

THE COOPER HEALTH SYSTEM, CONTINUING MEDICAL EDUCATION
Medicine Grand Rounds Participant Evaluation Form

DATE:

SPEAKER:

TOPIC:

CHECK ONE: Attending Resident Medical Student
 Other: _____

To assist us in evaluating the effectiveness of this activity, please answer the following questions and return this form to the attention of LAURA CHROPKA, Internal Medicine Programs, E&R Bldg. 3rd floor, Medical Education suite.

1. The global learner objective for this series is to improve patient care by gaining new information about therapeutic interventions, management principles, technological advancements, and prevention in the field of medicine. In addition, this series is used to relay new information about the political, economic, and social changes occurring in the medical world. Do you feel that this presentation met one or more of these learner objectives?

Yes No Somewhat

2. Did you find that this activity presented a balance of therapeutic approaches?

Yes No Somewhat

3. Did you find that this presentation showed bias related to any commercial product(s)?

Yes No Somewhat

4. Did you find that this presentation enhanced your professional effectiveness?

Yes No Somewhat

5. In terms of RELEVANCE to your professional activities, how do you rate the content of this activity?

Poor Average Good Excellent

6. Please evaluate the QUALITY of the instructional process.

Poor Average Good Excellent

7. Speaker/topic requests for future activities:

8. Additional comments about this presentation:

NAME: (optional) _____