

 HUNTSVILLE
HOSPITAL SYSTEM
EVALUATION FORM

Cervical Spine: Conditions & Treatments

CME: 248-02-10 Category 1 AMA PRA Hours: 1.0

Date Completed: _____



Enduring Materials Instructions:

1. Watch DVD
2. Complete this evaluation form
3. Return the evaluation form to Corporate University c/o Beth Wester via
 - a. FAX: 256-265-9417
 - b. Mail: Corporate University, Huntsville Hospital, PO Box 1167, Huntsville, AL 35801
 - c. Walk In: Corporate University, 109 Governors Drive, Huntsville, AL 35801
4. When we receive the evaluation form, you will be sent a certificate documenting completion of the enduring material CME.

Participant Information:

Title: _____ Name (First, Last) _____

If Huntsville Hospital employee, Badge Number: _____ Department: _____

Address: _____

Phone: _____ Fax: _____ Email: _____

Objectives: As a result of this training, I am able to:

- Yes No Discuss common clinical presentations of cervical disorders and review anatomy.
- Yes No Examine cervical spine conditions and nonsurgical treatment options.
- Yes No Explore minimally invasive surgical treatments including anterior cervical discectomy and fusion.
- Yes No Discuss surgical treatments and new techniques to aid in cervical fusion.

Content:

- Yes No Was the content evident based?
- Yes No Was the source of evidence identified?
- Yes No Was the type of evidence identified?
- Yes No Was the content objective and balanced?

Was the activity free from commercial bias? Yes No If no, please specify _____

Did faculty disclose any off-label use of drugs? Yes No If yes, please specify _____

State two new concepts from this class and give one (1) example of how this concept will influence patient outcomes.

1. Concept: _____

Example: _____

2. Concept: _____

Example: _____

Learning Outcomes: As a result of this training, I *intend* to:

- Implement changes in my practice such as
I will use these skills/knowledge Immediately as circumstances arise
- Will access the source of the information for further research on practice implications
- Not applicable to my practice

Over please.

Circle the appropriate number, one (1) being poor through five (5) being excellent. Indicate N/A for items not applicable.

Author / Faculty:

1. Mastery of content and skill	1	2	3	4	5	N/A
2. Presentation skills	1	2	3	4	5	N/A

Materials:

	<i>Poor</i>			<i>Excellent</i>		
1. Quality of print materials	1	2	3	4	5	N/A
2. Quality of audio visual materials	1	2	3	4	5	N/A
3. Instructions were clear	1	2	3	4	5	N/A
4. Content was easy to follow and understand	1	2	3	4	5	N/A

Other:

	<i>Poor</i>			<i>Excellent</i>		
1. Organization/logical sequence	1	2	3	4	5	N/A
2. Usefulness/practicality	1	2	3	4	5	N/A
3. Self Study format is beneficial	1	2	3	4	5	N/A
4. General Rating: (Overall Quality)	1	2	3	4	5	N/A

How applicable is the content to your daily professional activities?

What other topics would help you better perform your job?

Comments:



THANK YOU!

This Evaluation Form meets the Accreditation Council for Continuing Medical Education's (ACCME) Element 2.3 and Element 2.4.

Huntsville Hospital CME Committee designated this educational activity for a maximum of up to 1.0 credit Category 1 towards the AMA Physician's Recognition Award. Each physician should claim only those hours of credit that he/she actually spent in the educational activity.

This activity has been planned and implemented in accordance with the Essential Elements and Standards for Commercial Support of the Accreditation Council for Continuing Medical Education through the joint sponsorship of Huntsville Hospital and the Spine and Neurosurgery Center. Huntsville Hospital is accredited by the Medical Association of the State of Alabama to provide continuing medical education for physicians. Huntsville Hospital takes responsibility for the content, quality, and scientific integrity of the CME activity.