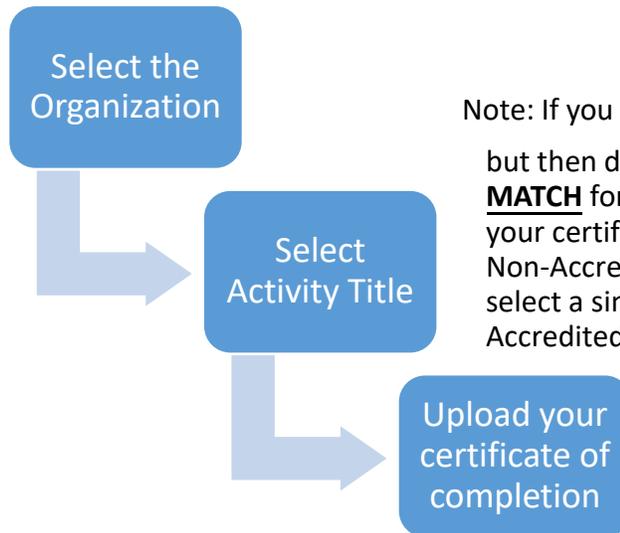


## Adding CE to Your Record

To add a new CE activity, select 'VIEW' for the CE period in which you are collecting for. Some activities will be found in the Accredited Activities directory, but not all. If you don't see an **EXACT MATCH** for the title and company on your certificate, please use the Non-Accredited directory.

**Please ensure your certificate includes your name, the activity title, the date taken, and hours/credits.**

### Accredited Activity



Note: If you choose an Organization, but then do not see the **EXACT MATCH** for the ***ACTIVITY TITLE*** on your certificate, please use the Non-Accredited directory. Do not select a similar title from the Accredited directory

CE activities and events are divided based on whether or not they have been accredited by the OAVT. If you are unsure, first look for the organization (provider of the CE activity) and then the activity title.

If you are unable to locate the organization or activity title, please change the selection below to "Not Accredited".

Required fields are denoted with a \*.

OAVT Accredited Activity \*

Accredited  Non Accredited

Organization \*

Boehringer Ingelheim

- If you presented or attended an event, program or conference, select the organization or event provider.
- If you authored or published materials, please indicate the publisher or paper.

Activity Title \*

Fleas, Ticks & Heartworm - Preventative Strategies

Activity Category

Category 1

Start Date



Date of Completion \*



## Non-Accredited Activity

- For all Non-Accredited Activities, you will need to provide more information, including the date completed, the estimated number of credits, based on the certificate, and will need to upload the certificate
- Non-Accredited Activities will be reviewed by the OAVT – credits may be adjusted from the member’s estimate if they are not in alignment with the CE Policy. Members will be notified if this occurs

Activity Type *	In Clinic Presentation	<p>Note: In Clinic Presentation covers all individual in person or online modules or webinars, or courses</p>
Activity Category	Category 1	
Activity Method *	In-Person Select... In-Person Virtual - Interactive (Live) Virtual - Non-interactive (Recorded)	
Activity Title *		
Organization *	Other	<p>• If you presented or attended an event, program or conference, select the organization or event provider.</p> <p>• If you authored or published materials, please indicate the publisher or paper.</p> <p>Note: If the organization is not listed, please select "Other".</p>
Other (Organization) *	The name of the company presenting the session	

Select the Organization that hosted the Activity. If you do not see the Organization listed, select 'Other' and add the Organization

### Category 1

- Medical learning
- In-class or virtual education directly related to the RVT scope of practice

### Category 2

- Volunteer work
- A letter on letterhead from a supervisor or manager will be required, describing the volunteer work, dates and hours. Letters which simply give a total over the course of a year are not acceptable.

### Category 3

- Professional Development/Non-medical learning
- A certificate or letter from a supervisor or manager will be required