

Regularly Scheduled Series (RSS) Program Evaluation

Neuro P M & R Grand Rounds: 2021

Thank you for your time in providing this valuable feedback which will be used to enhance future RSS programs.

1. Please respond regarding how much you agree or disagree.

	Disagree		Agree	
Participating in this RSS program changed my KNOWLEDGE. [1-4.00]	(0)	(0)	(0)	(1)100%
Participating in this RSS program changed my COMPETENCE. [1-3.00]	(0)	(0)	(1)100%	(0)
Participating in this RSS program changed my PERFORMANCE. [1-3.00]	(0)	(0)	(1)100%	(0)

If you agree, please list one or more areas of your improved knowledge, competence or performance.

2. Do you think the topics in this RSS program were presented without commercial bias or a conflict of interest?

(1)

Yes (1-100.00%)

If you answered 'NO' to the above question, and if you believe there were commercially biased speakers/presentations, please list any you can recall.

3. Please rate:

	Poor	Fair	Good	Excellent
The overall quality of this RSS program. [1-3.00]	(0)	(0)	(1)100%	(0)

4. Based on your educational needs and medical practice gaps, please suggest topics and/or speakers for future RSS programming in this medical discipline.

(1)

Neurosurgical intervention outcomes

5. Please identify a change that you will implement into practice as a result of attending this educational activity (new protocols, different medications, etc.)

6. Please list any additional comments you may have about this educational activity.

As one of the participants in this RSS program, we want to encourage you to implement those ideas that were appropriate to your healthcare practice environment.

This evaluation data is confidential, and no individual will be identified by the office of Continuing Medical Education and Professional Development.

This data will only be used for quality assessment and improvement of future CME courses. Thank you very much.



Regularly Scheduled Series (RSS) Program Evaluation

P M & R Grand Rounds

July 1, 2018 through June 30, 2019

Thank you for your time in providing this valuable feedback which will be used to enhance future RSS programs.

1. Please respond regarding how much you agree or disagree.

	Disagree		Agree	
Participating in this RSS program changed my KNOWLEDGE. [2-3.50]	(0)	(0)	(1) 50.00%	(1) 50.00%
Participating in this RSS program changed my COMPETENCE. [2-3.50]	(0)	(0)	(1) 50.00%	(1) 50.00%
Participating in this RSS program changed my PERFORMANCE. [2-3.50]	(0)	(0)	(1) 50.00%	(1) 50.00%

If you agree, please list one or more areas of your improved knowledge, competence or performance.

(1)

Pharmacologic management of conditions

2. Do you think the topics in this RSS program were presented without commercial bias or a conflict of interest?

(2)

Yes (2-
100.00%)

If you answered 'NO' to the above question, and if you believe there were commercially biased speakers/presentations, please list any you can recall.

3. Please rate:

	Poor	Fair	Good	Excellent
The overall quality of this RSS program. [2-3.50]	(0)	(0)	(1) 50.00%	(1) 50.00%

4. Based on your educational needs and medical practice gaps, please suggest topics and/or speakers for future RSS programming in this medical discipline.

(1)

emerging technologies in neuro rehab

5. Please identify a change that you will implement into practice as a result of attending this educational activity (new protocols, different medications, etc.)

6. Please list any additional comments you may have about this educational activity.

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