# Multi-Session Activity Detail Form

| **Date** | **Session Time**<br><br>e.g. 9:00-10:00 | **Speaker Name with Credentials**<br>(include moderator name if applicable) | **Session Title/Number** | **Teaching Method**<br><br>e.g. Lecture, Demonstration, Panel, Discussion, Workshop | **Activity Objectives***<br><br>**Identify pharmacology objectives with an (RX) in parenthesis immediately before or after the specific pharmacology objective | **Requested Time for Pharmacology** *if applicable*<br><br>**(in minutes)** e.g. 30 mins. Leave blank if n/a |
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