

BHSF CME Committee Review**Evaluation Scores**

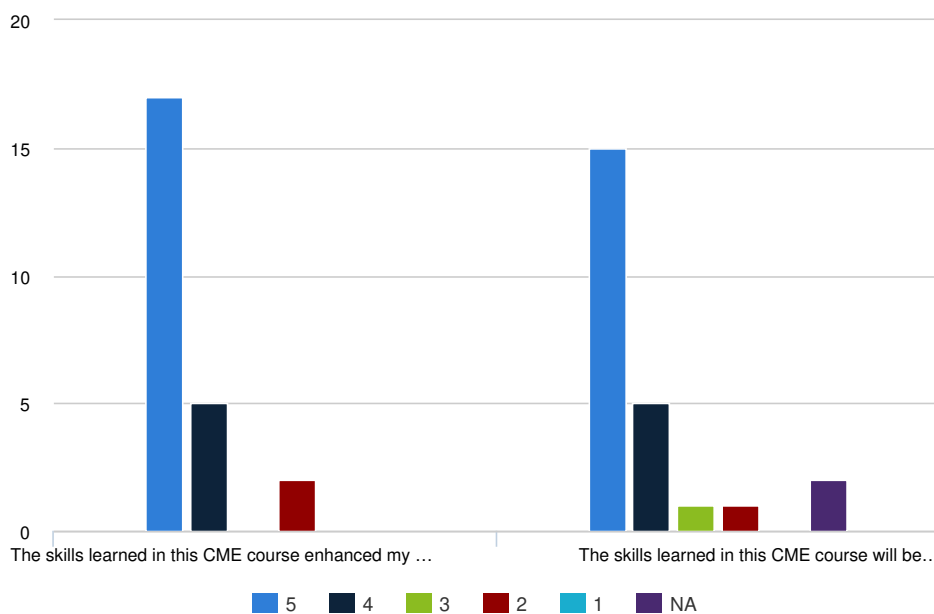
June - September 2021

Lecture Date	Lecture Title	Speaker(s)	Total Attnd	Skills learned enhanced my professional competence	Skills learned will be applied in my practice	Avg. Score
3/11/2021	Dental Oncology Conference Series – Treatment and Management of Radiation Patients	Michael T. Kase, DMD	32	4.7	4.9	4.8
3/18/2021	MCVI Grand Rounds: COVID-19 Cardiomyopathy: Case-Based Discussions	Dr. David Bejar, Dr. Sandra Chaparro, Dr. Eli Friedman, Dr. Marcus St. John, Dr. Elliott Elias and Dr. Socrates Kakoulides	65	4.8	4.8	4.6
4/9/2021	MCI Radiation Oncology Grand Rounds - Novel Therapy for Gliomas	Patrick Y. Wen, M.D.	36	4.9	4.9	4.9
4/14/2021	Mental Health Conference Series: Life support: helping our female health workers survive - and thrive - during COVID-19	Ana Viamonte-Ros, M.D., MPH	49	4.7	4.7	4.8
4/16/2021	Miami Cancer Institute Women's Cancer Symposium, Second Annual	Various	212	4.8	4.7	4.6
5/5/2021	MCVI Grand Rounds - Disparities in Cardiovascular Care: Taking Action in Clinical Settings	George A. Mensah, M.D., FACC, FAHA	26	4.9	4.9	4.8
5/14/2021	Summit of the Americas on Immunotherapies for Hematologic Malignancies, Second Annual	Various	195	4.8	4.7	4.5
5/18/2021	Jose "Pepe" Alvarez, Jr., M.D., Memorial Lecture on Vascular Disease: DVT and Pulmonary Embolus: Recent Advances in Diagnosis and Therapy	John A. Kaufman, M.D., M.S., FSIR, FAHA, FCIRSE, EBIR	106	4.7	4.6	4.8
6/2/2021	MCVI Fellows Presentations - Clinical Research Topics in Diagnostic and Interventional Radiology	Jennifer Laporte-Caballero, M.D., Blake Jacks, M.D., Varshana Gurusamy, M.D., Charles Lugo, M.D., and James Wang, M.D.	43	5	4.9	4.9
6/17/2021	Suicide Awareness and Prevention in the Hospital Setting	Yankel Girshman, D.O., FAPA, Rachel Rohaidy, M.D., and Amy Exum, LMHC	66	4.8	4.8	4.7
6/24/2021	Promoting Physician Well-Being: How to Thrive in Medicine by Managing Physician Stress	Susan Chalfin, Ph.D.	39	4.9	4.9	4.9

Miami Cancer Institute – Multispecialty Grand Rounds Evaluation - June 14, 2021

This page shows analysis of submitted data, such as the number of submissions per component value, calculations, and averages. Additional components may be added under the "Add analysis components" fieldset.

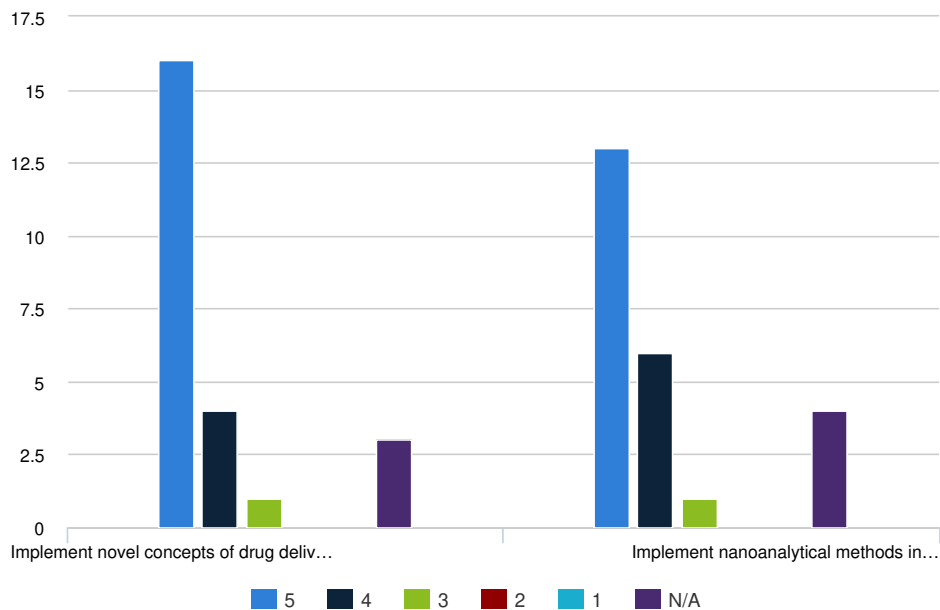
Please score your agreement with or assessment of the following questions and statements by rating on a scale of 1 to 5, with 5 representing the highest level of satisfaction or agreement.



Result details

	5	4	3	2	1	NA
The skills learned in this CME course enhanced my professional competence.	17	5	0	2	0	0
The skills learned in this CME course will be applied in the treatment of my patients	15	5	1	1	0	2

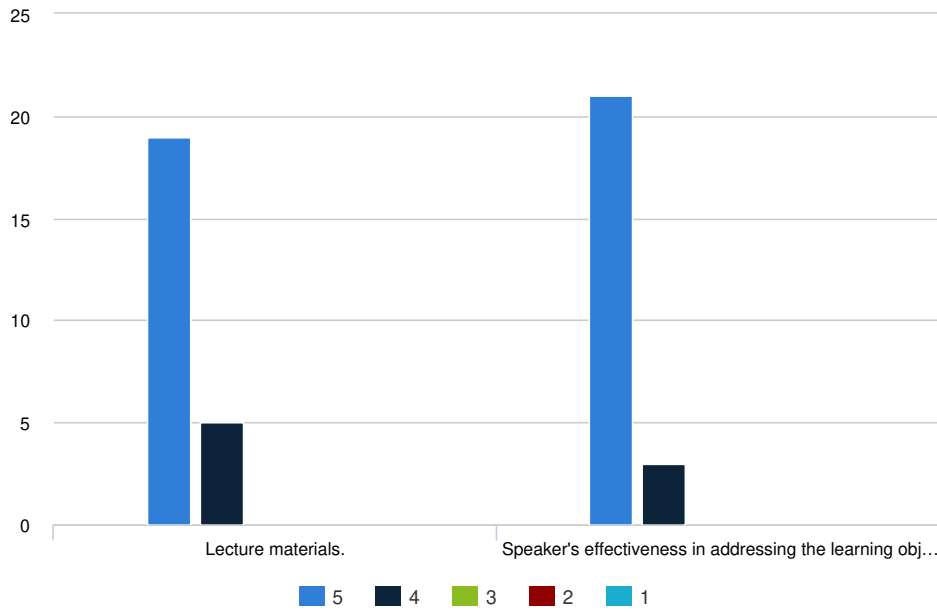
As a result of attending this conference, to what extent do you agree that you will be better able to: (rate the objectives)



Result details

	5	4	3	2	1	N/A
Implement novel concepts of drug delivery to the brain through the use of MR-guided focused ultrasound.	16	4	1	0	0	3
Implement nanoanalytical methods including the use of quantum dots in the detection of cancer.	13	6	1	0	0	4

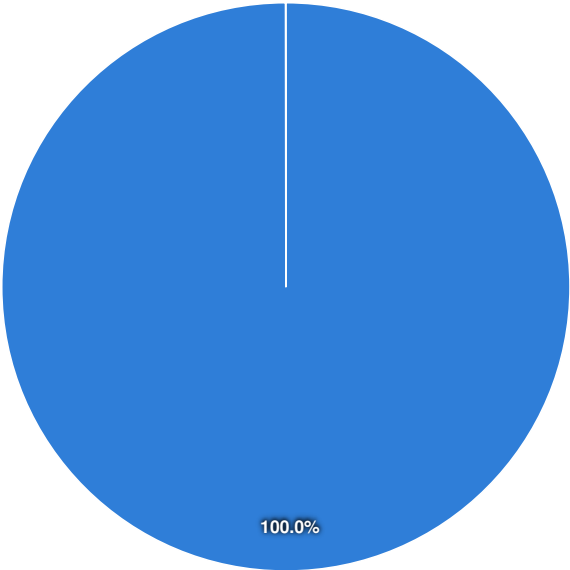
How satisfied or dissatisfied were you with the following conference content?



Result details

	5	4	3	2	1
Lecture materials.	19	5	0	0	0
Speaker's effectiveness in addressing the learning objectives.	21	3	0	0	0

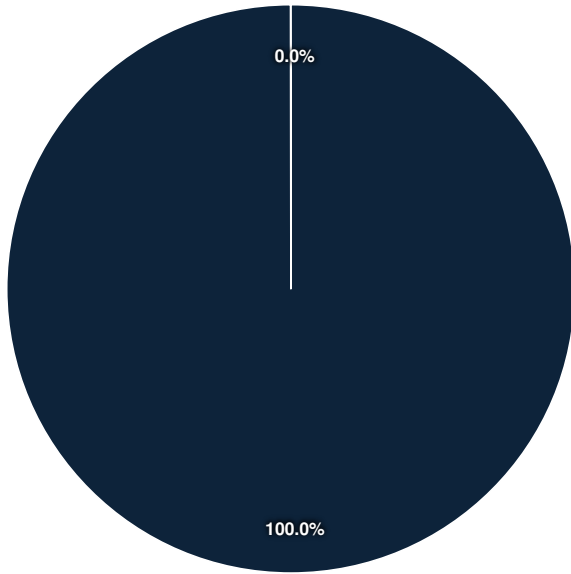
Was this course fair, balanced and without commercial bias?



Result details

Yes	24
-----	----

What, if any, new skills/strategies will you apply in your clinical practice?



Result details

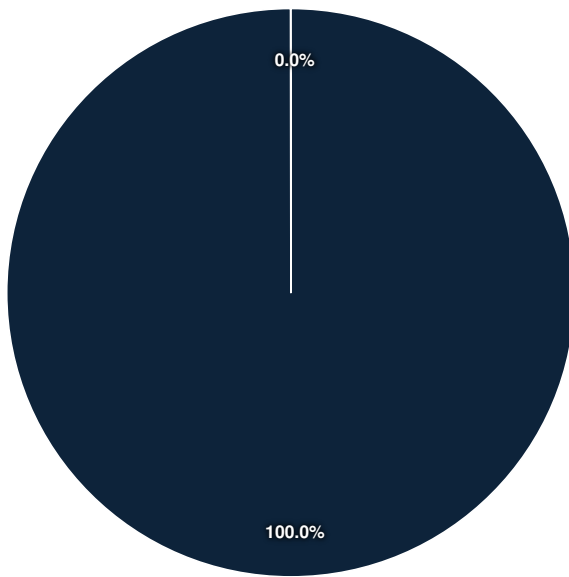
Left Blank	0
User entered value	24
Average submission length in words (ex blanks)	7.17
n/a	
n/a	
develop drug trials in dipg	
All	
Potential use of doxorubicin in DIPG	
N/A to my role as a PI nurse, however i have always been interested in DIPG and possible cures/treatment	
Interesting frontier	
n/a	
None	
It was exciting to see progress using MR focused Ultrasound to penetrate the BBB.	
I do not treat CNS but great to understand options for patients	
n/a awaiting for procedure to be approved in our department	
....	
Reassuring patients that some form of treatment is possible	
X	
X	
All of it	
Learned about advanced in Rx options	
New information and research to share with patients in my clinical area	
Refer pt to facility for treatment that has the modality for treatment	
Assist patients in making better health decisions.	
Do not treat pediatrics but fascinating approach	

Do not treat pediatrics but fascinating approach

It was non applicable.

Better awareness of the extended level of Coordination between MR & Ultrasound-Diagnostic & Neurosurgery Departments for diagnostic, Planning & Monitoring of Patients with this condition, & the benefits of ultrasound assisted nanoparticle delivery of medication

If you do not plan to implement any new skills/strategies in your clinical practice, what is keeping you from doing so?



Result details

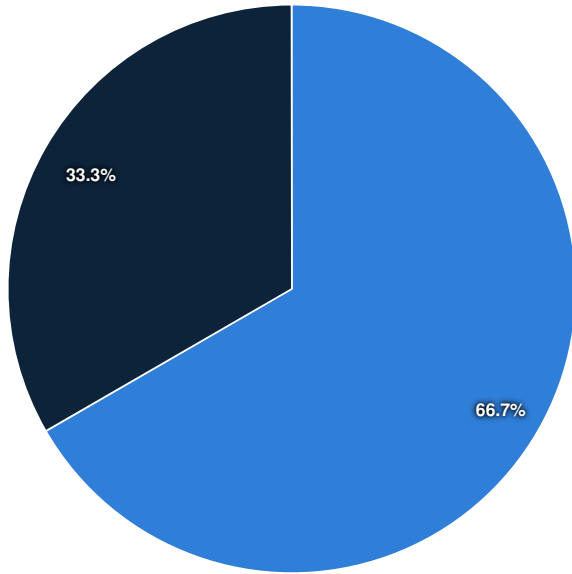
Left Blank	0
User entered value	24
Average submission length in words (ex blanks)	2.54
Outside of scope of my practice	
n/a	
n/a	
Nothing	
N/A	
Not applicable to my job	
Interesting frontier	
n/a	
None	
Yes, this knowledge will help to guide physician initiated studies within MNI	
see above	
n/a	
....	
None	
X	
X	
N/a	
I practice cardiology	
will use	
Na	
N/A	

Not my specialty

Not at this time.

Not Applicable

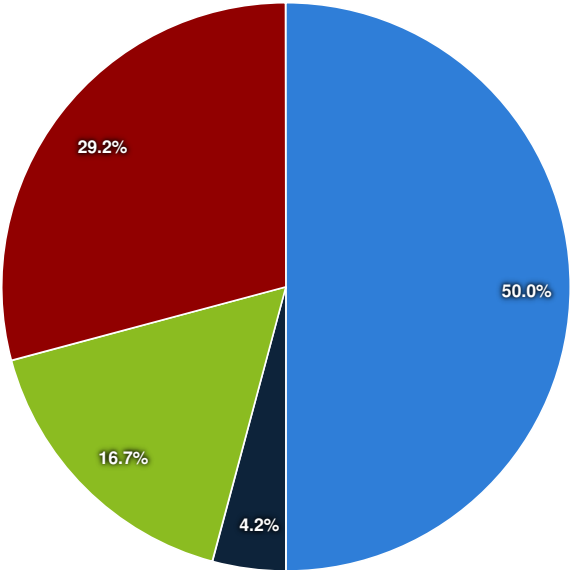
Please provide any additional comments or suggestions.



Result details

Left Blank	16
User entered value	8
Average submission length in words (ex blanks)	8.88
great talk. A focused topic, but I thought it was very well received by all attendees	
n/a	
None	
none	
I believe our department will be part of this procedure.	
Excellent presentation	
N/A	
The selection of slides complemented the presentation. The presentations also demonstrated the impact of research studies from the affiliated lab, to emerging clinical strategies for Diffuse Intrinsic Pontine Glioma, which have traditionally had variable - poor prognosis.	

Please select one:



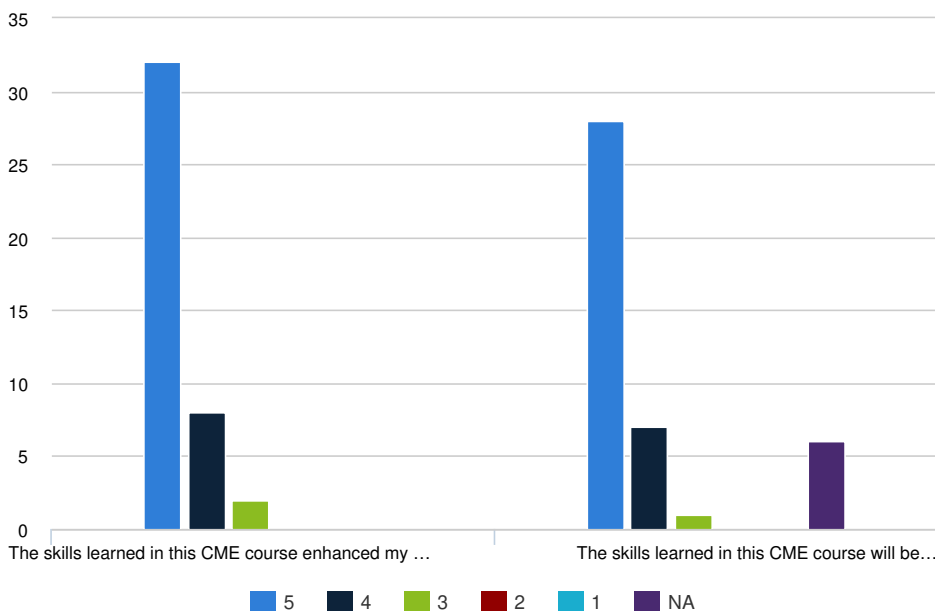
Result details

M.D., D.O.	12
Ph.D/Psy.D	1
R.N.	4
Other...	7 (view)

Conversations in Ethics Evaluation - June 23, 2021

This page shows analysis of submitted data, such as the number of submissions per component value, calculations, and averages. Additional components may be added under the "Add analysis components" fieldset.

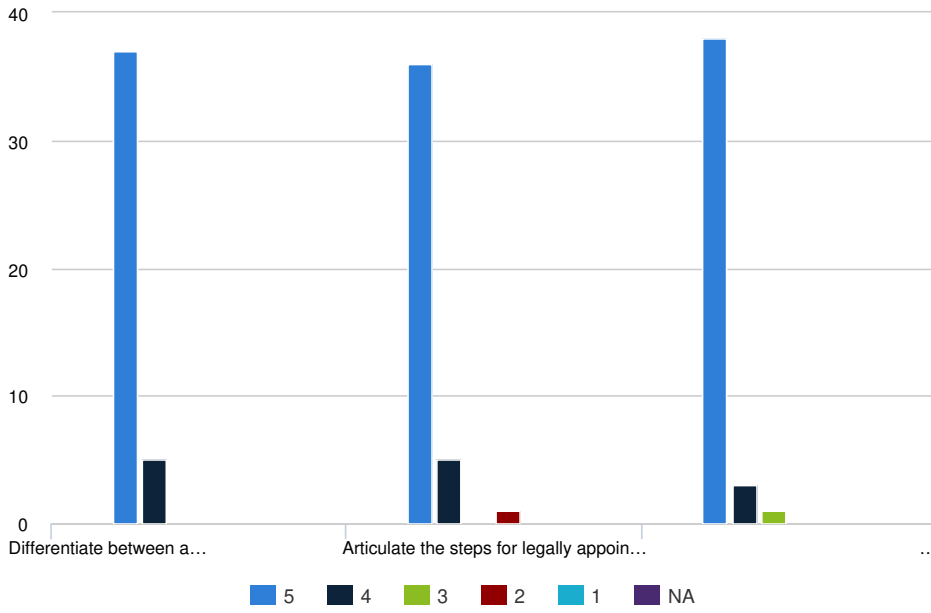
Please score your agreement with or assessment of the following questions and statements by rating on a scale of 1 to 5, with 5 representing the highest level of satisfaction or agreement.



Result details

	5	4	3	2	1	NA
The skills learned in this CME course enhanced my professional competence.	32	8	2	0	0	0
The skills learned in this CME course will be applied in the treatment of my patients.	28	7	1	0	0	6

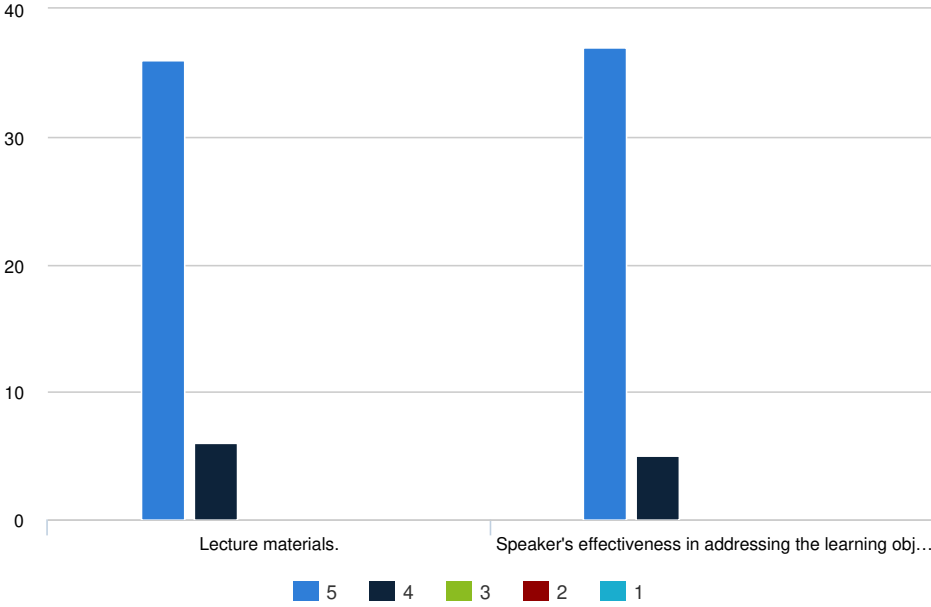
As a result of attending this conference, to what extent do you agree that you will be better able to: (rate the objectives)



Result details

	5	4	3	2	1	NA
Differentiate between an advance directive and the Florida healthcare proxy.	37	5	0	0	0	0
Articulate the steps for legally appointing a healthcare proxy.	36	5	0	1	0	0
Describe the responsibilities of a healthcare proxy in making healthcare decisions for the incapacitated patient.	38	3	1	0	0	0

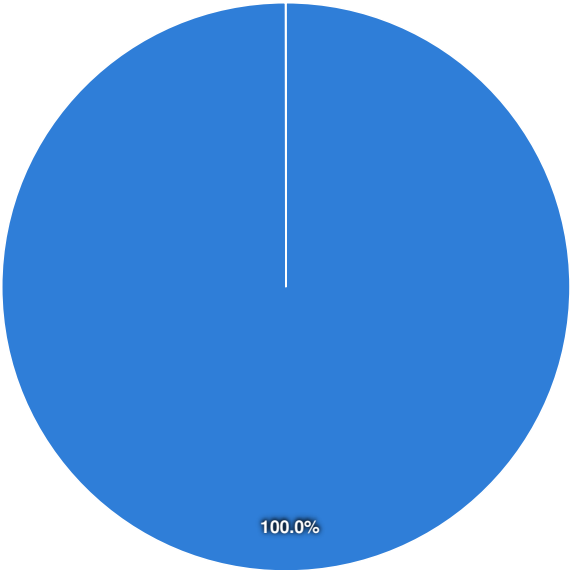
How satisfied or dissatisfied were you with the following conference content?



Result details

	5	4	3	2	1
Lecture materials.	36	6	0	0	0
Speaker's effectiveness in addressing the learning objectives.	37	5	0	0	0

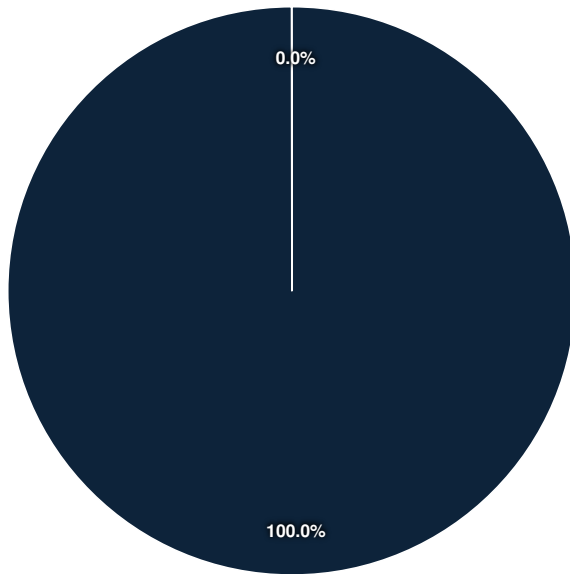
Was this course fair, balanced and without commercial bias?



Result details

Yes	42
-----	----

What, if any, new skills/strategies will you apply in your clinical practice?



Result details

Left Blank	0
User entered value	42
Average submission length in words (ex blanks)	12.52
N/A	
Appreciated the clarification of the subject matter	
helped to reinforce known info. also helped to hear others questions as it helps to know where the confusion lies.	
Yes new knowledge	
NA	
We ensure our patients have an Advance Directive on file and for those who don't we supply them with the form and instruction brochure.	
NA	
Just improved my knowledge. I am not at the bedside.	
Great review	
I will use in a more personal way	
proxy status	
Better knowledge of the process	
Knowing when a healthcare proxy is necessary and how to obtain.	
n/a	
Nursing staff needs to call Case Management or Social Work dept to have the Proxy process initiated and completed. A Proxy form is only good for one admission , any subsequent admissions the proxy process must be repeated as the hierarchy may have changed	
Difference between proxy and adv directive	
It was a good review of Advance directives and proxy designation. Good questions as well	
As a PI nurse who audits complete/appropriate Advance Directives, this course answered some questions that i have had in the past and i now have a better understanding of the correct way to fill out an AD and the correct way to designate proxy/healthcare surrogates especially with the incapacitated patient.	

Looking into having RNs truly encourage capacitated Pts to complete an AD

This definitely clarified for me the difference between a healthcare surrogate and a healthcare proxy.

this CE made adv dir very clear to me thank you versus HC proxy :) I can better explain it to other people yay!

n/a

Being able to create an AD

Ensuring health care proxy designation is managed appropriately to adhere to Florida Statute.

Continue to educate on the importance of having the conversation about Advance Healthcare planning

Updated understanding of legal aspect of healthcare proxy.

yes

knowledge learned and to share the importance of advance directives,

all of them

Clarity is explaining Advance Directives

Today's learning was a great presentation that has enhance my skills to be applied

Recommend preplanning documents and open conversations

How to ensure Case management can meet with pt to get either an AD or assign a proxy.

I understand much better regarding proxy and advanced directive and can understand when proxy is mentioned.

Insert a discussion of advanced directives with everyone including family & coworkers when applicable; esp to those in caregiver roles.

Confirmation of importance of living will

N/A

Better understanding of end of life legal issues.

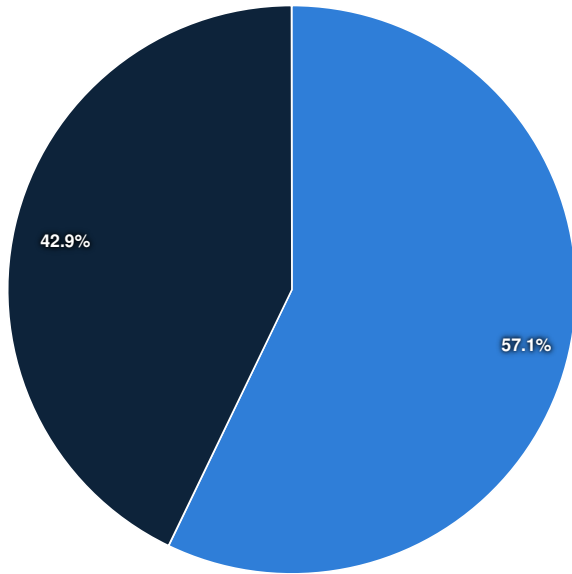
Increased understanding of healthcare proxy and the legality

I learned about healthcare proxy which is important for general information and in my role.

N/A

Clarity for the need for a new HC Proxy for each admission vs no expiration for Advanced Directives, the hierarchy of legal next of kin /acceptable eligible designees. Features & Differences between Florida Health Care Proxy where the Designee may not know of the Patient's preferences, whereas it is recommended that the Surrogate have discussion with the Patient ahead of time. Florida Statute 765.204 & Baptist Hospital's form regarding Capacity. The advantage of having Forms & Alerts for Nursing &/or Administration linked via the EMR The Cases were illustrative.

If you do not plan to implement any new skills/strategies in your clinical practice, what is keeping you from doing so?



Result details

Left Blank	24
User entered value	18
Average submission length in words (ex blanks)	3.72
Nothing keeping me from applying lessons learned within my practice	
NA	
NA	
None	
Don't work with pts.	
n/a	
N/A	
Don't usually deal with these issues	
not applicable	
n/a	
N/A	
none	
none	
I plan to use when speaking with family members	

I plan to use when speaking with family members.

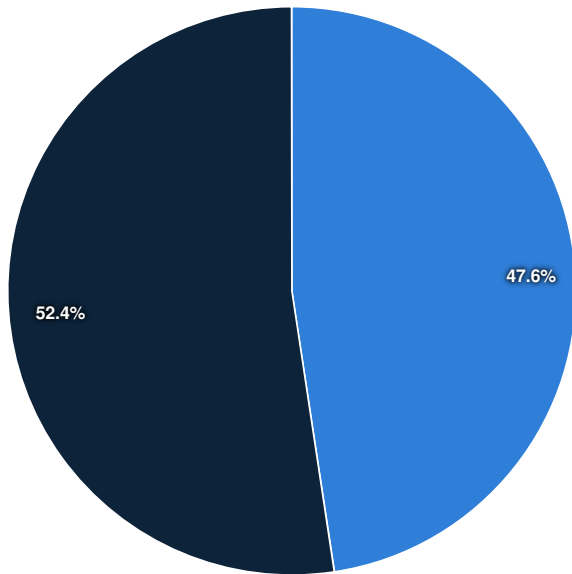
N/A

The information is helpful with my focus in Patient Experience and patient and family centered care.

N/A

Not Applicable

Please provide any additional comments or suggestions.



Result details

Left Blank	20
User entered value	22
Average submission length in words (ex blanks)	8.68
Great presentation.	
NA	
It would be great to have a copy of the PowerPoint presentation for future reference.	
Speaker was very knowledgeable.	
Great material provided	
n/a	
Nothing	
Excellent fund of knowledge	
how about an ethical approach to taking care of patients from the LGBTQ community	
n/a	
Very informative	
Outstanding topic and much needed.	
I would very much like for the presentation to be repeated for MCI Clinical Genetics or have a copy of the excellent slides sent and we can review on our own. Thanks. Rae	
none, very informative	
Nice overview. Only opportunity would be further discussion on steps to take when unable to resolve conflict between HCS v. pt. wishes despite ethics consult.	

None at this time

Speaker and lecture was great! It clarified a lot of information.

Very good presentation

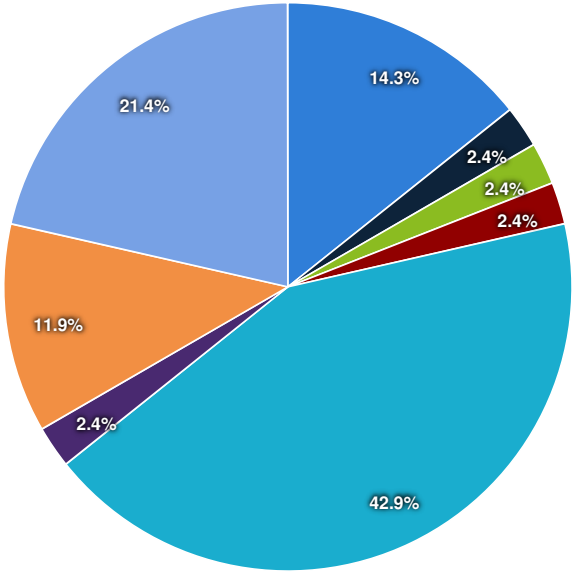
Idalis did a thorough job with this topic. It generated a robust discussion and was very well done. Any questions I had were answered. I appreciated the handout. Thank you.

N/A

I would like to see this course offered again. Its important information for all. thank you.

How do we download the slides from the presentation?

Please select one:



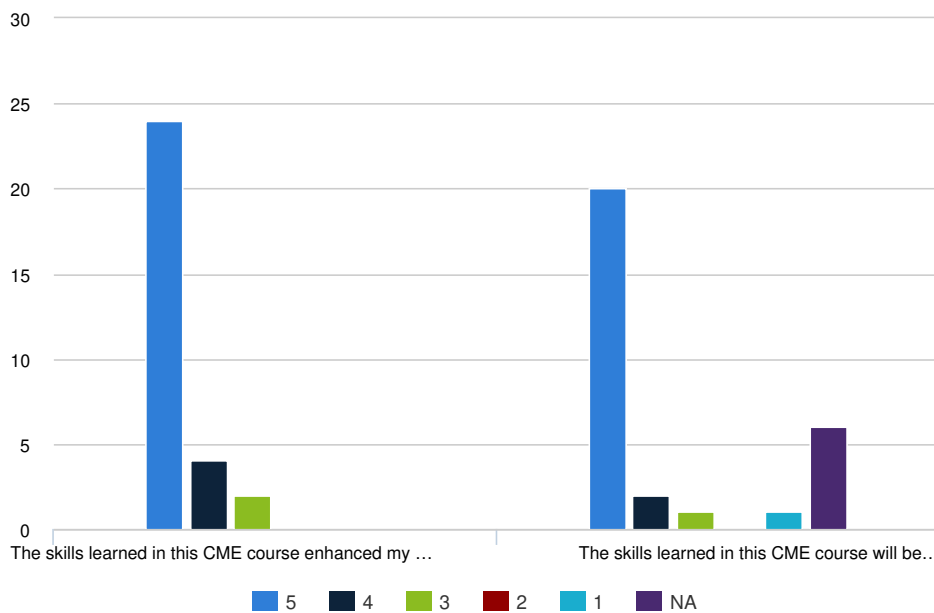
Result details

M.D., D.O.	6
Ph.D.	1
DPM	1
ARNP	1
R.N.	18
Pharmacist	1
SW/MFT/MHC	5
Other...	9 (view)

Conversations in Ethics Evaluation - August 11, 2021

This page shows analysis of submitted data, such as the number of submissions per component value, calculations, and averages. Additional components may be added under the "Add analysis components" fieldset.

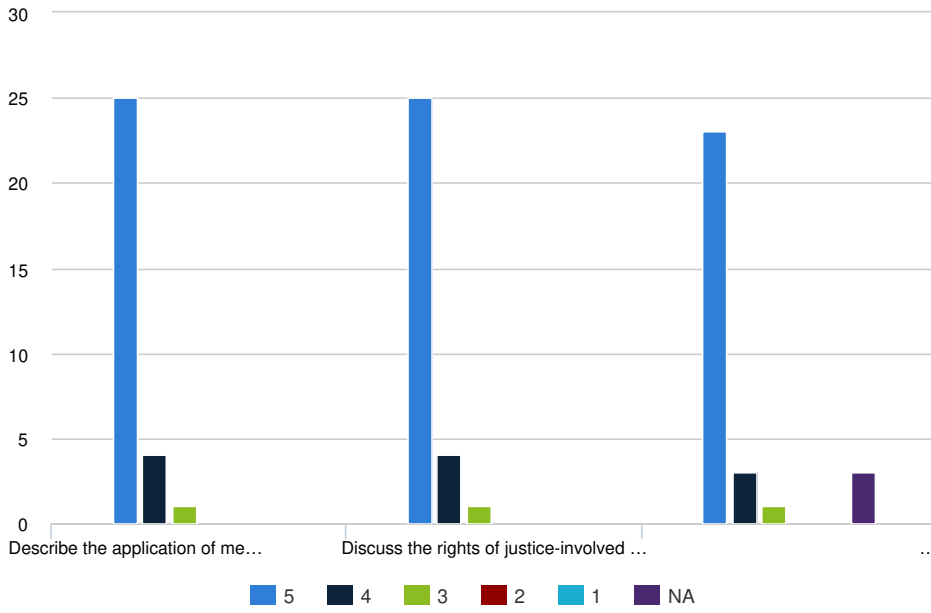
Please score your agreement with or assessment of the following questions and statements by rating on a scale of 1 to 5, with 5 representing the highest level of satisfaction or agreement.



Result details

	5	4	3	2	1	NA
The skills learned in this CME course enhanced my professional competence.	24	4	2	0	0	0
The skills learned in this CME course will be applied in the treatment of my patients.	20	2	1	0	1	6

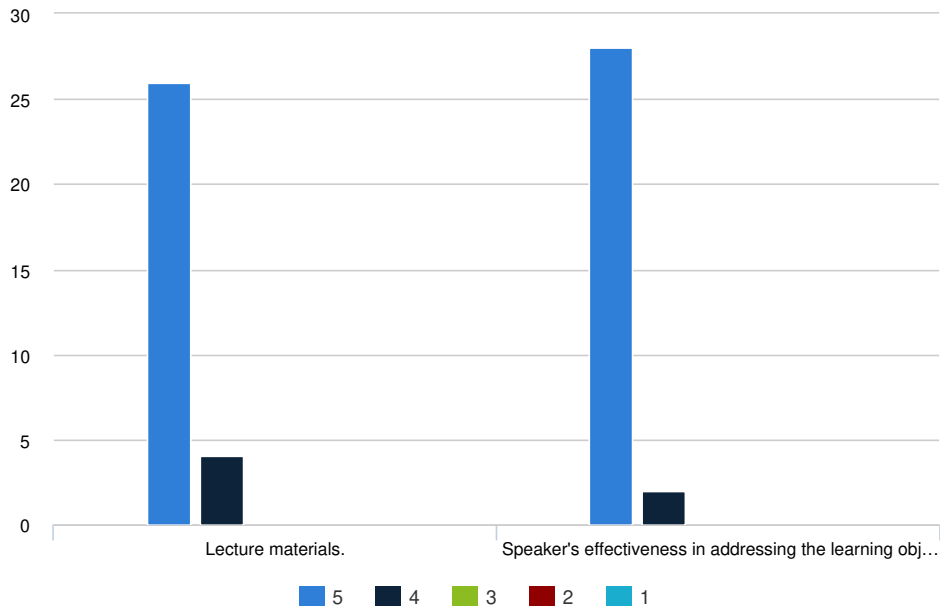
As a result of attending this conference, to what extent do you agree that you will be better able to: (rate the objectives)



Result details

	5	4	3	2	1	NA
Describe the application of medical ethics in jails and prisons.	25	4	1	0	0	0
Discuss the rights of justice-involved patients in medical and surrogate decision making.	25	4	1	0	0	0
Utilize evidence-based and legally supported guidelines for the care of incarcerated individuals in the acute care setting.	23	3	1	0	0	3

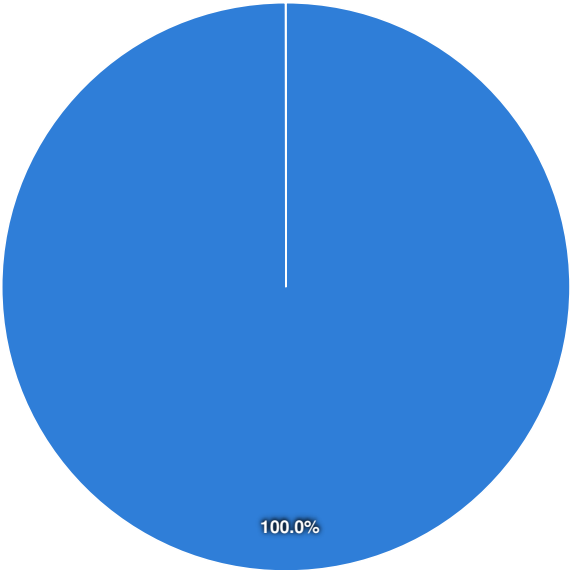
How satisfied or dissatisfied were you with the following conference content?



Result details

	5	4	3	2	1
Lecture materials.	26	4	0	0	0
Speaker's effectiveness in addressing the learning objectives.	28	2	0	0	0

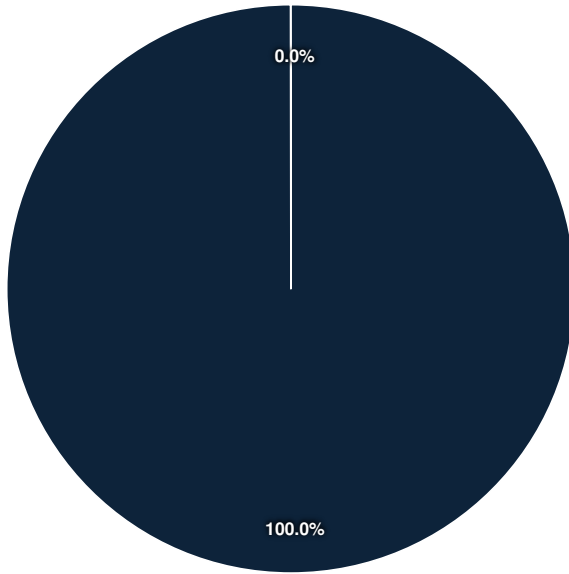
Was this course fair, balanced and without commercial bias?



Result details

Yes	30
-----	----

What, if any, new skills/strategies will you apply in your clinical practice?



Result details

Left Blank	0
User entered value	30
Average submission length in words (ex blanks)	13.57
N/a	
N/a	
applying ALL basic medical ethics principles to incarcerated individuals re: health needs	
Share this information with my Security staff.	
n/a	
Be sure to encourage discussion with prison physician to ascertain patient's previously expressed wishes when pt. lacks capacity.	
.	
N/A	
To not judge the person for being a prisoner, but rather see them as a human that still deserves the same care as anyone else.	
Right of prisoners more clear. Be less apprehensive when involved in the care of a human being in correctional facility.	
All new information for me	
I learned more about patients we receive from prisons and jail.	
Workshop was a good review	
Change the way I refer to these patients. Try not to enquire about reason why they are incarcerated.	
Complexity of knowing a prisoners patient rights	
Learned inmates rights when it comes to self determination	
Not applicable as I do not work in acute care currently. I attended the course for general knowledge about the ethics of treating patients from jails and prisons.	
I will begin to work in the Women's Recovery pod in the Sarasota jail at end of this month twice a month.	
Prisoner's rights.	
Patient education	

While I'm not a clinician, knowledge of how justice-involved patients are treated in the clinical care setting and the regulations/laws that apply will be helpful in applying ethical standards to research studies involving this population.

Did not realize these clients cannot be baker acted.

I don't work with patients at this time

increased knowledge

Communication across Departments, CBOs & Medical Centers are even more important, as care can be Interrupted, or kinks in coordination can jeopardize health with return of the Person to ER or back to penal institution. Note this was one of the topics of a session at the 2021 HIMSS Conference that I attended Virtually this week. Some of the local RIGHOs in NY have connected secure EMR access to prison & jails, and local public hospitals &or private Medical Centers to help expedite hand offs.

An excellent presentation was provided, especially during question responses. This updated information is very relevant to addressing psychiatric and physical needs.

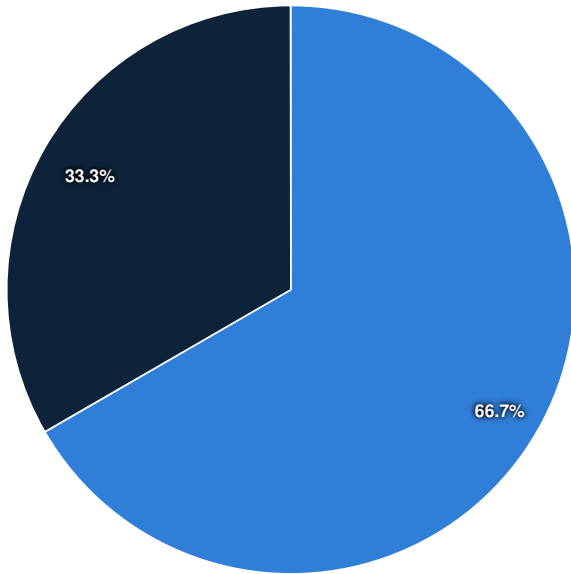
x

We often have patients in the ER in need of medical clearance for the jail. I now understand what rights in custody patients have and how they should be treated.

N/A

better understanding of how to care for patients who are in the custody of the justice department

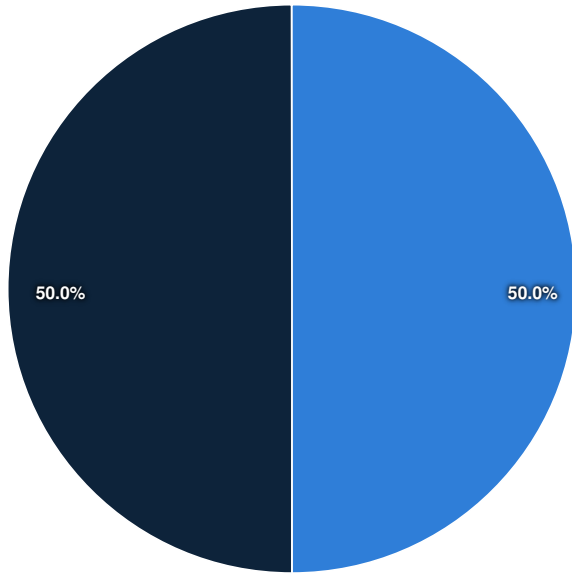
If you do not plan to implement any new skills/strategies in your clinical practice, what is keeping you from doing so?



Result details

Left Blank	20
User entered value	10
Average submission length in words (ex blanks)	3.30
N/a	
N/a	
retired- but can refer to this for teaching purposes	
n/a	
N/A	
none	
I don't see too many patients of this type	
N/a	
N/A	
x	

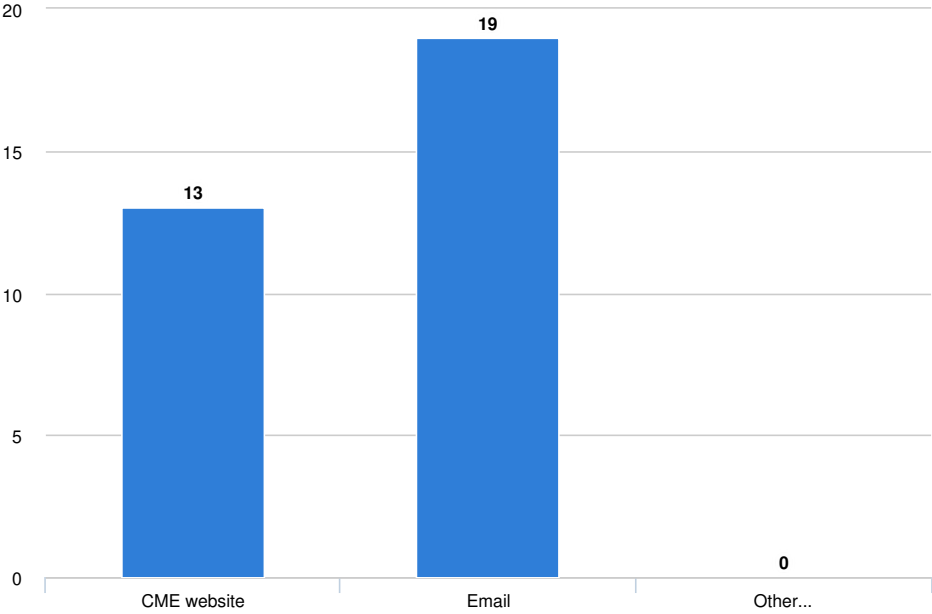
Please provide any additional comments or suggestions.



Result details

Left Blank	15
User entered value	15
Average submission length in words (ex blanks)	8.60
N/a	
N/a	
clear and understandable messages	
Wonderful to witness the level of caring and respect by the various prison HC providers.	
N/A	
Excellent topic	
Great presentation	
Very well presented.	
Excellent discussion	
None	
Excellent presentation by very knowledgeable physicians, as they are in the trenches and truly understand the issues. I took this course because my nephew is in prison for drug charges and I wanted to become more familiar with his rights. Thank you.	
Excellent presentation!	
Great presentation; would have liked to hear more about addressing the needs of this patient population and ways in which the community healthcare systems and the prison healthcare system can improve communication as briefly addressed by Dr. Hernandez.	
Its great that this is archived	
Very good material, well-discussed and presented	

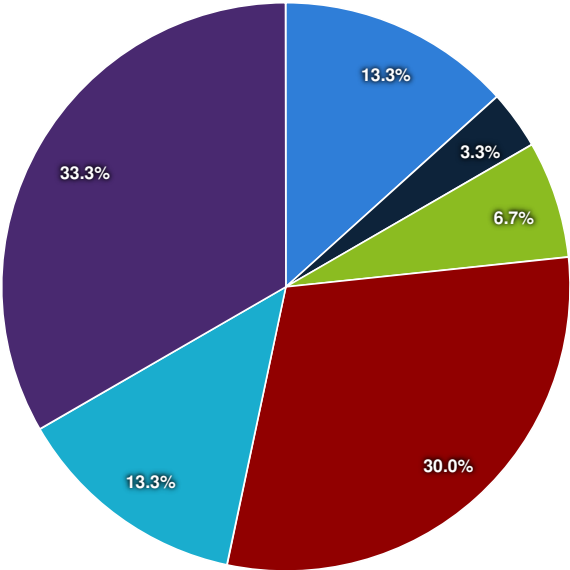
How did you hear about this course?



Result details

CME website	13
Email	19
Other...	0

Please select one:



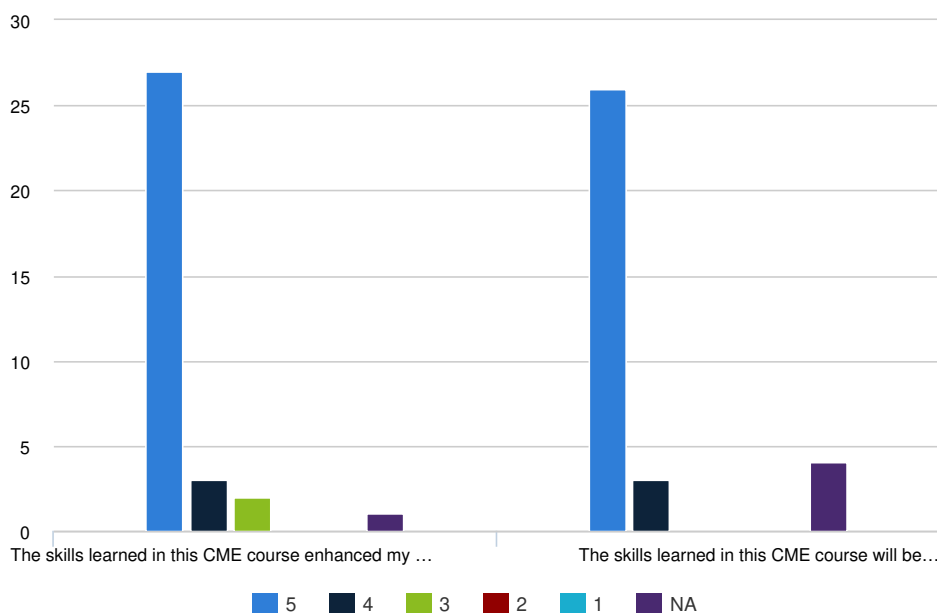
Result details

M.D., D.O.	4
Ph.D.	1
ARNP	2
R.N.	9
SW/MFT/MHC	4
Other...	10 (view)

MCVI Vascular and Endovascular Lecture Series Evaluation - August 31, 2021

This page shows analysis of submitted data, such as the number of submissions per component value, calculations, and averages. Additional components may be added under the "Add analysis components" fieldset.

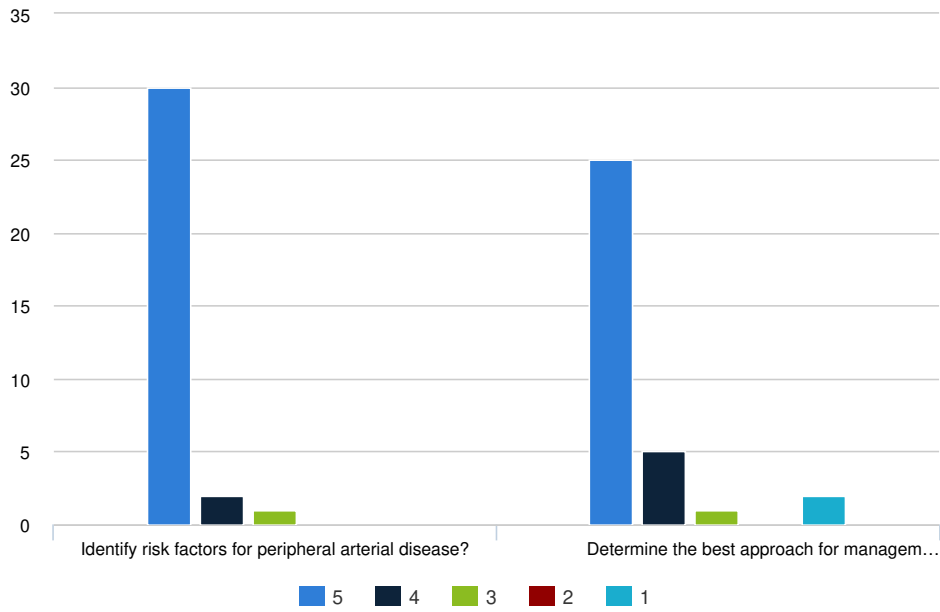
Please score your agreement with or assessment of the following questions and statements by rating on a scale of 1 to 5, with 5 representing the highest level of satisfaction or agreement.



Result
details

	5	4	3	2	1	NA
The skills learned in this CME course enhanced my professional competence.	27	3	2	0	0	1
The skills learned in this CME course will be applied in the treatment of my patients	26	3	0	0	0	4

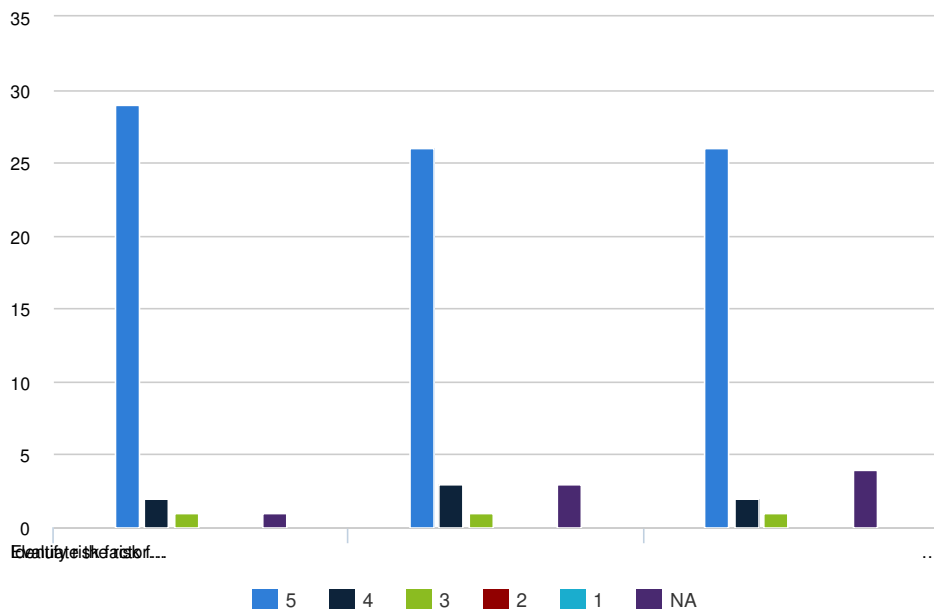
How confident are you in your ability to:



Result details

	5	4	3	2	1
Identify risk factors for peripheral arterial disease?	30	2	1	0	0
Determine the best approach for management of patients with critical limb ischemia?	25	5	1	0	2

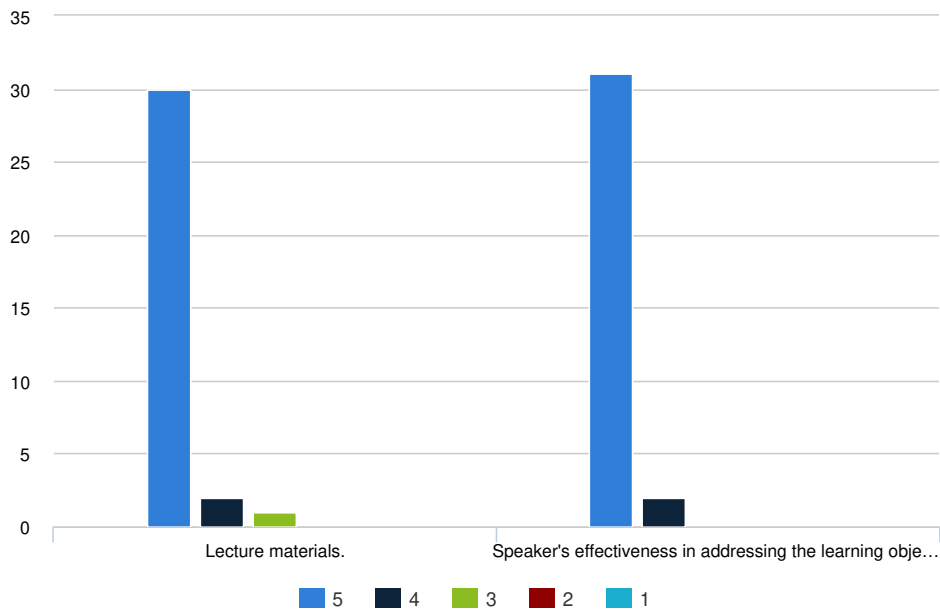
As a result of attending this course, to what extent do you agree that you will be better able to:



Result details

	5	4	3	2	1	NA
Identify risk factors for peripheral artery disease and chronic limb-threatening ischemia.	29	2	1	0	0	1
Evaluate the risk factors and clinical presentation of patients with chronic limb-threatening ischemia to determine the best approach for management and treatment.	26	3	1	0	0	3
Utilize evidence-based guidelines to appropriately manage patients, pre- and post-treatment for chronic limb-threatening ischemia.	26	2	1	0	0	4

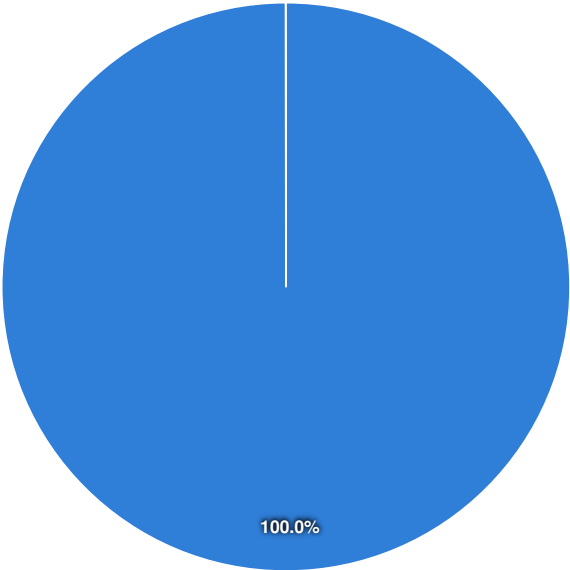
How satisfied or dissatisfied were you with the following conference content?



Result details

	5	4	3	2	1
Lecture materials.	30	2	1	0	0
Speaker's effectiveness in addressing the learning objectives	31	2	0	0	0

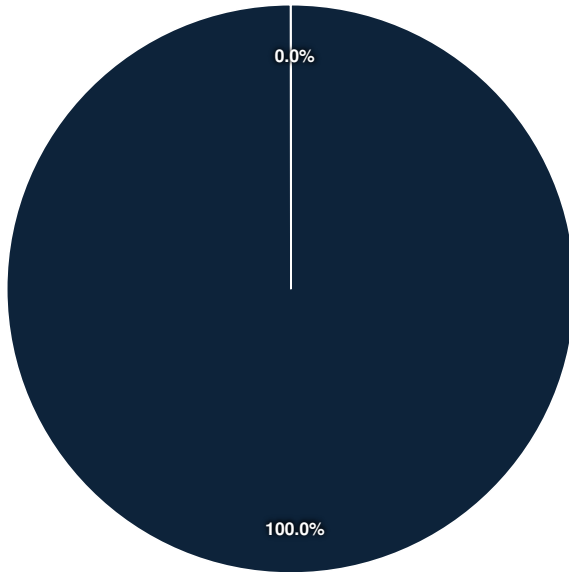
Was this course fair, balanced and without commercial bias?



Result details

Yes	33
-----	----

What, if any, new skills/strategies will you apply in your clinical practice?



Result details

Left Blank	0
User entered value	33
Average submission length in words (ex blanks)	5.67
Urgent referrals to vascular service	
Terapia mixta de manejo endovascular y farmacéutico	
-	
N/A	
N/A	
New techniques for CLI	
Earlier identification of patients at risk	
Patient evaluation	
N/A	
N/a	
N/A	
More detailed in patients with significant risk factor profile	
Take more ABI's	
yes	
team management approach after identifying and diagnosing.	
closer observation and early identification	
N/A	
More aggressive approach towards chronic limb threatening ischemia and probably a more conservative approach towards claudication.	
Better evaluation	
Interpreting PVRs and comparing imaging to clinical symptoms/ physical exam.	
Better patient evaluation	
able to teach this to medical students. 1) Untreated severe CLI leads to early mortality. 2) Risk legs are	

able to teach this to medical students_ 1) Untreated severe CLI leads to early mortality 2) Sick legs are rarely attached to healthy individuals

Increase patient and colleague education

I work with cardiac patients on a regular basis and the knowledge presented will be very helpful to education of myself and my patients

Refer more often to vascular specialist especially diabetics

Better appreciation of Treating peripheral vascular disease.

application of new data from Voyager Trial. more use of retrograde pedal access

All I've learned.

All of them

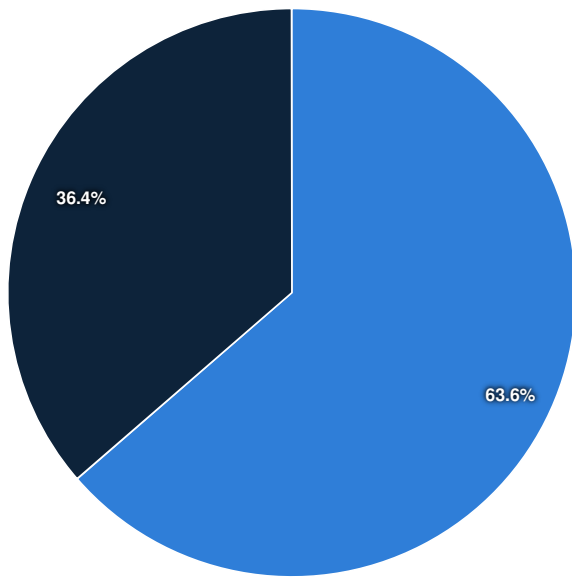
Will order more abis

N/A

n/a

None

If you do not plan to implement any new skills/strategies in your clinical practice, what is keeping you from doing so?

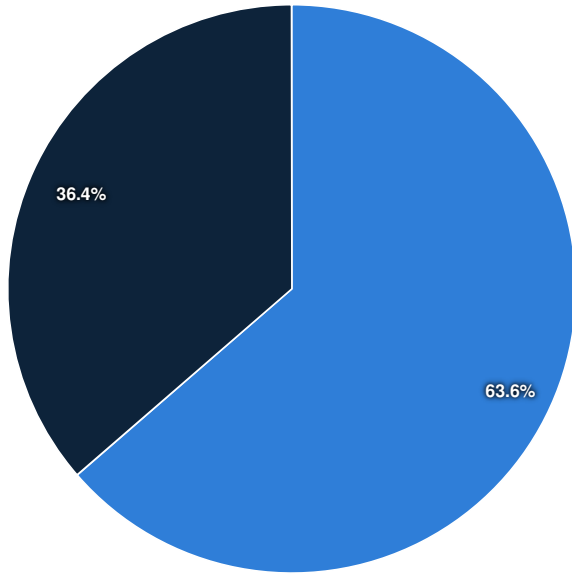


Result details

Left Blank	21
User entered value	12
Average submission length in words (ex blanks)	4.00
NA	
N/a	
NA	
NA	
N/A	
none	
N/A	
retired. Just teaching	
N/a	
Will use the valuable information	
Na	

I am retired but I keep active my medical license and the knowledge acquired helps me to stay updated in medical science. All information was very helpful.

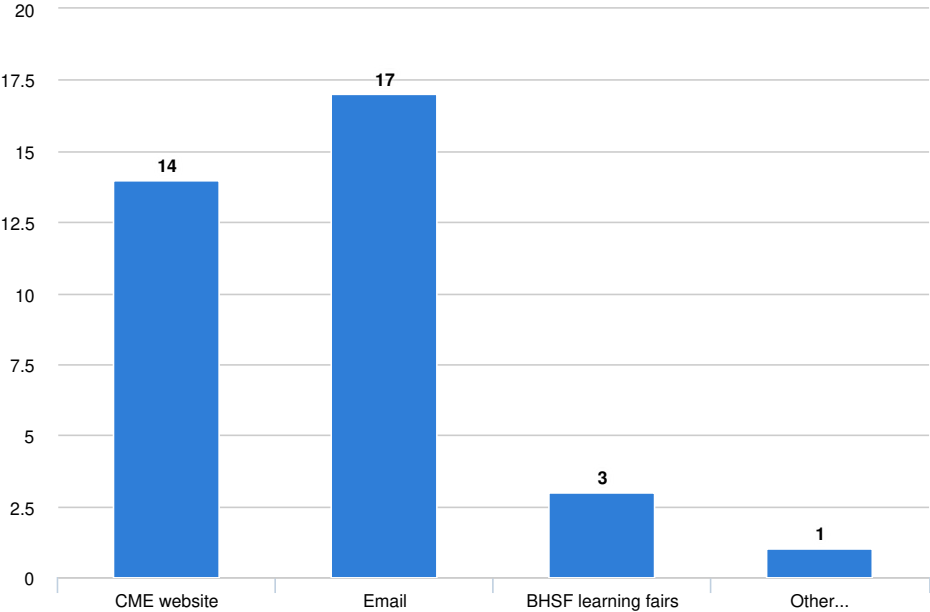
Please provide any additional comments or suggestions.



Result details

Left Blank	21
User entered value	12
Average submission length in words (ex blanks)	6.58
Excelente curso me gustaría dudaré un poco más y más datos sobre el manejo	
N/a	
More visual aids	
NA	
goid	
Highly informative.	
none	
excellent, compact presentation. I am looking forward to further presentations	
None	
good lecture, really enjoy this series	
would have liked to see a more indepth discussion about treatment strategies and options, including use of more advanced technologies.	
I greatly thank the professionals of the Miami Cardiac & Vascular Institute, for their excellent presentation.	

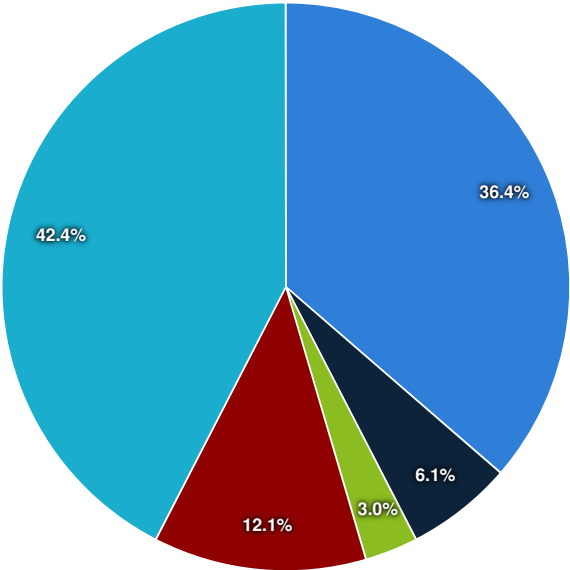
How did you hear about this course?



Result details

CME website	14
Email	17
BHSF learning fairs	3
Other...	1 (view)

Please select one:



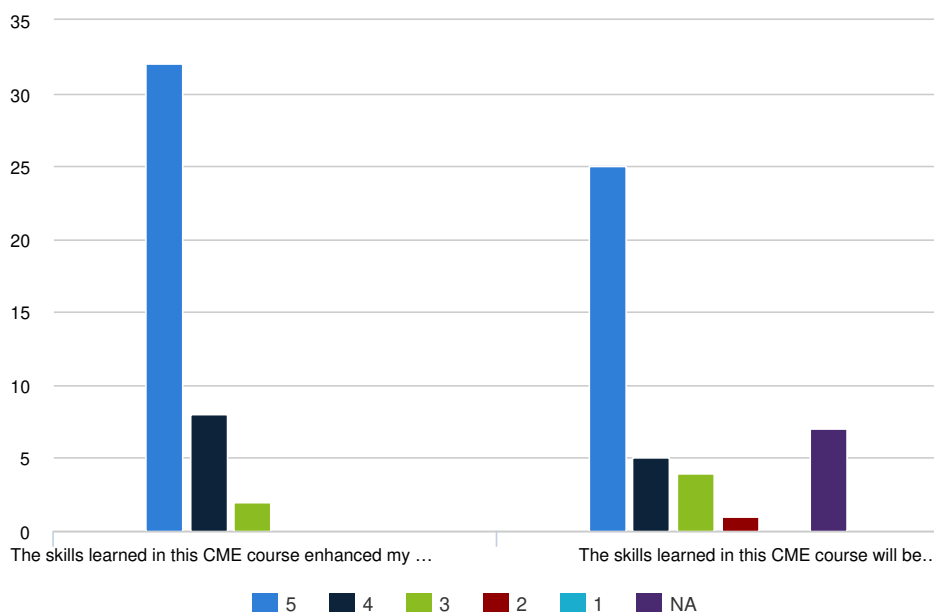
Result details

M.D., D.O.	12
ARNP/PA-C	2
R.N.	1
Occupational Therapist	4
Other...	14 (view)

Miami Cancer Institute – Multispecialty Grand Rounds Evaluation - September 13, 2021

This page shows analysis of submitted data, such as the number of submissions per component value, calculations, and averages. Additional components may be added under the "Add analysis components" fieldset.

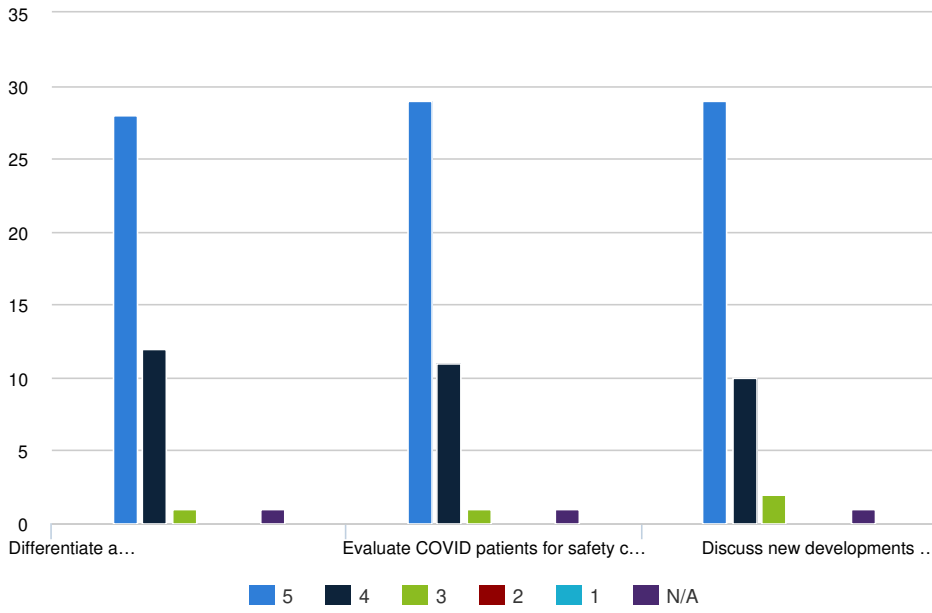
Please score your agreement with or assessment of the following questions and statements by rating on a scale of 1 to 5, with 5 representing the highest level of satisfaction or agreement.



Result details

	5	4	3	2	1	NA
The skills learned in this CME course enhanced my professional competence.	32	8	2	0	0	0
The skills learned in this CME course will be applied in the treatment of my patients	25	5	4	1	0	7

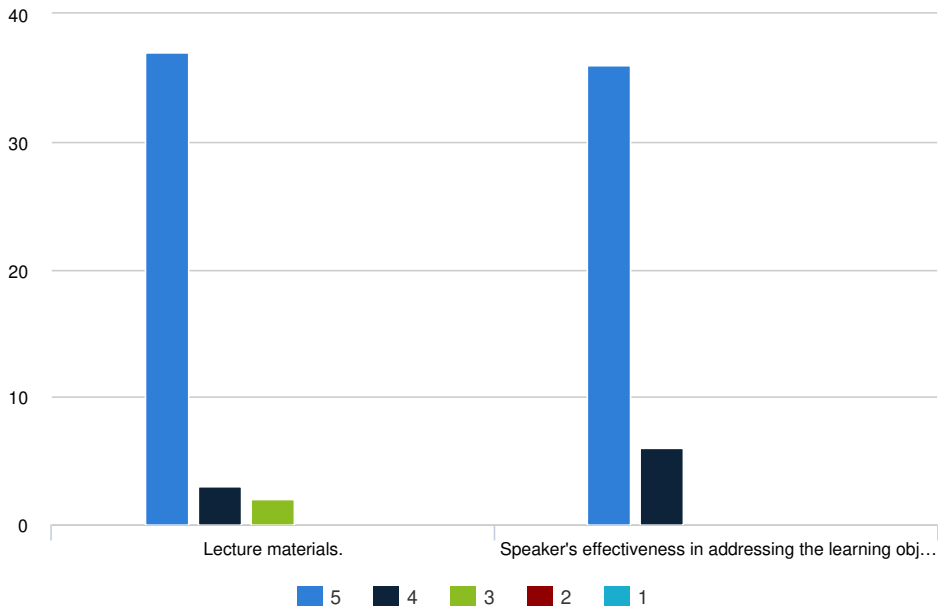
As a result of attending this conference, to what extent do you agree that you will be better able to: (rate the objectives)



Result details

	5	4	3	2	1	N/A
Differentiate appropriateness of various COVID therapies between different patient populations.	28	12	1	0	0	1
Evaluate COVID patients for safety concerns related to COVID therapies.	29	11	1	0	0	1
Discuss new developments with COVID-19 therapeutics.	29	10	2	0	0	1

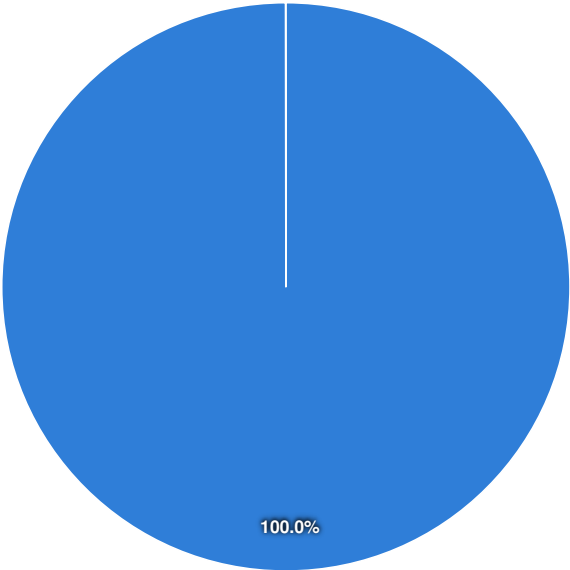
How satisfied or dissatisfied were you with the following conference content?



Result details

	5	4	3	2	1
Lecture materials.	37	3	2	0	0
Speaker's effectiveness in addressing the learning objectives.	36	6	0	0	0

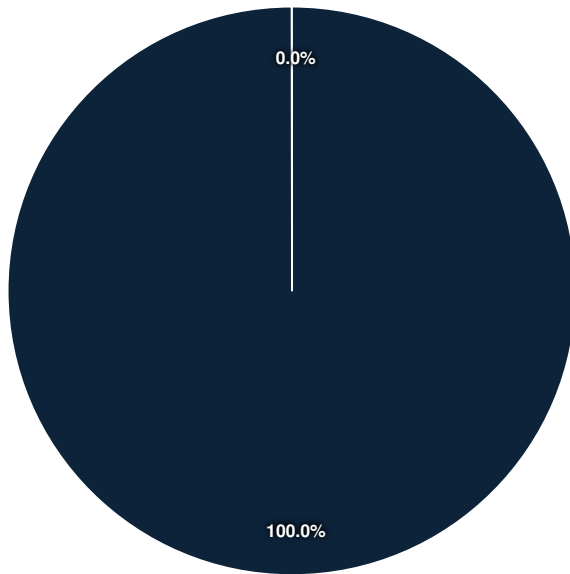
Was this course fair, balanced and without commercial bias?



Result details

Yes	42
-----	----

What, if any, new skills/strategies will you apply in your clinical practice?



Result details

Left Blank	0
User entered value	42
Average submission length in words (ex blanks)	6.50
dont use ivermectin for covid:)	
better understand current Covid treatments	
Na	
It was helpful to learn where updated information can be accessed.	
N/A	
differentiate moderate frpm severe and treatment	
differentiate moderate from severe and how to treat	
Which monoclonal antibodies are preferred for treatment.	
.	
Covid-19 counseling	
-	
Early detection and Assesment and treatment	
None	
No aplicar medicamentos como tratamiento empírico para el COVID sin estudios previos qué avalen su uso mediante estudios de campo de bioseguridad certificados	
current information stated will be incorporated into patient discussions.	
Better understanding	
X	
n/a	
Understanding various therapies	
N/A- retired. However, I teach at FIU Herbert Wertheim College of Medicine and this information helps me inform my students.	
Very helpful to learn about new treatments (including those that the public is seeking)	

Limited given my role at MCI

Education about the different therapies

None. I knew this from before.

The appropriate use of steroids when dealing with Covid patients

appropriate referral for monoclonal ab treatment

I received a greatly enhanced understanding of appropriate uses of different products currently being used to treat our COVID patients

Appropriate covid treatment

Learned a lot

Learned a lot

None

N/A

No direct patient care. I was more interested for personal knowledge.

dealing with my patients with COVID

Very good summary of variants up to date

Following MD orders

Able to relay the latest information to patients when asked about treatment modalities/vaccination updates

keep on encouraging our patient to get the vaccine

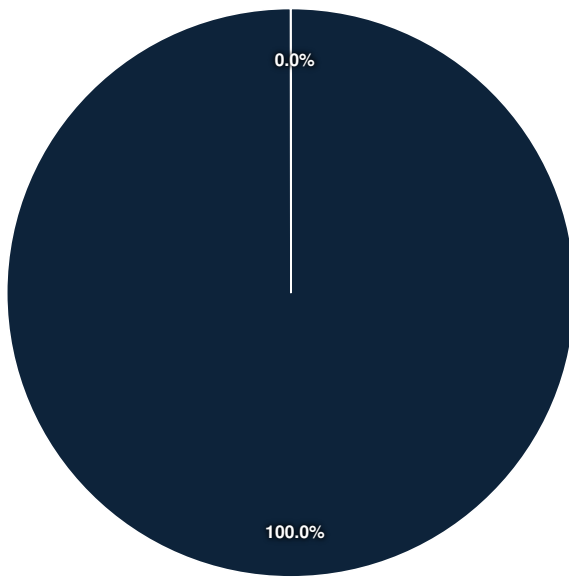
Will be in a better position to counsel patients on recommended treatments

NA

will use monoclonal antibody

Covid recs- the most concise presentation I have watched

If you do not plan to implement any new skills/strategies in your clinical practice, what is keeping you from doing so?



Result details

Left Blank	0
User entered value	42
Average submission length in words (ex blanks)	3.64
n/a	
nothing	
Na	
Nothing is.	
N/A	
n/a	
n/a	
N/A	
.	
N/a	
-	
I have no obstacles to apply this practices	
Nothing specific	
Nada me impide hacerlo, pretendo seguir implementando todos los conocimientos que vaya adquiriendo en mi práctica clínica diaria.	
i will implement changes into the practice and continue to participate in the Baptist webinars.	
NA	
X	
n/a	
N/A	
N/A--retired	
I do not see patients	

N/A

None

I am already implementing this .

Nil

no

I do not work in a clinical area...Enhanced my knowledge to better understand current practice and appropriateness.

N/a

Learned a lot

Learned a lot

I don't treat COVID patients in inpatient or outpatient setting

N/A

N/A

nothing

Will keep eye on data

Not providing bedside care

N/A

none

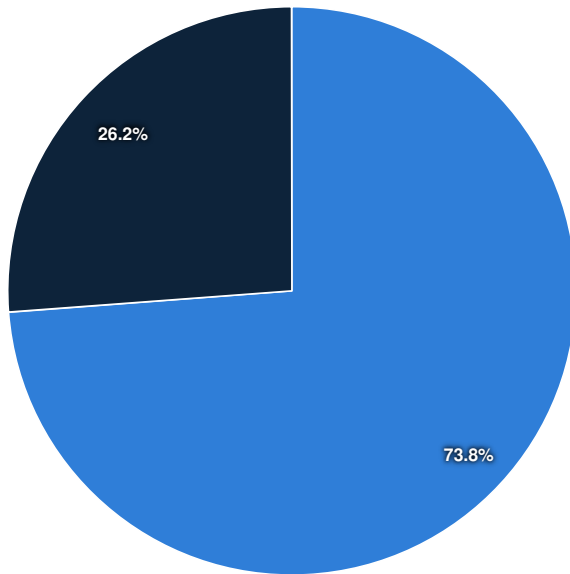
I do not treat COVID patients directly.

NA

i am planning to implement

N/a

Please provide any additional comments or suggestions.



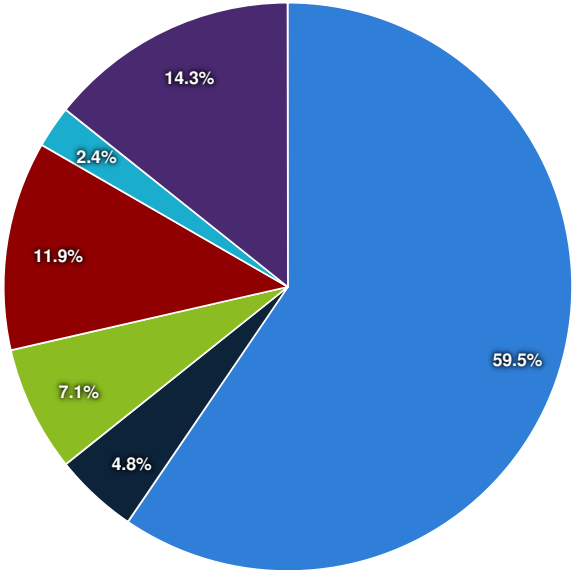
Result details

Left Blank	31
User entered value	11
Average submission length in words (ex blanks)	12.00
need the presentation slides	
need the presentation please	
Speaker did an excellent job of collating a lot of data in a concise and easy to follow presentation.	
Sería bueno implementar una lista completa de medicamentos y los hallazgos nocivos reportados en el tratamiento del COVID	
Satisfied with the level of information and organization of the webinar.	
Excellent speaker. I had never heard his presentations before, but now I greatly appreciate his knowledge and ability to communicate his knowledge.	
talk slower	
Speaker was incredibly knowledgeable but spoke too fast to let information sink in before on to next topic.	
future lecture on ppe and what is happening to our staff At MCI I see superspreading during holidays in our numbers Also is regeneron available as preventative for household exposed.	
Great presentation	

Great presentation

NA

Please select one:



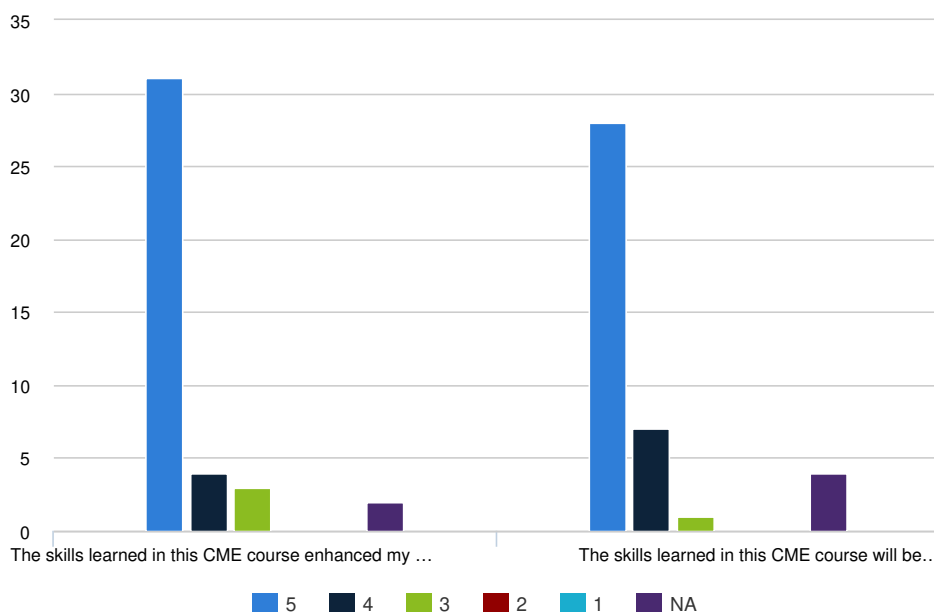
Result details

M.D., D.O.	25
Ph.D/Psy.D	2
ARNP/PA-C	3
R.N.	5
Social Worker	1
Other...	6 (view)

Echocardiography and Noninvasive Vascular Testing Lecture Series: September 22, 2021

This page shows analysis of submitted data, such as the number of submissions per component value, calculations, and averages. Additional components may be added under the "Add analysis components" fieldset.

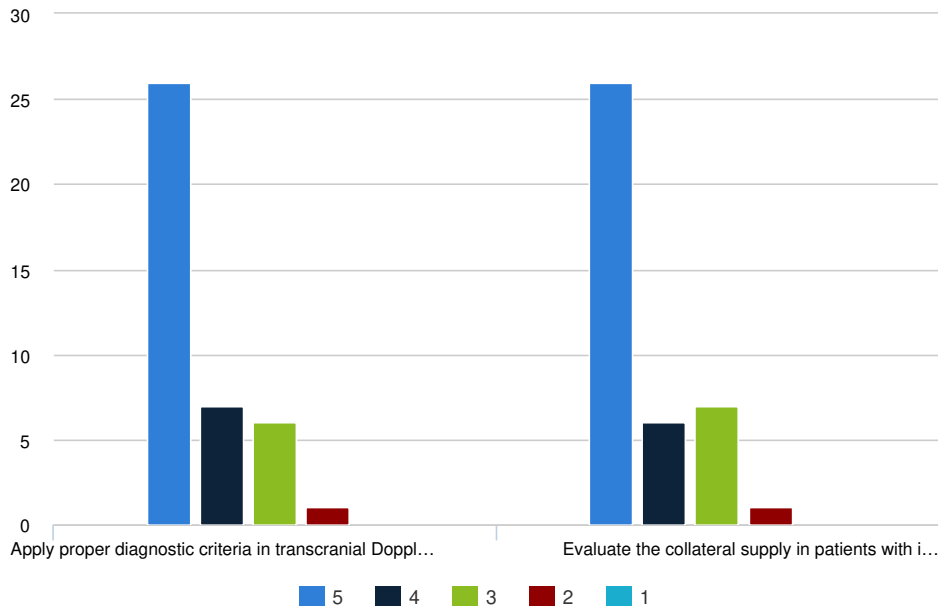
Please score your agreement with or assessment of the following questions and statements by rating on a scale of 1 to 5, with 5 representing the highest level of satisfaction or agreement.



Result
 details

	5	4	3	2	1	NA
The skills learned in this CME course enhanced my professional competence.	31	4	3	0	0	2
The skills learned in this CME course will be applied in the treatment of my patients	28	7	1	0	0	4

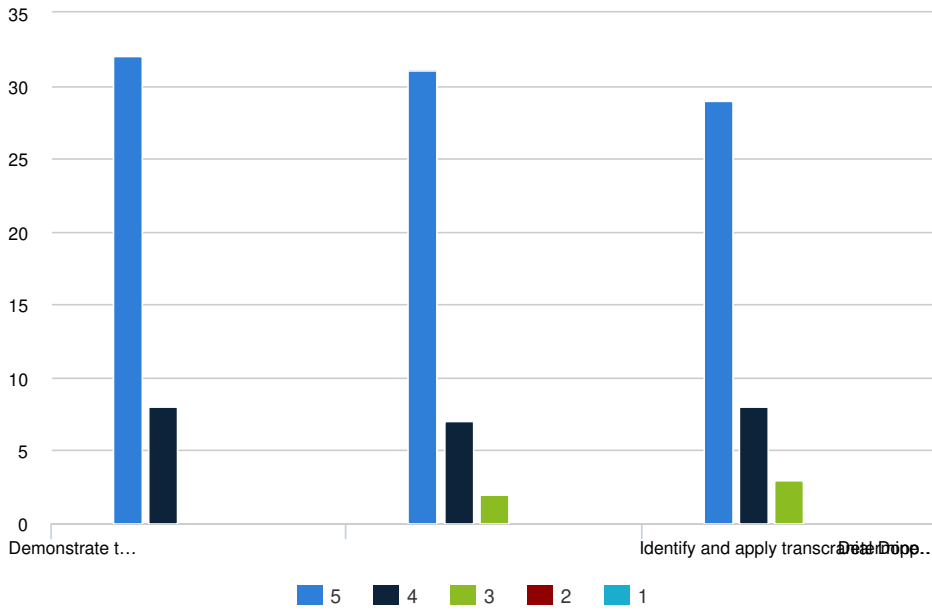
How confident are you in your ability to:



Result details

	5	4	3	2	1
Apply proper diagnostic criteria in transcranial Doppler imaging applications?	26	7	6	1	0
Evaluate the collateral supply in patients with internal carotid artery occlusions?	26	6	7	1	0

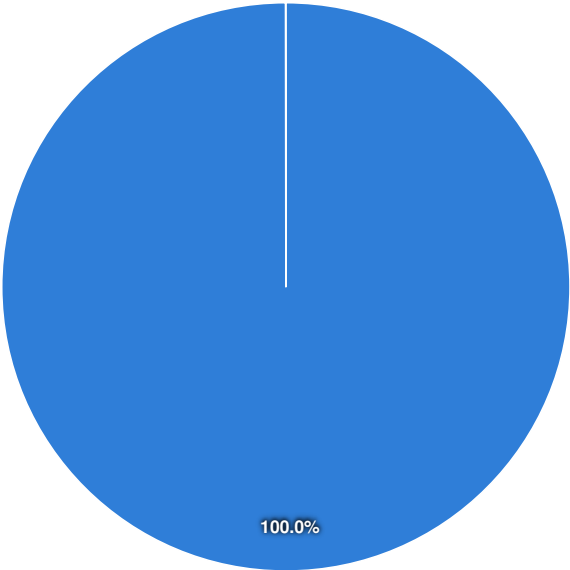
How satisfied or dissatisfied were you with the Speaker's effectiveness in addressing the learning objectives?



Result details

	5	4	3	2	1
Demonstrate the acoustic windows and protocol components of transcranial Doppler imaging.	32	8	0	0	0
Identify and apply transcranial Doppler imaging in the diagnosis of differential diagnostic and pathological conditions.	31	7	2	0	0
Determine the diagnostic criteria used in different transcranial Doppler imaging applications.	29	8	3	0	0

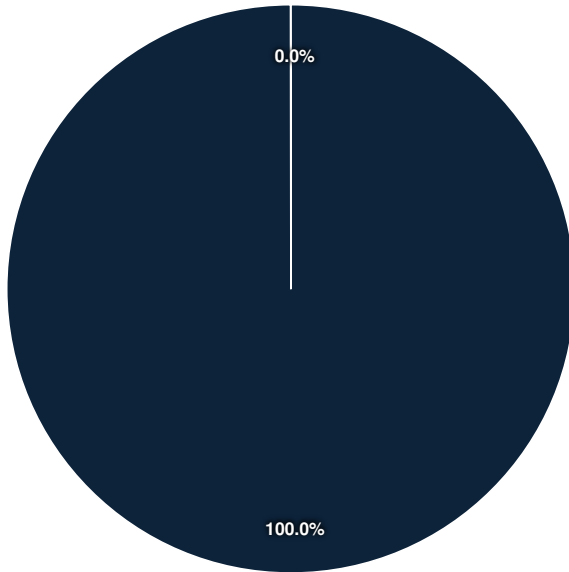
Was this course fair, balanced and without commercial bias?



Result details

Yes	40
-----	----

What, if any, new skills/strategies will you apply in your clinical practice?



Result details

Left Blank	0
User entered value	39
Average submission length in words (ex blanks)	5.00
-	
N/A	
Thanks,	
I will order it for shunt evaluation.	
Great course, yes	
All of the course information are applicable	
Refer to specialist.	
NA	
technique and patience	
no additional one	
create protocol	
N/A	
Expanded my understanding of capabilities, techniques and indications for TCD usage	
All of the above	
Taught me the advantages of using the technique	
Trans cranial ultrasound	
Tcd	
Tcd	
When I read transcranial dopplers I will be able to use Velocity and Pulsatility parameters shown during the presentation.	
All	
Will use diagnostically	
Yes transcranial Doppler evaluation of shunt	

yes transcranial Doppler evaluation of shunt

None, we don't perform these at all in house

NA

n/a

yes

This course has demonstrated there is further investigation of intracranial disease far more than carotid imaging.

n/a

retired Ortho; for general knowledge

This course improved my understanding of imaging options and especially through the case studies their application.

N/A

N/A

as a nurse I just attended to add to my knowledge even though it does not apply to my current position.

will know how this technique is ordered/used clinically

all

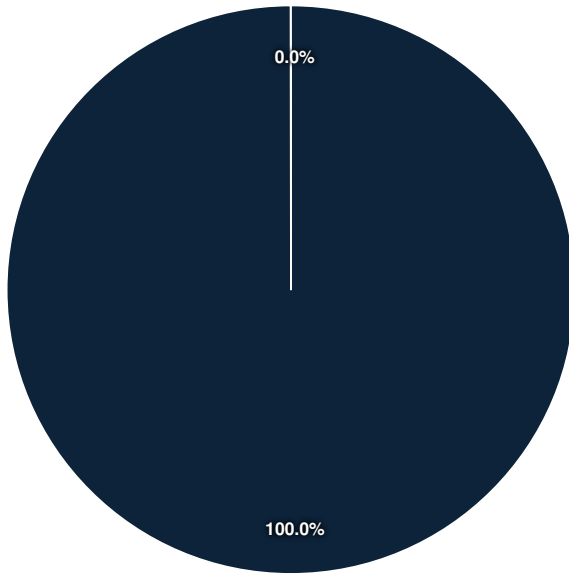
no

I apply all of them

TCD protocols

An additional option for right to left shunting

If you do not plan to implement any new skills/strategies in your clinical practice, what is keeping you from doing so?



Result details

Left Blank	0
User entered value	39
Average submission length in words (ex blanks)	4.13
-	
N/A	
I will	
N/A	
Yes	
No implementation, just reinforcement	
N?A	
NA	
none at all	
we already implement the skills discussed	
lack of readers	
N/A	
I don't perform or interpret TCDs. I do have a better understanding of what this test is used for which will improve my clinical skills.	
My subspecialty	
More frequent consideration of the test in appropriate patients	
I plan	
Hfjdd	
Hfjdd	
Not applicable	
Already apply skills	
Do not perform trans cranial in office	

N/A

Answered above

NA

n/a

NA

We don't do these studies in our department.

n/a

not seeing patients with this clinical problem

There are no barriers .

Retired

Retired

does not apply to my current practice, but I feel it is always stimulating to learn what new techniques are happening in medicine

n/a

na

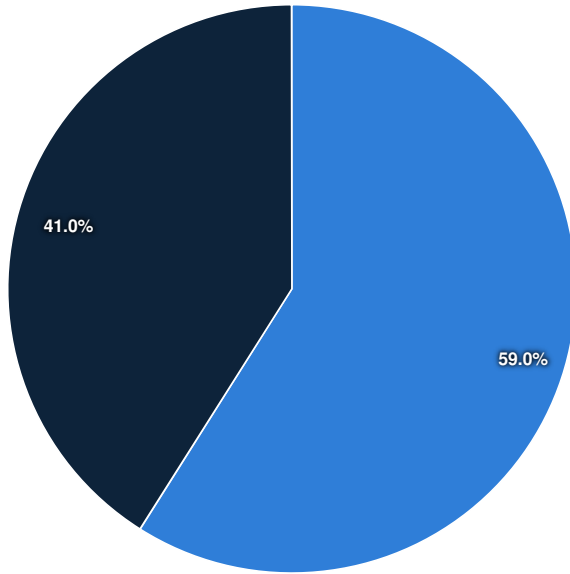
retired clinical

Nothing

I am going to try to implement the new skills ,with every patient.

I do plan on using this option

Please provide any additional comments or suggestions.



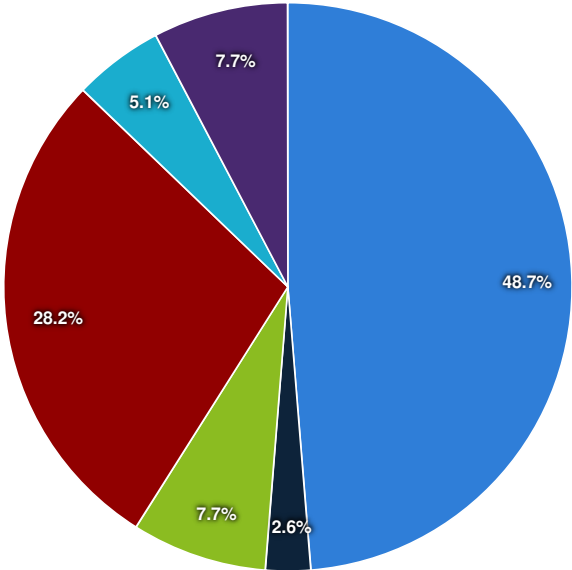
Result details

Left Blank	23
User entered value	16
Average submission length in words (ex blanks)	2.38
N/A	
Great course	
NA	
thanks	
None	
Excellent course	
Excellent presentation	
Great job	
All good	
Enjoyed the presentation	
na	
Thank you	
it was professionally done	
na	

none

This was a very presentation of the contribution for transcranial doppler

Please select one:



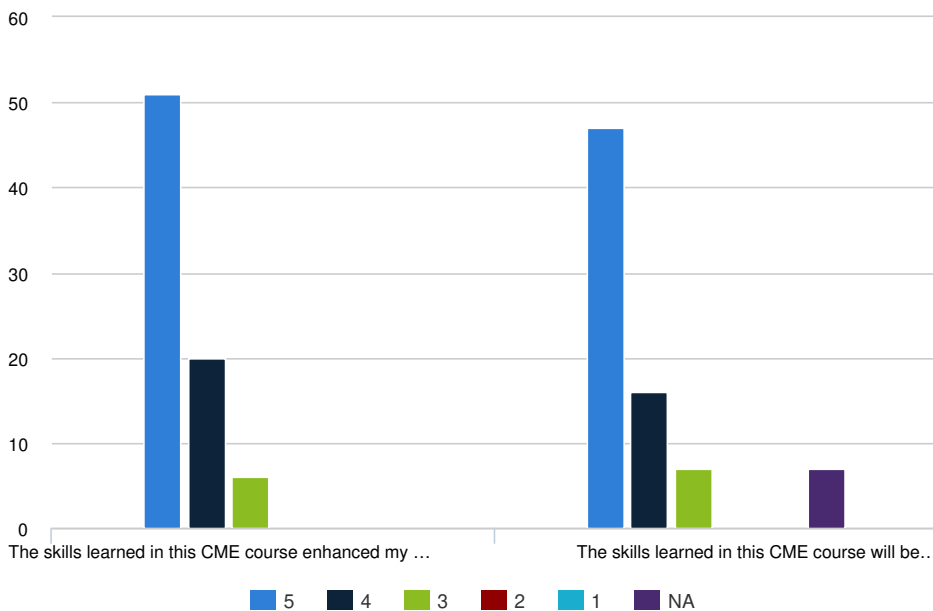
Result details

M.D., D.O.	19
ARNP/PA-C	1
R.N.	3
Sonographer	11
Untrasound Tech	2
Other...	3 (view)

Evidence-based Clinical Care: Delirium Evaluation - September 30, 2021

This page shows analysis of submitted data, such as the number of submissions per component value, calculations, and averages. Additional components may be added under the "Add analysis components" fieldset.

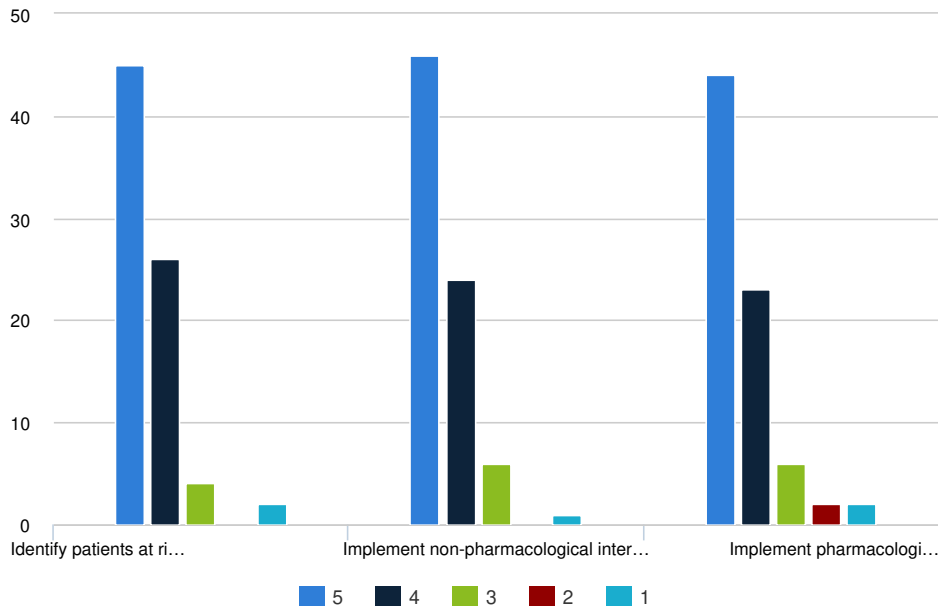
Please score your agreement with or assessment of the following questions and statements by rating on a scale of 1 to 5, with 5 representing the highest level of satisfaction or agreement.



Result details

	5	4	3	2	1	NA
The skills learned in this CME course enhanced my professional competence.	51	20	6	0	0	0
The skills learned in this CME course will be applied in the treatment of my patients	47	16	7	0	0	7

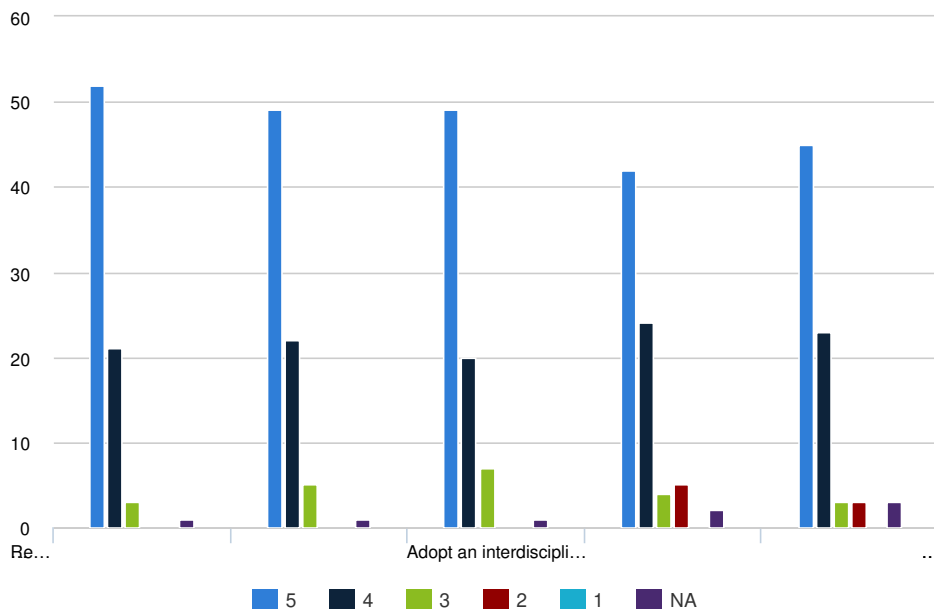
How confident are you in your ability to:



Result details

	5	4	3	2	1
Identify patients at risk for developing delirium during their inpatient and ICU stays?	45	26	4	0	2
Implement non-pharmacological interventions to manage delirium?	46	24	6	0	1
Implement pharmacological interventions to manage delirium?	44	23	6	2	2

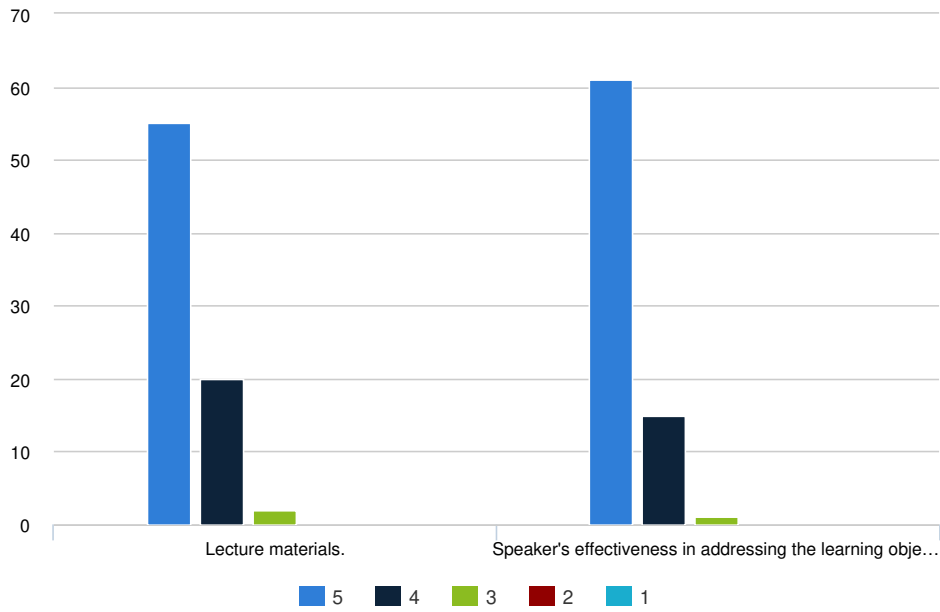
As a result of attending this course, to what extent do you agree that you will be better able to:



Result details

	5	4	3	2	1	NA
Recognize signs and symptoms of delirium in the hospitalized patient.	52	21	3	0	0	1
Identify patients at risk for developing delirium and implement prevention techniques to mitigate risk during their inpatient care.	49	22	5	0	0	1
Adopt an interdisciplinary approach to the management of delirium in the hospitalized patient.	49	20	7	0	0	1
Utilize the electronic medical record to adhere to evidence-based clinical care order sets related to delirium in medical, surgical and critical care settings.	42	24	4	5	0	2
Explain the evidence-based data supporting pharmacological and non-pharmacological interventions to manage patients with delirium in both inpatient and critical care settings.	45	23	3	3	0	3

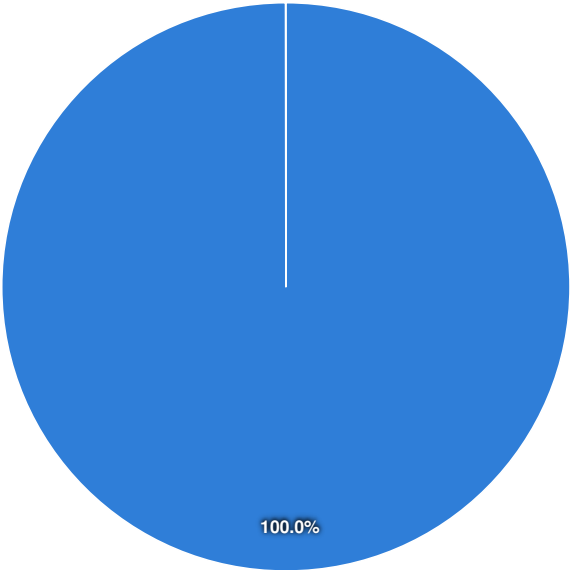
How satisfied or dissatisfied were you with the following conference content?



Result details

	5	4	3	2	1
Lecture materials.	55	20	2	0	0
Speaker's effectiveness in addressing the learning objectives	61	15	1	0	0

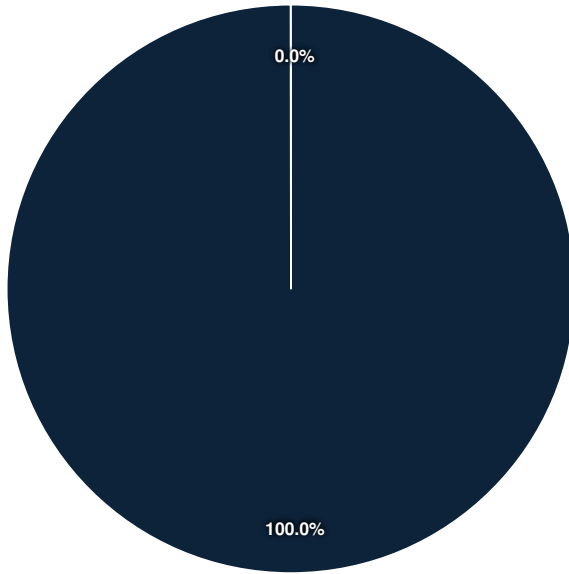
Was this course fair, balanced and without commercial bias?



Result details

Yes	77
-----	----

What, if any, new skills/strategies will you apply in your clinical practice?



Result details

Left Blank	0
User entered value	77
Average submission length in words (ex blanks)	6.90
A	
Explained more about the CAM	
Better assessment skills	
.	
More awareness of hypoactive delirium Use of olanzapine	
Psychopharmacology	
Screening, pre treatment	
CAM assessment	
.	
No patients in this group	
Better understanding of medication use and potential SE's	
Cam documentation in the medical record	
Use of the CAM to assess for delirium, the signs and best ways to treat	
very informational	
good update on delerium and holistic approach especially with the non pharmaceutical approaches	
implementing preventative techniques	
N/A	
Eliminating benzo's and anti-cholinergic medication	
Definitely reinforces the need to prevent or catch early!	
Non pharmacological delirium prevention	
Manage pain better Avoid benzos and anticholinergic	
retired; for general information and maintenance of knowledge and competency	

less interruptions to patients resting time

Use the correct medications, try to mobilize the patients sooner

I will be trying to recognize delirium in an earlier stage of my assessment process.

N/A

Sx/S early delirium.

Very informative webinar. It would be interesting to have additional case studies from our Baptist facilities. Also risk management input

None

great information was presented

Better assessment skills in order to identify prevent and treat delirium

Better Assess and treat delirium.

add to practice

This information was very applicable, especially the focus on identification and prevention. I appreciated the reminders of environment and stresses influence on delirium.

N:A retired

None

Focus on prevention of delirium through evidenced based tools.

n/a

Reinforce current practice

Thank you

Great review! The various types of medicines we can use in this setting.

Avoid anticholinergics

Use Haldol and Zyprexa first line in delirious elderly patients.

N/a

N/A

Improved screening

Na

Early mobilization, minimal nighttime interruption, and apply non- pharmacological approach in treating delirium

None

None

none

Great to have a better understanding of the medications that are beneficial and not beneficial.

Treat more aggressively hypo active delirium

I will ensure that patients with delirium or have the potential of becoming delirious are walking if possible, getting out of bed as possible.

I am retired

n/n

eval for delirium

NA

none at this time

Multidisciplinary approach to management

Avoid benzos

yes

Recognizing patients at risk

yes

I will apply strategies mentioned

I will be able to better assess delirium

use better understanding of delirium to implement prevention strategies and differentiate it properly from other conditions, such as dementia.

I am an office-based physician. I do not attend patients in the hospital setting. However, as the result of the Course, I will be better able to communicate with the hospital-based staff about the patient's diagnoses and management.

Identify risk of delirium and management.

Better understanding

Recognized and treat delirium promptly

would love copy of material covered as a reference

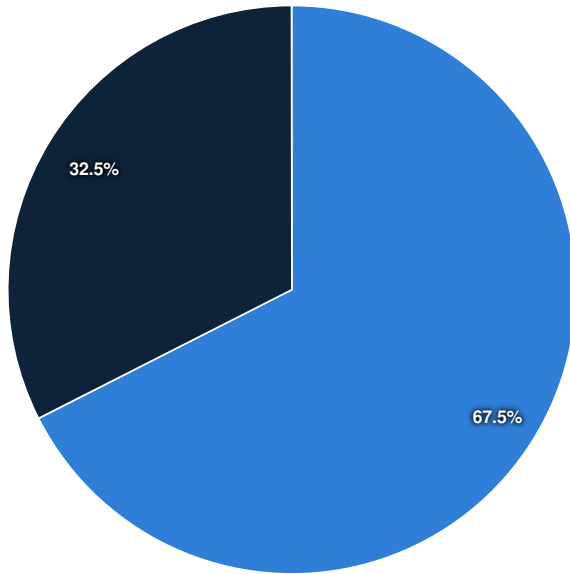
Na

continue same management

Not in practice

Plan to Utilize CAM & other tools such as Delirium mnemonic for assessment & remember prevention is key. The info about GIAP was useful, as well as the data about burden, consequences, incr mortality & re-admission. risk , longer ICU stays, Greater appreciation of non-pharmacological factors that can cause disturbances. Utilize the concepts of Hyperactive, Hypoactive & Mixed State Delirium in assessment/detection & precautions to address proactively precipitating factors.. PT/OT/SLP evaluations prior to discharge can assist with safety awareness

If you do not plan to implement any new skills/strategies in your clinical practice, what is keeping you from doing so?



Result details

Left Blank	52
User entered value	25
Average submission length in words (ex blanks)	4.04
Better assessment skills	
I'm not a doctor	
None	
N/A	
I do not work at the bedside	
Eliminating benzo's and anti-cholinergic medication	
n/a	
I plan to implement activities to decrease the hospital stress and preplan individualized strategies.	
Retired	
I am retired but I keep active my medical license and the knowledge acquired helps me to stay updated in medical science. All information was very helpful.	

n/a

I am retired

I am retired

N/A

n/a

not working

NA

It is not part of job description at this time.

yes

yes

None

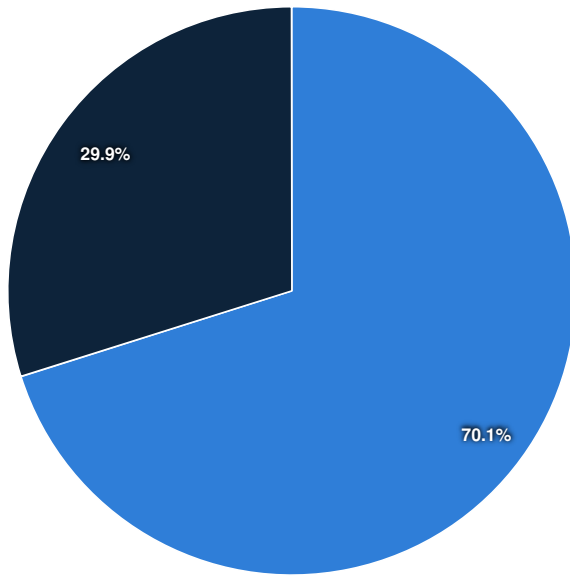
N/A

NA

already implementing

Na

What topics related to delirium would you like to learn more about?



Result details

Left Blank	54
User entered value	23
Average submission length in words (ex blanks)	7.57
Out patient care	
psychological combined with pharmacological	
Detailed pharmacology	
Home management and safe discharge	
medication side effects	
Prevention strategies	
How to handle a acute aggressive behavior where violent events occur and which medication would help.What medication should we use with this patient To safeguard patient an employee.	
prevention	
Identifying delirium in an acute stroke patient. Differences between assessments. What IPOC's will nurses use with this diagnosis?	
I would like to learn about safety related to delirium and its documentation.	

Emergency Department management of acute delirium.

Drugs of choice and dosages for elderly patients Escalation therapy when initial drug fails

n/a

dealing with agitated patients in the hospital setting

none

yes

yes

Specific cases and case management of younger (<60 year-old) patients who either present with delirium or develop signs and symptoms after presentation to the Emergency Room, Recovery Room and/or to the general hospital setting.

How can we reduce the restraint to the patient ?

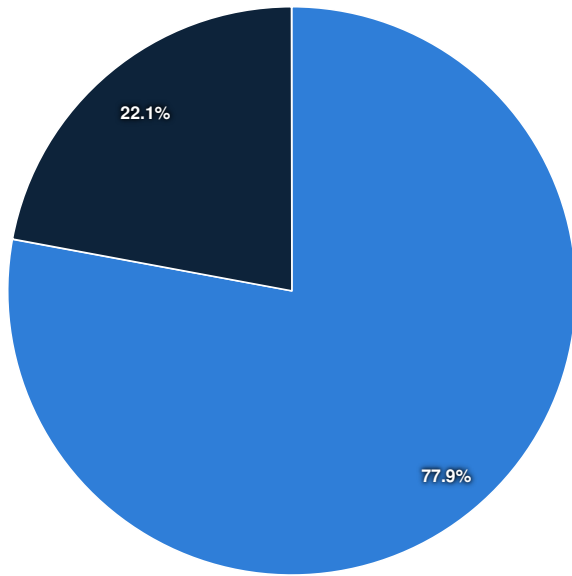
NA

more and more information

NA

Best Practices for Medication Reconciliation on an outpatient basis, after the discharge.

Please provide any additional comments or suggestions.



Result details

Left Blank	60
User entered value	17
Average submission length in words (ex blanks)	8.76
Great panel I enjoyed the varied expert contributions	
Thanks	
Thank you	
None	
very good that had pre-lecture slides for download and printing	
n/a	
Excellent. Thank you.	
Suggest establishing a Delirium Champion for each unit, daily huddle reports on patient diagnosed with acute delirium, door sign alerting "delirium risk". Require all care providers to take the Delirium education as part of the annual requirements.	
My big thanks to professionals of the Baptist Health CME Program for their excellent presentation. Very helpful information.	
DMM needs a psychiatrist like Dr. Chikerman. He has a degree of delirium and how to treat it.	

BHM needs a psychiatrist like Dr. Girschman. HIS knowledge of delirium and how to treat it was very impressive.

I would suggest having experts from emergency medicine speak since many elderly patients are brought into the ER for acute delirium.

Great presentation. Would love more clinical webinars on various topics.

None

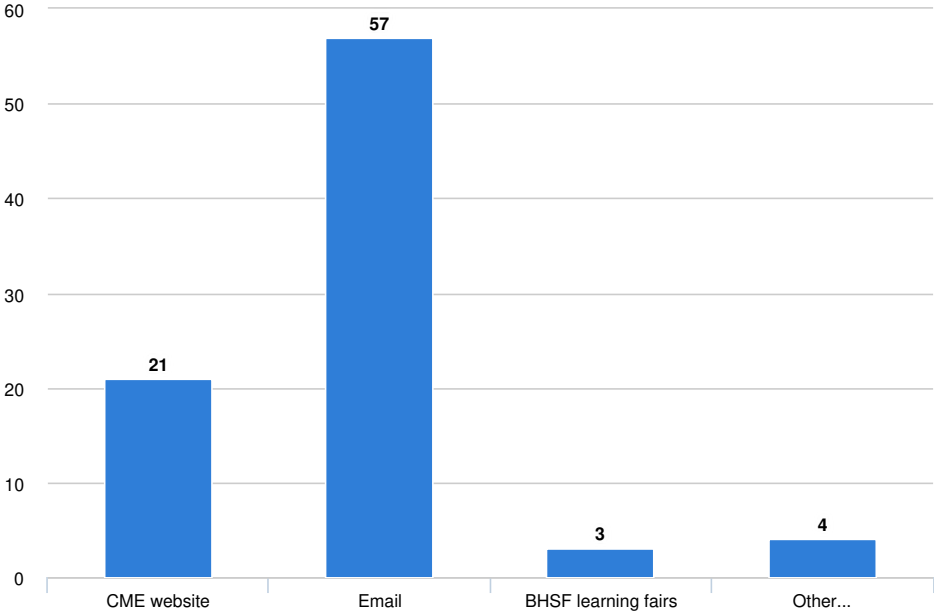
yes

yes

Very important topic; excellent faculty; excellent Course. Thank you for facilitating the presentation.

thanks

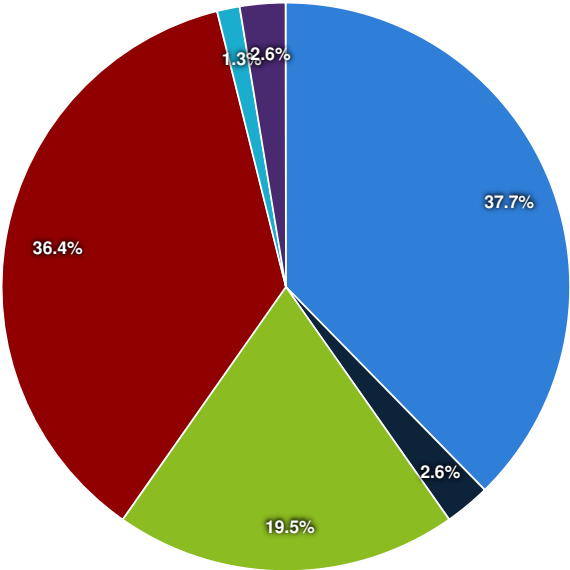
How did you hear about this course?



Result details

CME website	21
Email	57
BHSF learning fairs	3
Other...	4 (view)

Please select one:



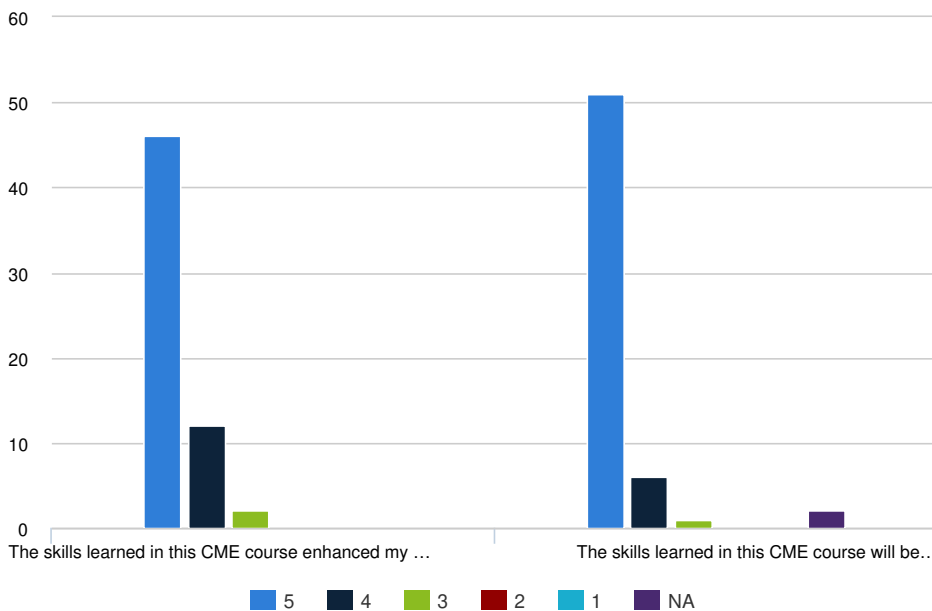
Result details

M.D., D.O.	29
Ph.D/Psy.D	2
ARNP/PA-C	15
R.N.	28
Pharmacist	1
Other...	2 (view)

Echocardiography and Noninvasive Vascular Testing Lecture Series: September 30, 2021

This page shows analysis of submitted data, such as the number of submissions per component value, calculations, and averages. Additional components may be added under the "Add analysis components" fieldset.

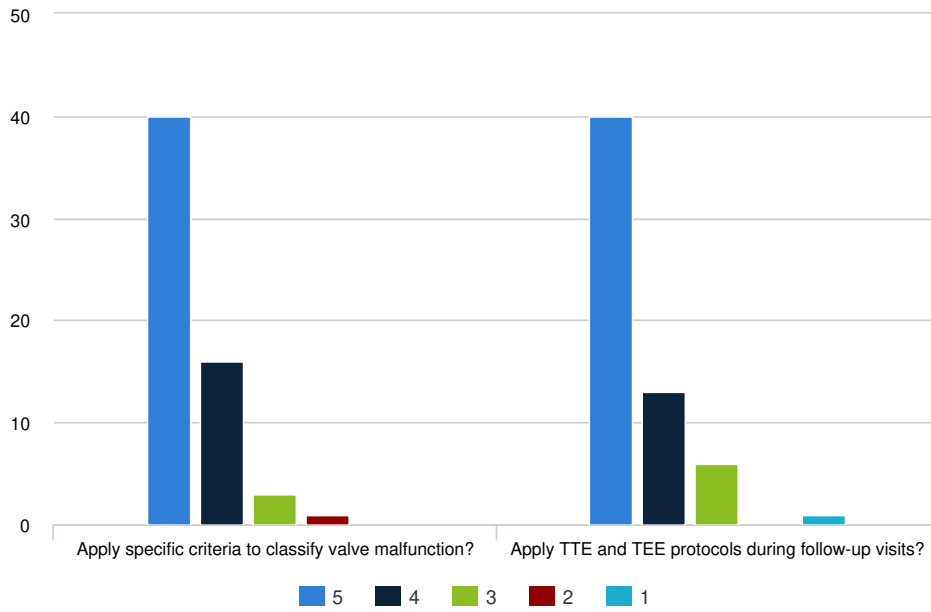
Please score your agreement with or assessment of the following questions and statements by rating on a scale of 1 to 5, with 5 representing the highest level of satisfaction or agreement.



Result
 details

	5	4	3	2	1	NA
The skills learned in this CME course enhanced my professional competence.	46	12	2	0	0	0
The skills learned in this CME course will be applied in the treatment of my patients	51	6	1	0	0	2

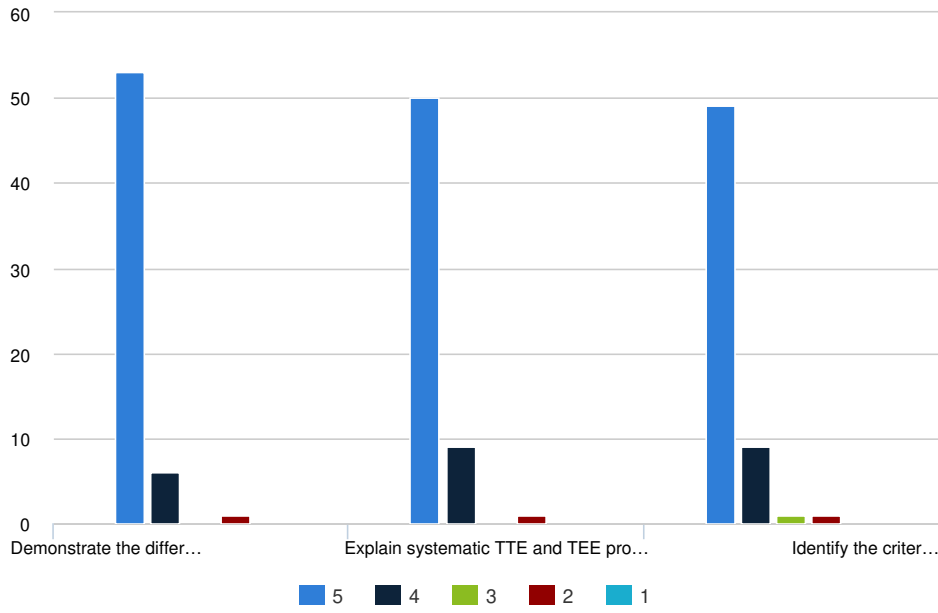
How confident are you in your ability to:



Result details

	5	4	3	2	1
Apply specific criteria to classify valve malfunction?	40	16	3	1	0
Apply TTE and TEE protocols during follow-up visits?	40	13	6	0	1

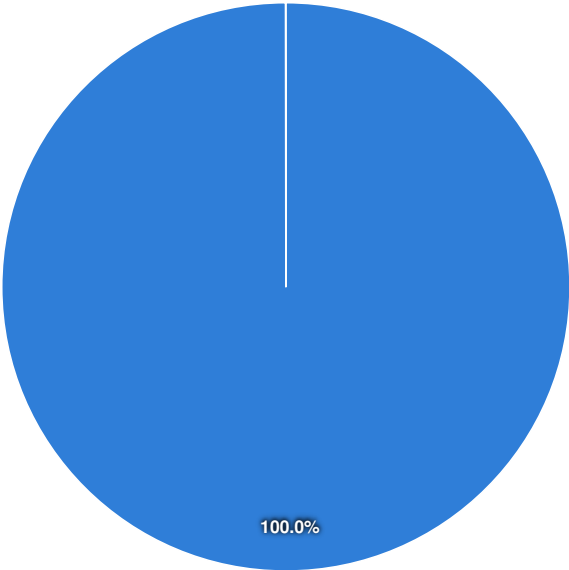
How satisfied or dissatisfied were you with the Speaker's effectiveness in addressing the learning objectives?



Result details

	5	4	3	2	1
Demonstrate the different prosthetic valves commonly used in clinical practice.	53	6	0	1	0
Explain systematic TTE and TEE protocols used during follow-up visits.	50	9	0	1	0
Identify the criteria used in the diagnosis and classification of valve malfunction.	49	9	1	1	0

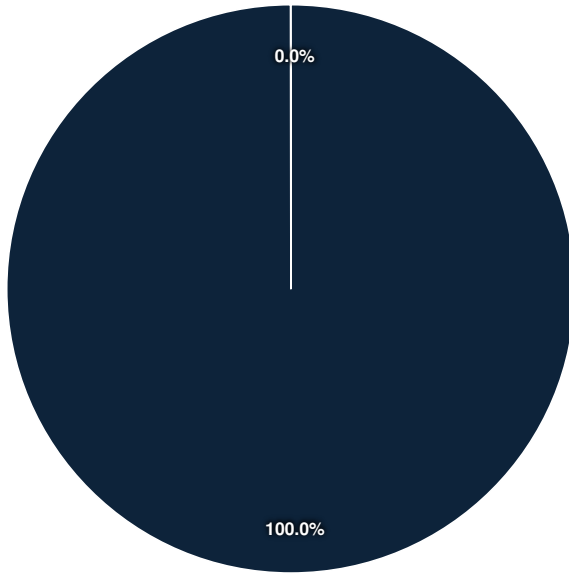
Was this course fair, balanced and without commercial bias?



Result details

Yes	60
-----	----

What, if any, new skills/strategies will you apply in your clinical practice?



Result details

Left Blank	0
User entered value	60
Average submission length in words (ex blanks)	6.30
N/A	
All	
N/A	
Identify which type of prosthetic valve the patient has. Make sure that the values make sense	
Just more aware of what I'm seeing in regards to prosthetic valves	
.	
Specific criteria for valve malfunction	
None	
Excellent!	
Excellent!	
Acceleration time and velocity for prosthetic aortic valve	
I will apply all of the information	
Na	
N/A	
Better identify prosthetic dysfunction	
more detailed criteria for classification of valve malfunction	
N/A	
.	
Identify better the valve	
More complete interpretation of echos on Aortic valve prosthesis	
Knowledge	
Better sense of how systematically evaluate echo for prosthetic bakves	

Better sense of how systematically evaluate echo for prosthetic bakves

Refresher

Observing the Lvot jet and AT

Refer patient to MCVI Cardio Dept.

The different prosthetic valves and how to identify a valve malfunction.

I will have a better understanding to explain these conditions to patients better

Better understanding valve malfunction

identification of various prosthetic valves and evaluation of their functional state

Information about TAVR was very helpful.

N/A

There are some new information and wording about prosthetic valves. Thank you, since most of us cardiac Sonographer have to write our own report.

updates

Apply criteria for prosthetic valve malfunction to everyday echo reading.

Learning more about how to differentiate between different valve replacements

Echo criteria for accessing prosthetic valve function.

To better assess aortic valve after TAVR procedures.

always evaluate for paravalvular leak

Use of acceleration time

Na

.

N/A

Improved echo analysis of prosthetic valves.

YES

Baseline echo and close follow up for aortic valves to make sure no significant change in gradients.

N/A

As a sonographer I'll apply the knowledge learned on the echos.

Going off axis to evaluate areas blocked by some prosthetic valve.

.

Better understanding of the AVR replacements and why.

Better identification of the different types of mechanical valve prosthesis Earlier detection of TAVR Thrombosis, differentiate between significant and non significant thrombosis

Evaluate for perivalvular leaks

I WILL NOW BE ABLE TO RECOGNIZE THE DIFFERENT KINDS OF PREOSTHETIC VALVES

None

Very useful.

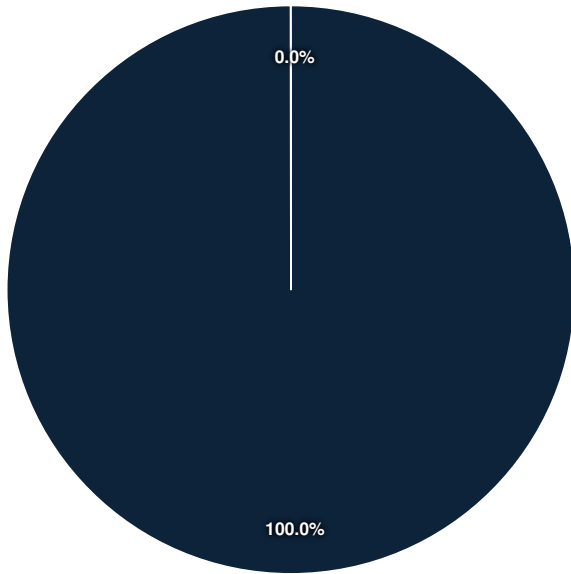
better understanding of prosthetic heart valves and what their normal appearance and values are.

Be Able to differentiate different valves .

Be Able to differentiate different valves .

ADJUSTING COLOR SCALE TO IMPROVE FLOW SENSITIVITY TO EVALUATE PARA/PERI VALVULAR LEAKS.

If you do not plan to implement any new skills/strategies in your clinical practice, what is keeping you from doing so?

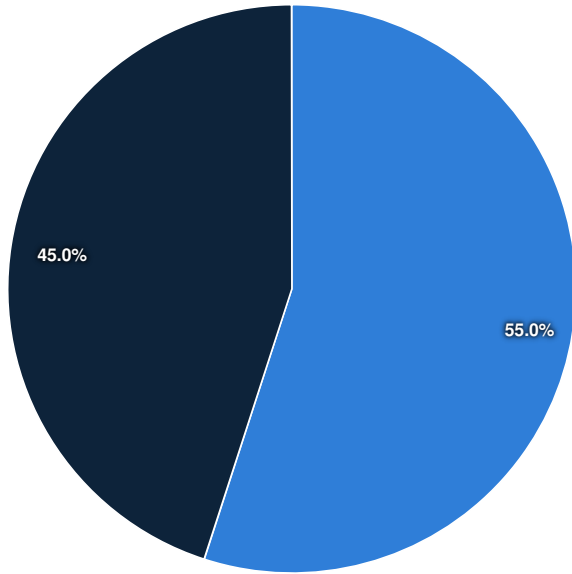


Result details

Left Blank	0
User entered value	60
Average submission length in words (ex blanks)	2.52
N/A	
All	
N/A	
N/A	
Time will always be a factor	
.	
N/A	
I don't perform or interpret cardiac ultrasounds	
Nothing	
Nothing	
I plan to implement the above	
N/A	
Na	
N/A	
None	
no barrier	
N/A	
.	
I will use it	
N/A	
N/a	

Nothing	
Nothing	
0	
Na	
N/A	
N/A	
N/A	
Will look at Echocardiogram with better understanding of valvular function	
I will implement this knowledge in my practice	
None	
Retired	
Answer above.	
yes	
No barriers present	
N/A	
n/a	
N/A	
I plan to	
Nothing	
Nana	
.	
N/A	
During echo analysis of valves.	
I DO PLAN TO IMPLEMENT ANY NEW SKILL	
N/A	
N/A	
N/A	
N/A	
.	
nothing	
N/A	
I am	
n/a	
Already adhering to practice guidelines	
N/A	
n/a	
I do plan to implement new skills.	
I do plan to implement new skills.	
I DO PLAN TO.	

Please provide any additional comments or suggestions.



Result details

Left Blank	33
User entered value	27
Average submission length in words (ex blanks)	3.78
Great presentation	
N/A	
N/A	
Mitral prosthesis Valvular heart disease in native valves Cardiomyopathy	
Mitral prosthesis Valvular heart disease in native valves Cardiomyopathy	
Exelent review	
Excellent review	
Na	
N/A	
.	
More information on mitral valve will help.	
Excellent presentation	
Great presentation	
Great presentation	
None	
This was very well done. The speaker spoke slowly and provided very good slides. Thank you	

This was very well done. The speaker spoke slowly and provided very good slides. Thank you.

Thank you.

Excellent presentation

THANK YOU

now we need to review the mitral valve

Excellent presentation

GREAT COURSE, THE SPEAKER MADE IT CLEAR AND EASY TO UNDERSTAND.

A

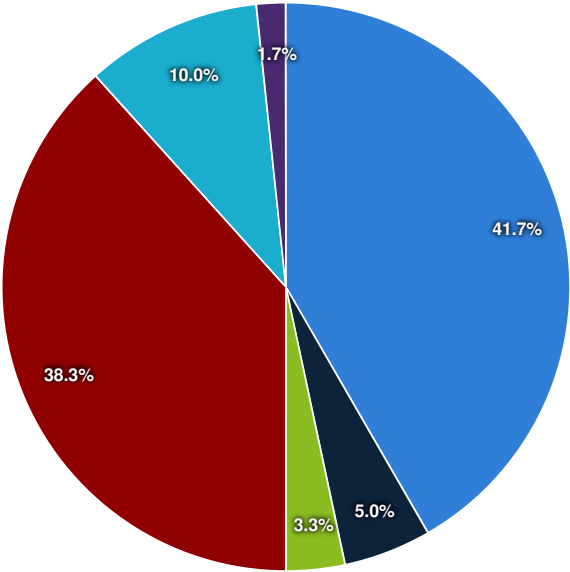
The course was great, looking forward to more

.

.

AUDIO WAS A BIT OFF.

Please select one:



Result details

M.D., D.O.	25
ARNP/PA-C	3
R.N.	2
Sonographer	23
Untrasound Tech	6
Other...	1 (view)