

Nov. 2025
Edition

UNIVERSITY OF WASHINGTON CONTINUING MEDICAL EDUCATION

NEWSLETTER

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WELCOME

November is a time to pause, reflect, and celebrate progress — and our CME community continues to make remarkable strides.

From the latest clinical updates to team-based learning and equity-driven initiatives, your engagement fuels innovation across UW Medicine and beyond.

As we look toward the end of the year, let's continue to learn from one another, share what works, and stay connected in our collective mission to advance healthcare for all.

With appreciation,

Jessica Minick, MPA

Executive Director, Continuing Medical Education
University of Washington School of Medicine

CONFERENCE SPOTLIGHT

11th Annual Men's Health Update 2026 | January 30-31, 2026

Join us for the **11th Annual Men's Health Update**, a premier CME event designed to keep healthcare professionals at the forefront of advances in men's health. Men are disproportionately affected by urologic conditions, and staying current with evolving diagnostic tools, treatments, and surgical innovations is essential for delivering state-of-the-art care.

This two-day, in-person course brings together **expert faculty** to share the latest evidence-based strategies on topics including:

- Prostate cancer screening and treatment
- Testosterone deficiency and hypogonadism
- Male urinary dysfunction and BPH
- Sexual dysfunction and erectile health
- Male infertility and genital pain syndromes

Interactive **Q&A panels** follow each session, offering opportunities to engage directly with specialists and deepen your understanding of complex cases.

Registration: [Click here to register](#)

Don't miss this chance to connect with peers, learn from leaders in the field, and enhance your clinical practice. **Register early—space is limited!**

PROGRAM HIGHLIGHTS

On Saturday, November 8, 2025, the CME team hosted the 2nd Interstitial Lung Disease (ILD) Summit for Primary Care at the Orin Smith Auditorium Sponsored by the Division of Pulmonary, Critical Care, and Sleep Medicine, the Center for Interstitial Lung Disease and funded by the Candace Norquist Memorial Fund for the Center of Interstitial Lung Disease, the summit brought together leading experts and primary care providers to advance early recognition and management of ILD.

The summit is created in honor of Candace Norquist, a patient at the Center for ILD, who unfortunately passed away as a consequence of pulmonary fibrosis, whose legacy continues to inspire efforts to improve ILD outcomes through education and awareness. The program emphasized the critical role of primary care in identifying symptoms such as persistent cough and shortness of breath, initiating diagnostic evaluations, and facilitating timely referrals.

Participants engaged in a full day of lectures and panel discussions covering:

- ILD overview and diagnostic imaging
- Connective tissue disease-related ILD
- Environmental and occupational exposures
- Home-based exercise strategies
- Genetics and clinical trials
- Palliative care approaches

A multidisciplinary panel featuring pulmonologists, radiologists, pathologists, rheumatologists, physical therapists, and genetic counselors provided a collaborative perspective on ILD care. The summit concluded with a reception, fostering networking and continued dialogue among attendees.

The event reaffirmed the importance of equipping primary care providers with the tools and knowledge to detect ILD early—ultimately improving patient outcomes.

UPCOMING CME COURSES

Registration Open Now!

- [11th Annual Men's Health Update](#) | January 30-31, 2026 | UW Tower (In-Person)



Registration Opening Soon!

- [Diabetes Update for Primary Care 2026](#) | February 26-27, 2026 | UW Tower (In-Person)
- [22nd Annual Reproductive & Gynecology Health Updates](#) | March 26-27, 2026 | South Lake Union Campus and via Zoom Webinar (Hybrid)

Explore Our Offerings: [Visit our CME portal](#)

ACCREDITATION CORNER

Determining Relevancy

When clinicians participate in accredited continuing education, they often disclose financial relationships with healthcare companies. But the key question is: When is a financial relationship relevant?

According to the ACCME Standards for Integrity and Independence, a financial relationship is considered relevant if:

- The individual is in a position to control educational content, and
- The content is related to the business lines or products of the ineligible company with which they have a financial relationship.

What Does “Related To” Mean?

Educational content does not need to explicitly mention a company’s products for bias to occur. If the topic could influence learners toward the company’s products—intentionally or unintentionally—the relationship is relevant.

For example:

- A clinician with consulting fees from a device manufacturer is planning a session on surgical techniques where that device could be used—even if it’s not named.
- A speaker funded by a pharmaceutical company is presenting on disease management strategies that involve drug classes the company produces.

Ask: Could this content intersect with the company’s business lines?

If yes, the relationship is relevant.

Consider indirect influence: Even without naming products, could recommendations favor the company’s interests?

Seek expert input: If unsure, consult the activity’s clinical subject matter expert or the CME team.

ACRONYMS IN CME

Demystifying CME Acronyms

Starting out in Continuing Medical Education (CME) can feel like learning a new language. To help new course chairs and coordinators navigate the alphabet soup, here’s a quick guide to some of the most commonly used acronyms in our CME world:

- **CME** – Continuing Medical Education: Educational activities that help physicians maintain competence and learn about new and developing areas of their field.
- **ACCME** – Accreditation Council for Continuing Medical Education: The national body that sets standards for CME activities and accredits organizations that offer CME.
- **AMA PRA Category 1 Credit™** – American Medical Association Physician’s Recognition Award: The most common type of CME credit awarded to physicians for participation in accredited activities. Also note, that this statement must always be italicized in ALL course materials and publications.
- **RSS** – Regularly Scheduled Series: Recurring educational sessions such as grand rounds, case conferences, or journal clubs.
- **JP** – Joint Providership: A collaboration where an accredited provider works with a non-accredited entity to plan and implement a CME activity.
- **COI** – Conflict of Interest: A disclosure process to ensure transparency and independence in CME content.

Understanding these acronyms is a great first step toward confidently managing CME activities. If you ever feel unsure, don’t hesitate to reach out to the CME office—we’re here to support you!

TRIVIA: DID YOU KNOW?

- What does ACCME stand for?
 - Accreditation Council for Continuing Medical Education
- What is the minimum number of credits required annually for WA physician licensure?
 - In Washington, the minimum number of credits required annually for physician licensure is 200 credits every four years. This includes specific training in areas such as suicide prevention and opioid prescribing.

CONTACT US

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