

HALO-FLIGHT CE PROGRAM EVALUATION

SESSION TITLE: CBRAC Trauma Outcomes Presentation

DATE: 4.28.266

SPEAKER(S)/CREDENTIALS/PRESENTATION TITLE:

- #1 Pre-Hospital whole blood Permissive hypotension in the presence of hemorrhagic shock Dr. Kathy Grove, FACS
- #2 Shoreline Trauma Outcomes Presentation John H. Adamski II, MD, MSc, MPH, FACS
- #3 _____

PERSONAL DATA: CommSpec Management Mechanic Pilot EMT RT
 Physician Paramedic Firefighter RN LEO Other: _____

SESSION EVALUATION	Strongly Agree	Agree	Disagree	Strongly Disagree	No Comment or N/A
1. Program fulfilled my expectations.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Audio and Visual aides were effective.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. Objectives were clearly stated and met.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. Outline in syllabus generally matched session presented.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. The course information presented was current.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. Speaker(s) was knowledgeable.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. Educational content was appropriate to my professional experience.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. Educational format (lecture, workshop, hands-on, etc.) was effective.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9. Speaker(s) presented no commercial biases.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

OVERALL SPEAKER EVALUATION	Excellent	Good	Fair	Poor	No Comment
#1	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
#2	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
#3	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
#4	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
#5	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
#6	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Suggestions for future topics / speakers:

Comments:

Email the completed form to wendyg@haloflight.org.