Alabama Department of Public Health
Office of Clinical Management and Practice
Program Evaluation

The Cost of Health Literacy

ASNA Number 5-91.17.31
Expires September 30, 2018

Please complete the following:

1. I have achieved my personal objectives for attending today's program:

   Yes

   No

   If no, what could we have provided to enable you to meet your personal objectives?

2. List two things learned today that you can incorporate into your daily practice or job duties:

3. What other programs would you attend if offered?