CEC Category	*Activity Code (credits/activity)*
7. In-House Learning	**A**. Approved Cytology Training (50/course), **B**. Formal lecture/clinico-path meeting (20/session), **C**. Formal workshop (20/day). **D**. Multiheader slide discussion (20/hr), **E**. Computer/Management course (20/course)
8. External Learning	**A**. Local ASC branch meeting (30/meeting), **B**. Formal lecture/clinico-path meeting (30/session), **C**. Formal workshop (30/day), **D**. National/ International Cytology meeting (50/day), **E**. ASC Tutorial (50/day), **F**. Formal Refresher course in cytology (50/course), **G**. National/ International Meeting in related discplines (30/day), **H**. Computer/Management course (30/course)

Date	***Activity Code*** *(A – H)*	***Details***	***CEC Category*** *(7 – 8)*	***Credits***

Total Credits	7	8

FORM A2 - DIARY OF GROUP CEC ACTIVITY

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