

**AMERICAN COLLEGE OF SURGEONS  
DIVISION OF EDUCATION  
CME JOINT SPONSORSHIP PROGRAM**

**EVALUATION FORM  
121st Annual Session of the Southern Surgical Association  
December 7, 8 & 9, 2009 – Hot Springs, Virginia**

- 1) PLACE THIS FORM IN THE CME BOX AT THE CME / REGISTRATION TABLE \*  
 2) MAIL TO B. MARK EVERS, M.D., UNIVERSITY OF TEXAS MEDICAL BRANCH, 301 UNIVERSITY BLVD,  
 GALVESTON, TX 77555-0536 (no later than 12/17/09)  
 3) FAX TO 409-747-2253 or EMAIL TO sholmes@utmb.edu

**\*HOURS: MONDAY 8:00AM–5:00PM / TUESDAY 8:00AM-5:00PM / WEDNESDAY 8:00AM-12:00PM**

As a participant at this educational activity, I attended \_\_\_\_\_ hours\* of sessions.

\*1 hour = 1 AMA PRA Category 1 credit™ - Total of 17.5 credits

If applicable, insert the following: \*Note: CME Certificates will be mailed within eight weeks.

Please check the box if you are a member of the American College of Surgeons. Your MYCME ACS Portal Page will be updated with the credits earned within 3 months of this meeting.

**PLEASE PRINT**

**NAME** \_\_\_\_\_ **email** \_\_\_\_\_

**Instructions:**

- ♦ Please circle the appropriate number for each question

	Excellent	Very Good	Good	Fair	Poor
1. Overall, how would you rate this educational activity?	5	4	3	2	1
	<b>Strongly Agree</b>	<b>Agree</b>	<b>Neutral</b>	<b>Disagree</b>	<b>Strongly Disagree</b>
2. Program topics and content met the stated objectives	5	4	3	2	1
3. Content was relevant to my educational needs	5	4	3	2	1
4. Educational format was conducive to learning	5	4	3	2	1
5. Acquired knowledge will be applied in my practice environment	5	4	3	2	1
6. I will seek additional information on this subject	5	4	3	2	1
7. Program was fair, objective, and unbiased toward any product or program	5	4	3	2	1

Please explain any specific instance(s) of bias or conflict of interest:

\_\_\_\_\_

8. List a minimum of two things you are going to change in your practice as a result of what you have learned at this activity.

\_\_\_\_\_

9. Describe the barriers anticipated when implementing the above changes:

\_\_\_\_\_

10. Do you have any suggestions for future topics to support and/or expand on what you have learned at this activity?

\_\_\_\_\_

Additional Comments

\_\_\_\_\_

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