

## Organization for Human Brain Mapping OHBM 2018 Continuing Medical Education Credits

This will certify that you attended the 24th Annual Meeting of the Organization for Human Brain Mapping held June 17-21, 2018 at the Suntec Convention and Exhibition Center in Singapore.

This activity has been planned and implemented in accordance with the Essential Areas and Policies of the Accreditation Council for Continuing Medical Education (ACCME) through sponsorship of the Organization for Human Brain Mapping. The OHBM is accredited by the ACCME to provide continuing medical education for physicians.

The OHBM designates this educational activity for a maximum of 29.50 hours in Category 1 credit towards the AMA Physician's Recognition Award. Each physician should claim only those hours of credit that he/she actually spent in the educational activity.

\_\_\_\_\_  
*Please Print Your Name Above*

EDUCATIONAL COURSES	
EEG and MEG Source Reconstruction with Field Trip (Full Day)	7.00
Hands on reproducible brain imagingvistas (Full Day)	7.00
Network Neuroscience: Concepts, Methods and Applications (Full Day)	7.00
Pattern Recognition for NeuroImaging (Full Day)	7.00
Introduction to Imaging Genetics (Half Day)	3.50
Reusing Public Neuroimaging Datasets (Half Day)	3.50
Time-varying connectivity in resting-state fMRI: from methods to interpretations (Half Day)	3.50
Why it all comes back to Anatomy (Half Day)	3.50
Beyond Linear Decoding: An Introduction to Deep Learning Methods (Half Day)	3.50
Neuroimaging Meta-Analysis (Half Day)	3.50
Brain parcellations and functional territories (Half Day)	3.50
Population neuroscience: How to responsibly handle big data in the age of biobanks (Half Day)	3.50
<b>Maximum number of possible credits earned at Educational Courses</b>	<b>7.00</b>
ANNUAL MEETING CREDITS	
Talairach Lecture	0.75
Keynote Lectures	0.75 each
Symposia	1.25 each
Oral Sessions	1.25 each
LOC Symposia	1.25
Meeting Highlights	1.00
General Assembly and Feedback Forum	0.50
<b>Total number of possible credits earned at Annual Meeting</b>	<b>22.50</b>
<b>TOTAL NUMBER OF POSSIBLE CREDITS</b>	<b>29.50</b>

Hours Actually Attended: \_\_\_\_\_

\_\_\_\_\_  
*Physician's Signature*

\_\_\_\_\_  
*Date*

**Please keep this certificate for your records  
You do not need to return this form to the OHBM Office**