Lifelong Learning and Self-Assessment (LLSA)

Reading Submission Form

Please attach a copy of this form with a paper copy of each reading and send to the address or fax number below. Typewritten or computer-printed submissions are recommended. This form can also be downloaded from the website.

Reading Submission for the Emergency Medicine LLSA

Mailing address: EM LLSA Readings
American Board of Emergency Medicine
3000 Coolidge Road
East Lansing, MI 48823-6319

FAX number: 517.332.3943

Name: _____________________________________________________________________________
Mailing Address: _____________________________________________________________________
___________________________________________________________________________________
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I am submitting this: ☐ As an individual ☐ On behalf of ________________________________
(Not on behalf of an organization) (Please specify organization)

SUBMISSION REFERENCE

Title: ______________________________________________________________________________
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Author(s) Name: ______________________________________________________________________
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