

**LOUISIANA SOCIETY OF HEALTH-SYSTEM PHARMACISTS**  
**Education Needs Assessment**  
**Gap Analysis Form**

**Gap/Need:** *(Name of the gap or need)*

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**Description:** *(Further description, if needed)*

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**Sources:** *(Specific sources which identify the gap/need, including references to specific current literature, surveys of practitioners, past activities and conference evaluations, etc.)*

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**Proposed Related Activities:** *(Identification of the activities proposed to address the gap/need)*

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**Activity Assessment:** *(Summary of the assessments or the effectiveness of the activities held.)*

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**Follow-up:** *(Plan for maintaining or improving)*

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