LOUISIANA STATE BOARD OF MEDICAL EXAMINERS



Request for Exemption from CDS related Continuing Medical Education as per Act 76 of 2017

<u>NOTE:</u> All residents (PGY & GETP) must comply with the 3-hour CDSCME requirement and cannot apply for an exemption!

I,	certify that	at I have not prescribed, administered of
dispensed any controlled da	ingerous substances in the state of Loui	siana during the entire year covered by my
expiring license. I understa	and that this certification will be verifie	ed by a review of the last twelve months of
my prescribing history thre	ough the Prescription Monitoring Prog	gram. I understand that if I subsequently
prescribe, administer or disp	pense a CDS in Louisiana, I must satisfy	y the CDS CME requirement as a condition
to license renewal for the y	ear immediately following that in whic	h the CDS was prescribed, administered o
dispensed.		
G:		
Signature	License #	Date

* After signing this form, scan it then upload it during your renewal process (or) email it to cdscme@lsbme.la.gov.

Or you may mail it to:

Louisiana State Board of Medical Examiners ATTN: CDS CME 630 Camp Street

New Orleans, LA 70130