the quiz.

4. Type or print your full name and address and your date of birth in the space provided on the CME REGISTRATION FORM.

5. Complete the Evaluation portion of the CME Registration Form. Forms and quizzes cannot be processed if the Evaluation portion is incomplete. The Evaluation portion of the CME Registration Form will be separated from the quiz upon receipt at JOURNAL OF PEDIATRIC OPHTHALMOLOGY & STRABISMUS. Your evaluation of this activity will in no way affect the scoring of your quiz. NO PAYMENT REQUIRED. You may be contacted at a future date with a follow-up survey to this activity.

6. Send the completed form to: JOURNAL OF PEDIATRIC OPHTHALMOLOGY & STRABISMUS CME Quiz, PO Box 36, Thorofare, NJ 08086.

7. Be sure to mail the CME Registration Form on or before the deadline listed. After that date, the quiz will close. CME Registration Forms received after the date listed will not be processed.

METHOD FOR OBTAINING CREDIT CERTIFICATE

Your answers will be graded and you will receive a certificate via mail within 4 to 6 weeks advising you whether you have passed or failed. A score of at least 80% is required to pass. Unanswered questions will be considered incorrect.

CME ACCREDITATION

This activity has been planned and implemented in accordance with the Essential Areas and policies of the Accreditation Council for Continuing Medical Education through the joint sponsorship of Vindico Medical Education and the Journal of Pediatric Ophthalmology & Strabismus. Vindico Medical Education is accredited by the ACCME to provide continuing medical education for physicians.

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In accordance with the Accreditation Council for Continuing Medical Education’s Standards for Commercial Support, all CME providers are required to disclose to the activity audience the relevant financial relationships of the planners, teachers, and authors involved in the development of CME content. An individual has a relevant financial relationship if he or she has a financial relationship in any amount occurring in the last 12 months with a commercial interest whose products or services are discussed in the CME activity content over which the individual has control. Relationship information appears prior to the content.

UNLABELED AND INVESTIGATIONAL USAGE

The audience is advised that this continuing medical education activity may contain references to unlabeled uses of FDA-approved products or to products not approved by the FDA for use in the United States. The faculty members have been made aware of their obligation to disclose such usage.

TARGET AUDIENCE

This CME activity is primarily targeted to pediatric ophthalmologists and ophthalmic surgeons. There are no specific background requirements for participants taking this activity.
CME Quiz: The Potential Cost-Effectiveness of Amblyopia Screening Programs

CASE SCENARIO
A local government is considering funding a new vision screening program with a limited, fixed budget. Policy makers will choose one of the four options presented in the article: (1) no screening, (2) acuity and stereopsis screening in kindergarten, (3) acuity and stereopsis in preschool in kindergarten, or (4) photoscreening in preschool and acuity and stereopsis in kindergarten.

1. Which option will achieve the lowest lifetime medical costs among those screened?
   A. No screening.
   B. Acuity and stereopsis in kindergarten.
   C. Acuity and stereopsis in preschool and kindergarten.
   D. Photoscreening in preschool and acuity and stereopsis screening in kindergarten.

2. Assuming that the fixed, limited is insufficient to screen all children in the locality and the number of children screened is based entirely on the budget, which screening scenario would result in the most children being screened?
   A. No screening.
   B. Acuity and stereopsis in kindergarten.
   C. Acuity and stereopsis in preschool and kindergarten.
   D. Photoscreening in preschool and acuity and stereopsis screening in kindergarten.

3. The screening budget is increased such that all children in the locality will be covered under the screening program. Which option would detect the highest number of amblyopia cases?
   A. No screening.
   B. Acuity and stereopsis in kindergarten.
   C. Acuity and stereopsis in preschool and kindergarten.
   D. Photoscreening in preschool and acuity and stereopsis screening in kindergarten.

4. The local government decides to fund whichever intervention considered in this article is the most cost-effective per child screened. What must policy makers decide before selecting an intervention?
   A. Program budget.
   B. Screening location.
   C. Willingness to pay per quality-adjusted life year gained.
   D. Screening age.

REGISTRATION FORM

Questions about CME and the Journal?
Call us at 856-994-9400 or write to:
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MAY/JUNE 2012

The Potential Cost-Effectiveness of Amblyopia Screening Programs

Black out the correct answers
1. A B C D
2. A B C D
3. A B C D
4. A B C D

This activity is approved for credit from the original date of release, May 1, 2012, through the expiration date of May 15, 2013.

Evaluation (must be completed in order for your CME Quiz to be scored)
MAY/JUNE 2012
Check the appropriate box below.
1. The content of the article was accurately described by the learning objectives. Yes No
   a. Readers will be able to evaluate the cost-effectiveness of three amblyopia screening strategies to facilitate early detection and treatment.
   b. Readers should be able to discuss the operation, cost, and efficacy of school and preschool-based vision screening programs, including how effective treatment of children identified by screening programs may reduce the prevalence and long-term outcomes of amblyopia. Yes No

2. This activity will influence how I practice ophthalmology. Yes No
   a. If you answered yes, list one new thing you learned as a result of this activity ______________________________________________ .

3. The quiz questions were appropriate for assessing my learning. Yes No

4. The activity was presented objectively and was free of commercial bias. (Please use the “Comments” field below to provide further information.)
   Strongly Agree  Agree  No Opinion  Disagree  Strongly Disagree
   1  2  3  4  5
   Comments regarding commercial bias ____________________________________________ .

5. Please list topics you would like to see future CME activities address: ________________________________________________________ .

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