

## SCMA / S. C. Board of Medical Examiner's

## Proof of "Volunteer" CME Hours (for physicians – MD/DO)

SC Code: §44-30-310

<u>SECTION 5.</u> Any licensed health care provider who renders medical services voluntarily and without compensation or the expectation or promise of compensation and seeks no reimbursement from charitable and governmental sources may fulfill one hour of continuing education for each hour of volunteer medical services rendered, up to a maximum of <u>twenty-five percent of the provider's required continuing education credits</u> for the licensure period.

(Up to 10 CME volunteer hours may be counted toward the 40 CME requirement for physicians per biennial period.)

| To claim "volunteer CME" the following information must be provided: |  |
|--|--|
| Physician name:  |  |
| (MD/DO)  |  |
| (please print)   |  |
| South Carolina Medical   |  |
| License #:   |  |
| (required)   |  |
| Name of Charitable or  |  |
| Governmental agency  |  |
| sponsoring volunteer   |  |
| hours:   |  |
| Date volunteered:  |  |
| # hours volunteered:   |  |
| Physician  |  |
| Attestation/Signature:   |  |
| (required)   |  |
| Signature of   |  |
| charitable/governmental  |  |
| agency staff:  |  |
| Date:  |  |
|  |  |