

## Use of Methadone in Pain Management December 1, 2016

In order to obtain CE credit, participants must complete this "CE Validation" form and submit it with the "verification of CE Participation" form at the completion of the program.

### CE Validation Form

Please check the session(s) that you attended.  
(Maximum 1.0 Contact Hour)

**Lecture/Universal Program Number**

**Contact Hours**

\_\_\_ **Use of Methadone in Pain Management**  
**#0043-9999-16-091-H01-P**

**1.0 Contact hour**

Total number of contact hours (Maximum 1.0 contact hour) \_\_\_\_\_

I certify that the above information is correct.

Name: \_\_\_\_\_

Participant's Signature: \_\_\_\_\_