

Alabama Department Of Public Health Participant Evaluation Form/Method

Title of Activity: **Bronchopulmonary Dysplasia: Nobody Puts Baby in a Corner**

Regularly Scheduled Educational Series (RSS)? Yes No

CNE Designated Activity #: 23.07

Activity Date: **April 20, 2023**

The planning committee would like your opinion and comments on this educational activity. This will assist in planning future educational activities.

QUALITY OF INSTRUCTION: *(if multiple presenters, evaluate the following for each speaker/presenter individually)*

| Please check the following criteria when rating the following speaker: Presenters Name, Credentials: | Excellent | Good | Fair | Poor |
|--|-----------|------|------|------|
| Knowledge of subject | | | | |
| Organization and clarity of content | | | | |
| Effectiveness of teaching methods | | | | |

LEARNING OUTCOMES: *(if multiple outcomes, evaluate the following for each outcome individually)*

As a result of this activity, I was/will be able to, or I am able to **(insert a learning outcome here)**:

| Please list each outcome below | Strongly Agree | Agree | Disagree | Strongly Disagree |
|--------------------------------|----------------|-------|----------|-------------------|
| | | | | |
| | | | | |

(Mandatory Requirement) As a result of this activity, please share at least one action you will take to change your professional practice/ performance:

RSS outcome(s): As a result of this activity, I was/will be able to **(insert RSS learning outcome here)**:

YES NO If *no*, please explain:

Were the presentation(s) free from commercial bias? Yes No If *no*, please explain:

General comments about the program:

Suggestions for future program topics:

ADMINISTRATIVE ARRANGEMENTS:

| Please check the administrative arrangements as satisfactory or unsatisfactory. | Satisfactory | Unsatisfactory |
|---|--------------|----------------|
| Promotional information provided adequate information | | |
| Registration process was efficient | | |
| Scheduling of the activity met my needs | | |

Thank you!