

**BHSF CME Committee Review****Evaluation Scores**

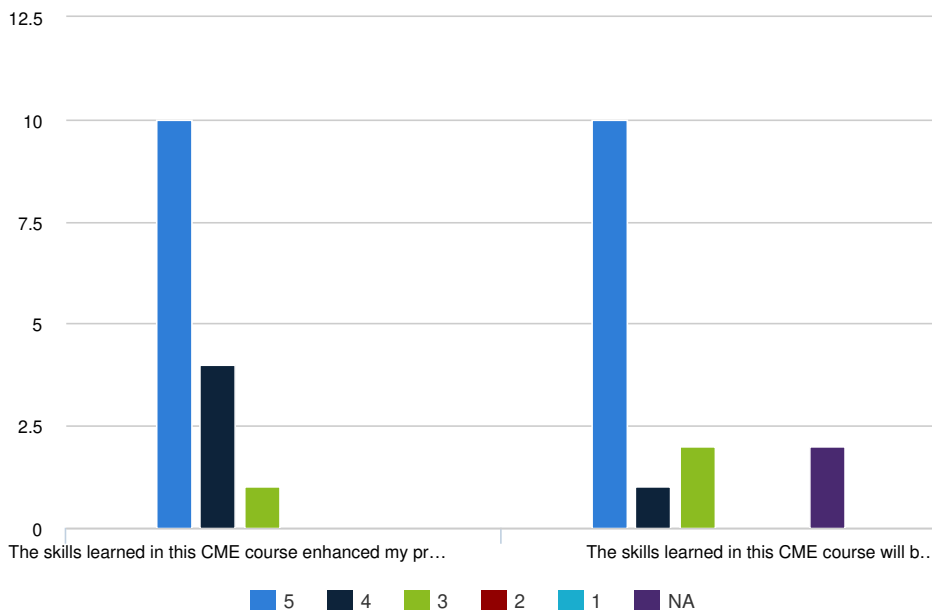
March - June 2021

Lecture Date	Lecture Title	Speaker(s)	Total Attn	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

# Dental Oncology Conference Series Evaluation - March 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.

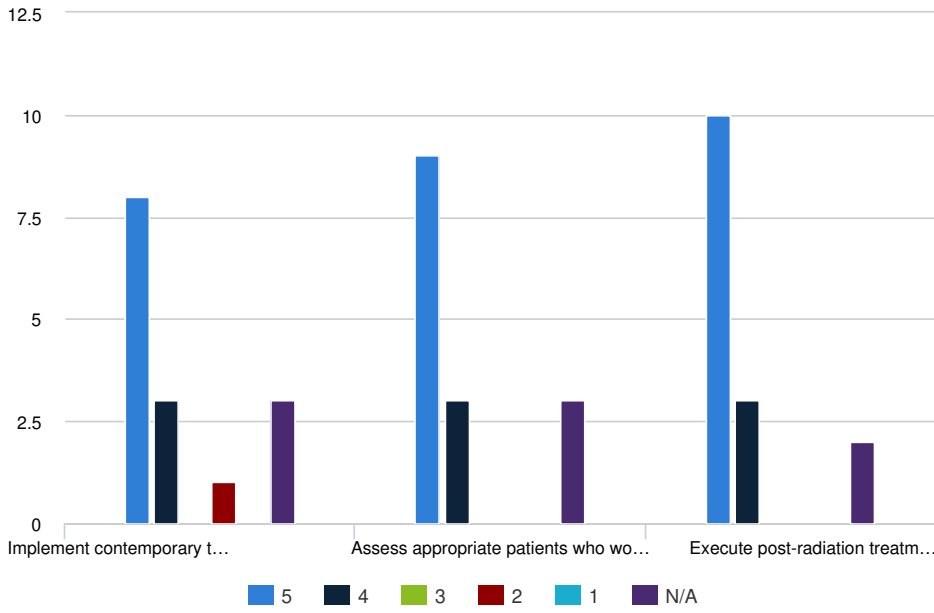
**Please score your agreement with or assessment of the following questions and statements by rating on a scale of 1 to 5, with 5 representing the highest level of satisfaction or agreement.**



Result details

	5	4	3	2	1	NA
The skills learned in this CME course enhanced my professional competence.	10	4	1	0	0	0
The skills learned in this CME course will be applied in the treatment of my patients	10	1	2	0	0	2

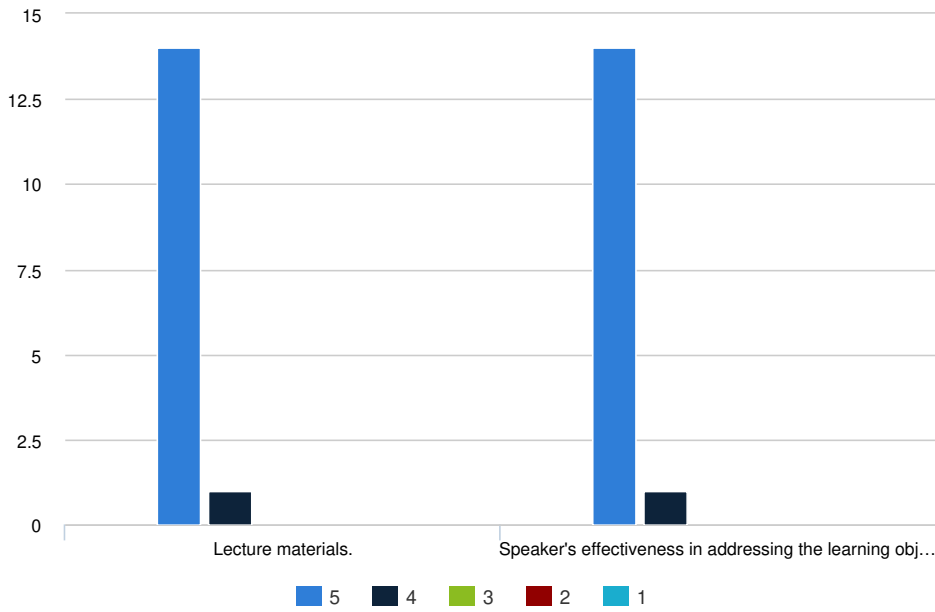
**As a result of attending this conference, to what extent do you agree that you will be better able to: (rate the objectives)**



**Result details**

	<b>5</b>	<b>4</b>	<b>3</b>	<b>2</b>	<b>1</b>	<b>N/A</b>
Implement contemporary treatment modalities in head and neck radiation.	8	3	0	1	0	3
Assess appropriate patients who would benefit from radiation to the head and neck.	9	3	0	0	0	3
Execute post-radiation treatment plans for patients.	10	3	0	0	0	2

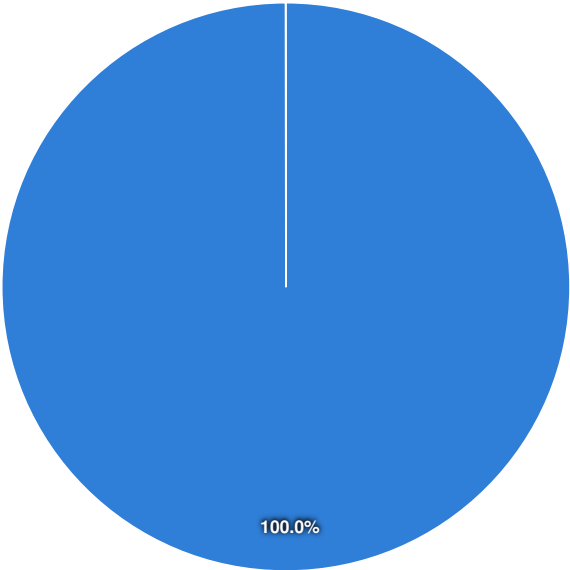
## How satisfied or dissatisfied were you with the following conference content?



### Result details

	5	4	3	2	1
Lecture materials.	14	1	0	0	0
Speaker's effectiveness in addressing the learning objectives.	14	1	0	0	0

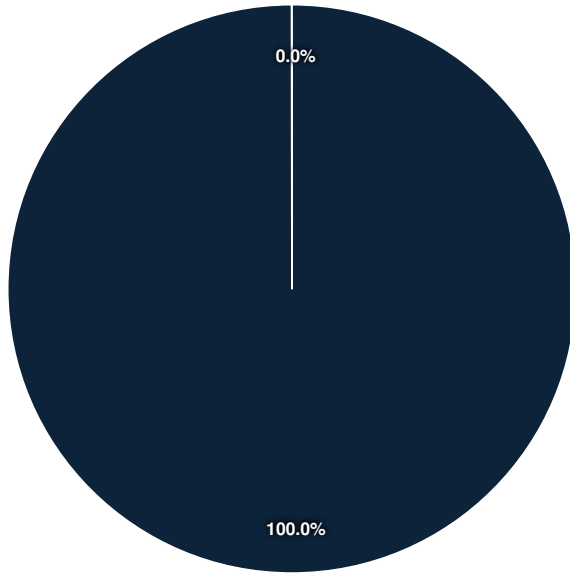
**Was this course fair, balanced and without commercial bias?**



Result details

Yes	15
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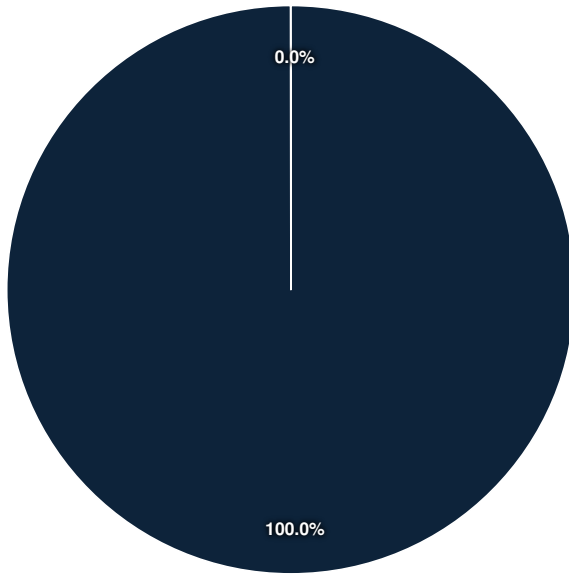
**What, if any, new skills/strategies will you apply in your clinical practice?**



Result details

Left Blank	0
User entered value	15
Average submission length in words (ex blanks)	9.13
N/a	
n/a	
Clarification of new treatment modalities for head/neck ca	
Yes	
Proton radiation	
Not applicable	
post radiation treatment and care (dental)	
These are not new skills to me ( I trained both your speaker and your moderator) but I do apply them every day in my practice	
More aware of state of the art treatments available	
There were lot of new information about head and neck cancer irradiation and to manage early lesions of ORN.	
Improved my understanding of considerations that must be made when treating post-radiation therapy patients	
Contouring to get dosimetry before planning dental extraction in radiated jaws.	
Intended dose map	
Will be better able to asses patients in regards to amount of radiation received, where received and how to manage post radiation complications. Staging review helpful	
Post Chemo/Radiation Symptomatic Relief Modalities	

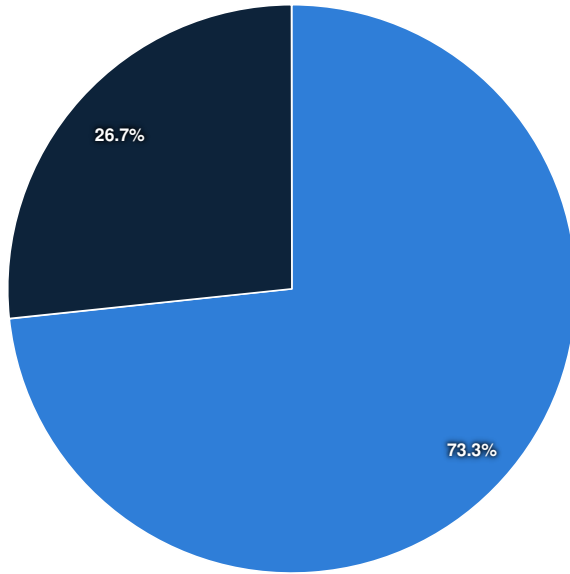
**If you do not plan to implement any new skills/strategies in your clinical practice, what is keeping you from doing so?**



**Result details**

Left Blank	0
User entered value	15
Average submission length in words (ex blanks)	4.87
N/a	
n/a	
none	
NA	
No longer see patients	
Do not work with direct patient care	
N/A	
See above	
N/A	
I would like to implement new strategies to manage ORN lesions in my daily practice at hospital A.C. Camargo Cancer Center, in Sao Paulo, Brazil.	
N/A	
No such intentions of not applying the newly acquired knowledge in my clinical practice.	
N/A	
Many things already implemented	
N/A	

Please provide any additional comments or suggestions.

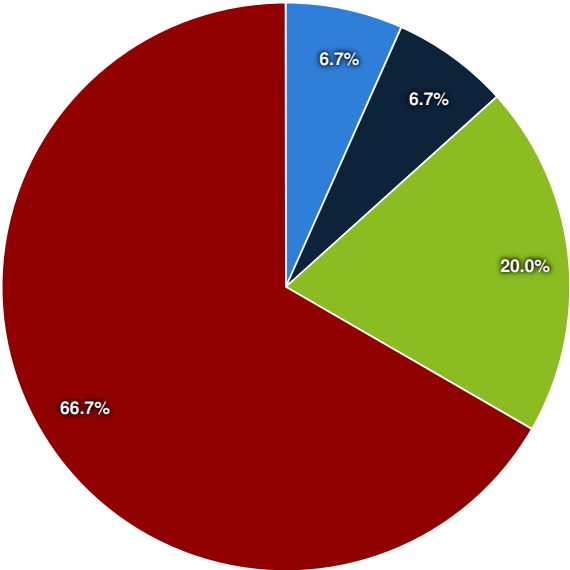


Result details

Left Blank	11
User entered value	4
Average submission length in words (ex blanks)	7.75
Great to have zoom CME course	
Excellent program!	
Congratulations for the excellent lecture.	
I appreciated the Q&A portion at the end, as well as the images used in the slides	



Please select one:



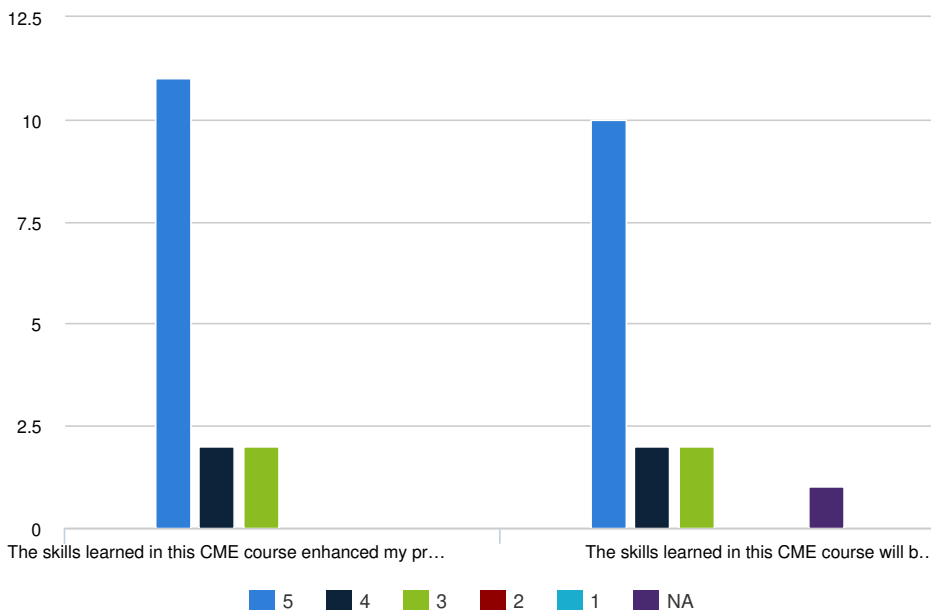
Result details

Ph.D/Psy.D	1
ARNP/PA-C	1
R.N.	3
Other...	10 (view)

# MCI Radiation Oncology Grand Rounds Evaluation - April 9, 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.

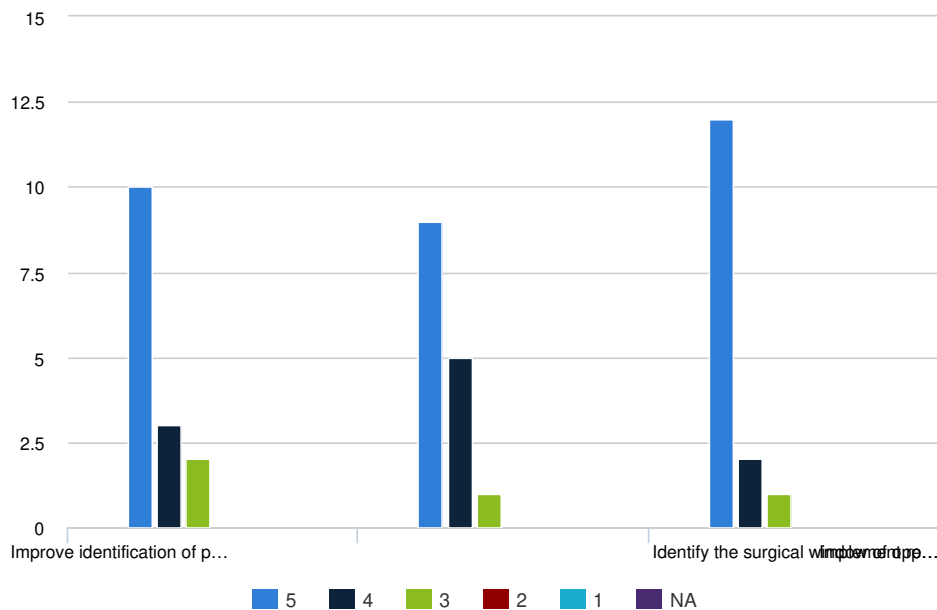
**Please score your agreement with or assessment of the following questions and statements by rating on a scale of 1 to 5, with 5 representing the highest level of satisfaction or agreement.**



Result details

	5	4	3	2	1	NA
The skills learned in this CME course enhanced my professional competence.	11	2	2	0	0	0
The skills learned in this CME course will be applied in the treatment of my patients.	10	2	2	0	0	1

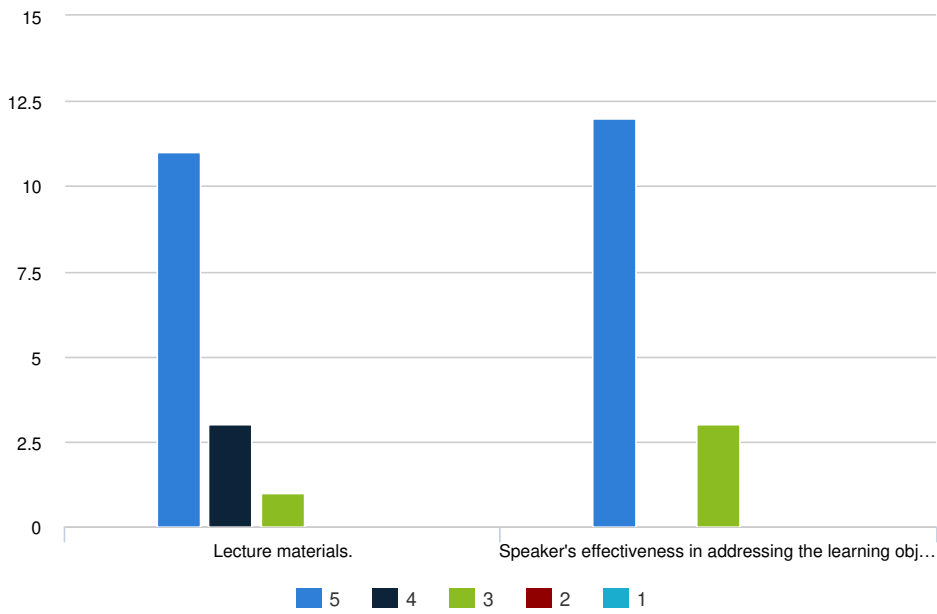
**As a result of attending this conference, to what extent do you agree that you will be better able to: (rate the objectives)**



**Result details**

	5	4	3	2	1	NA
Improve identification of preclinical studies required to bring agents to trials.	10	3	2	0	0	0
Identify the surgical window of opportunity for trials to evaluate if agents should be taken forward for additional testing.	9	5	1	0	0	0
Implement recent advances in targeted therapies and immunotherapies for gliomas.	12	2	1	0	0	0

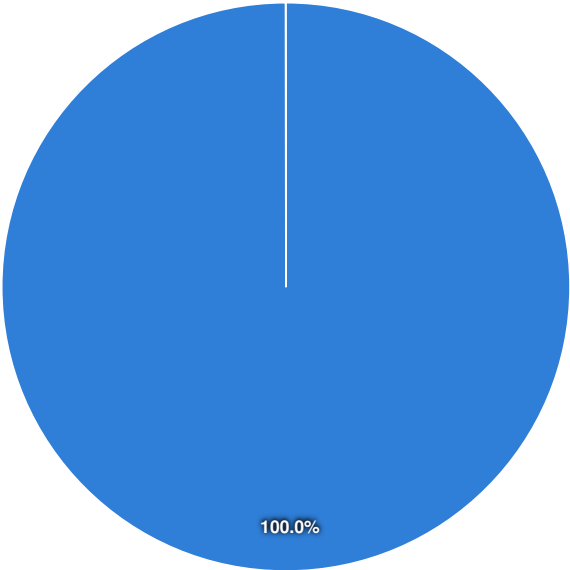
## How satisfied or dissatisfied were you with the following conference content?



### Result details

	5	4	3	2	1
Lecture materials.	11	3	1	0	0
Speaker's effectiveness in addressing the learning objectives.	12	0	3	0	0

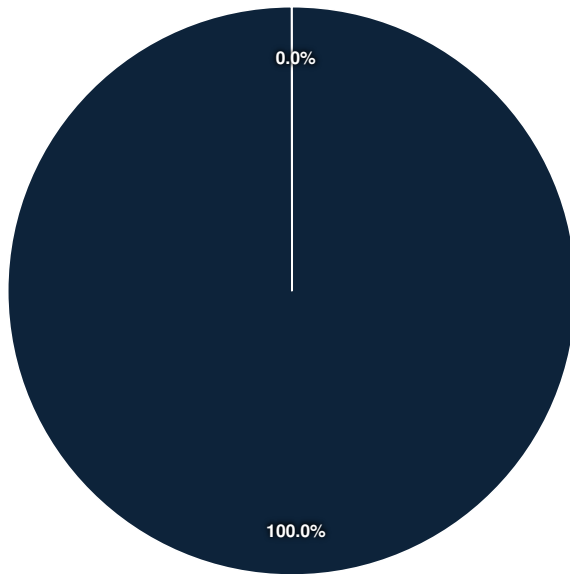
**Was this course fair, balanced and without commercial bias?**



Result details

Yes	15
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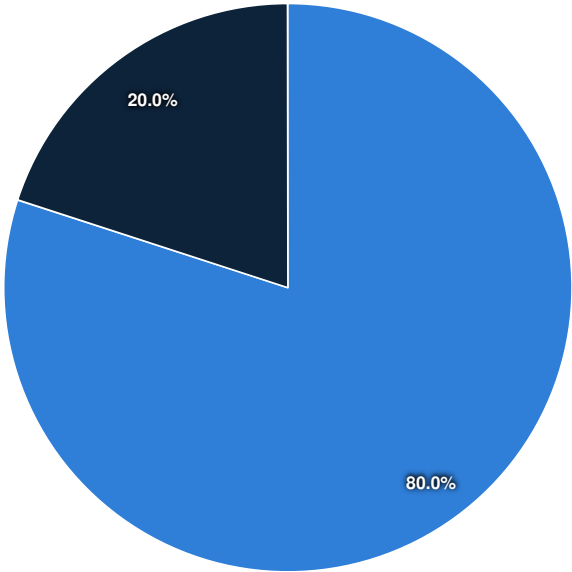
**What, if any, new skills/strategies will you apply in your clinical practice?**



Result details

Left Blank	0
User entered value	15
Average submission length in words (ex blanks)	9.93
Loved the segment which went over the totality of evidence for immunotherapy in these patients.	
Assess dosimetric impact/patterns of gliomas with targeted therapies	
Surgical windows for clinical trials	
The importance of to work in a multidisciplinary team now days more than ever	
Awareness of upcoming clinical trials.	
It will allow me to better support the MDs wishing to bring such therapies into the clinic	
NA	
Since I am a physicist, not a doctor, I don't know that I can apply this information to my clinical practice, but it did increase my understanding of the challenges of treating Gliomas and the effort it takes to bring new therapies into clinical use.	
Continue trial enrollment whenever eligible	
N/a	
i would like to be able to do more early phase trials in brain tumors.	
N/A	
I am an oncologist fellow This has increased my knowledge	
Nothing	
Confidence and perseverance	

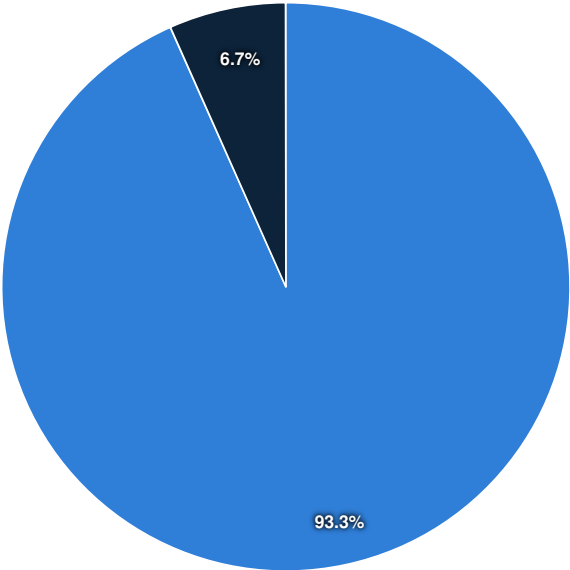
**If you do not plan to implement any new skills/strategies in your clinical practice, what is keeping you from doing so?**



**Result details**

Left Blank	12
User entered value	3
Average submission length in words (ex blanks)	4.00
NA	
X	
The practice is already implementing most of the things discussed	

Please provide any additional comments or suggestions.

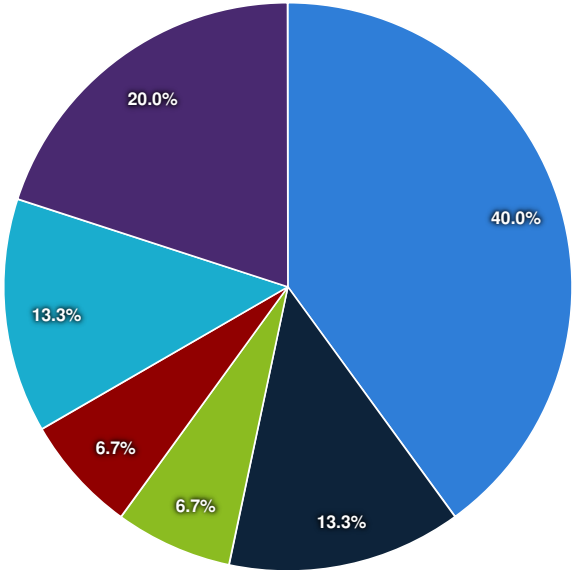


Result details

Left Blank	14
User entered value	1
Average submission length in words (ex blanks)	1.00
NA	



Please select one:



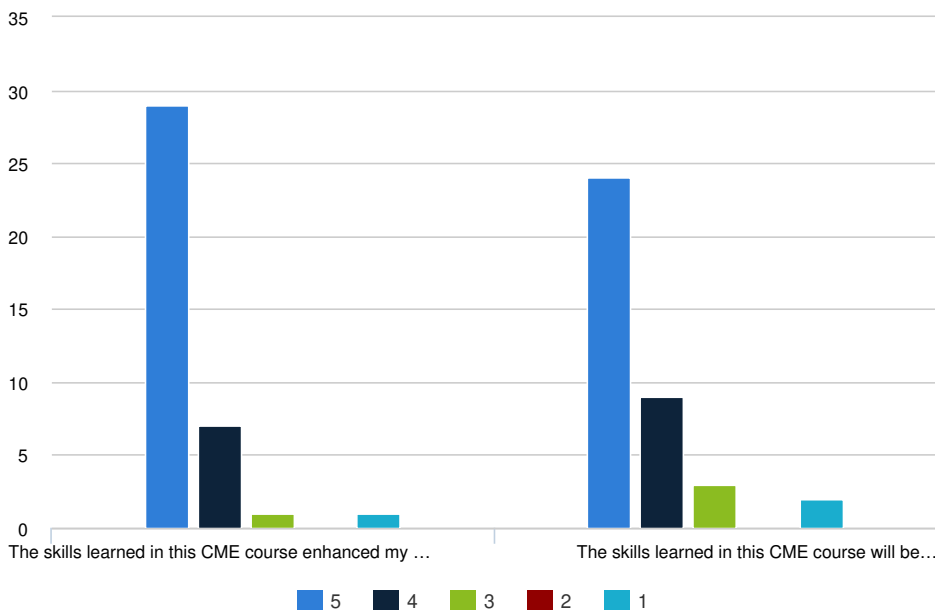
Result details

M.D., D.O.	6
Ph.D.	2
PA-C	1
R.N.	1
Pharmacist	2
Other...	3 (view)

# Mental Health Conference Series Evaluation - April 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.

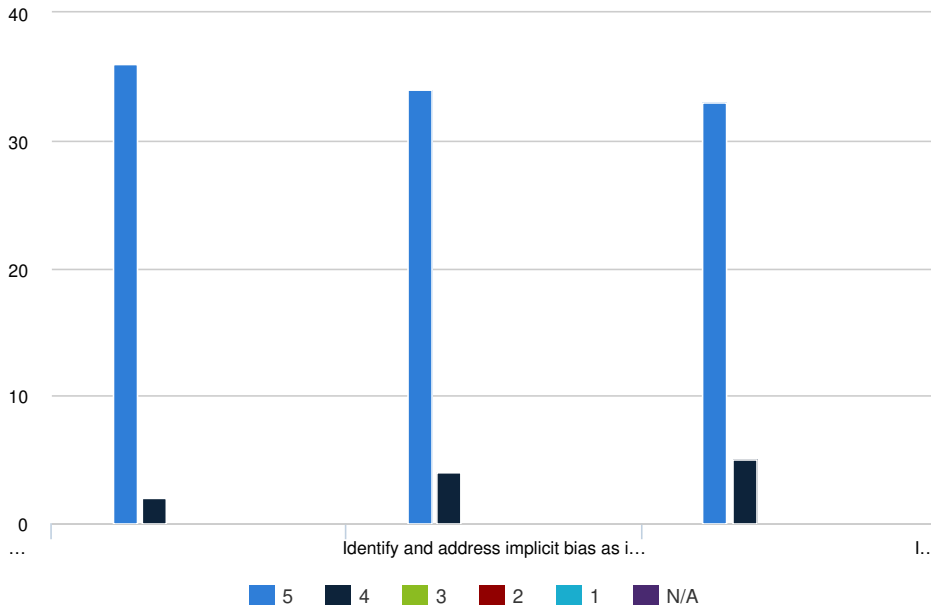
**Please score your agreement with or assessment of the following questions and statements by rating on a scale of 1 to 5, with 5 representing the highest level of satisfaction or agreement.**



Result details

	5	4	3	2	1
The skills learned in this CME course enhanced my professional competence.	29	7	1	0	1
The skills learned in this CME course will be applied in the treatment of my patients	24	9	3	0	2

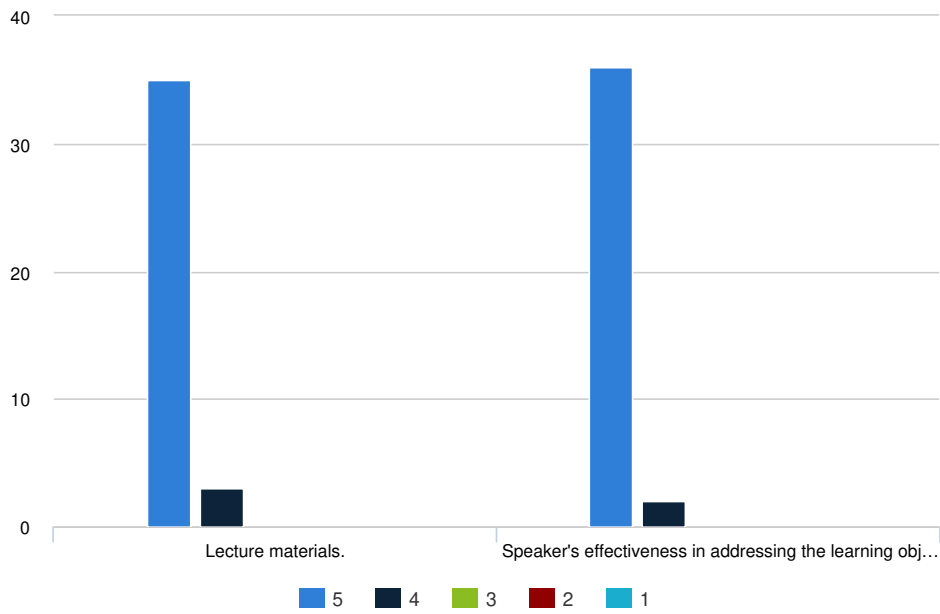
**As a result of attending this conference, to what extent do you agree that you will be better able to: (rate the objectives)**



**Result details**

	5	4	3	2	1	N/A
Analyze how the demands of women in healthcare professions differ from their male counterparts and the impact these differences can have on burnout, career satisfaction, well-being, and professional fulfillment.	36	2	0	0	0	0
Identify and address implicit bias as it relates to gender and its impact on women in healthcare professions.	34	4	0	0	0	0
Incorporate tools and tactics for both men and women to use to support women in the healthcare professions.	33	5	0	0	0	0

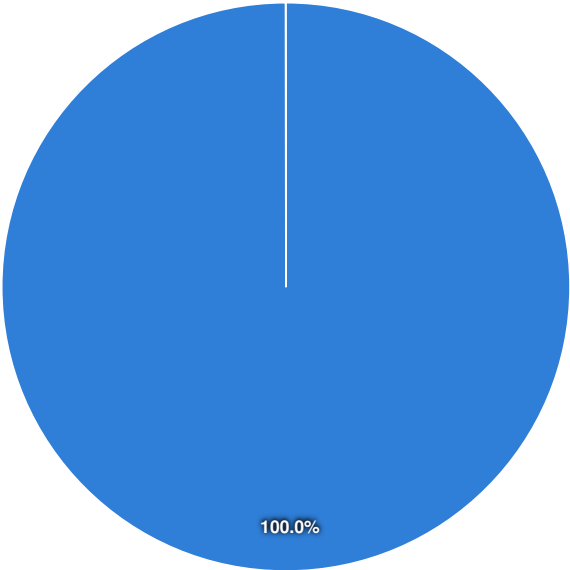
## How satisfied or dissatisfied were you with the following conference content?



### Result details

	5	4	3	2	1
Lecture materials.	35	3	0	0	0
Speaker's effectiveness in addressing the learning objectives.	36	2	0	0	0

**Was this course fair, balanced and without commercial bias?**

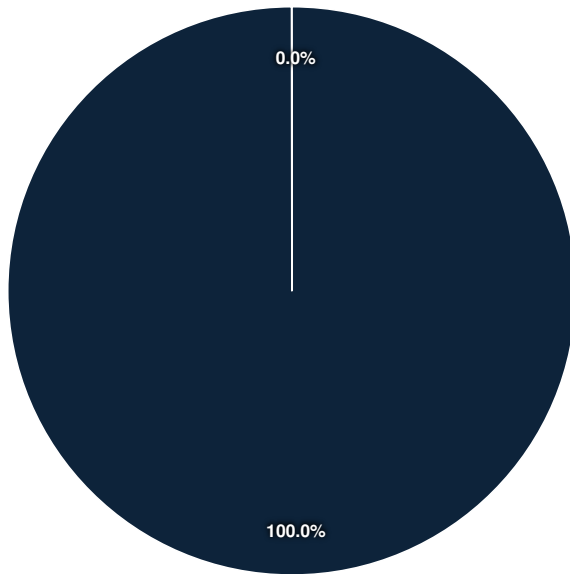


Result details

Yes	38
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**What, if any, new skills/strategies will you apply in your clinical practice?**



Result details

Left Blank	0
User entered value	38
Average submission length in words (ex blanks)	9.47
N/a	
I found the statistics enlightening and found them relevant i my own life. I was grateful for the validation from the analysis.	
Important to notice the disparities in the workplace between genders and how the same response can be perceived differently depending on which gender it is coming from.	
This course helped strategize career planning for myself and colleagues. It spurred me to reevaluate the professional climate for males and females that I will proactively influence.	
Sponsor other women leaders	
Improve my communication and continue to grow as a professional woman	
All	
n/a	
N/A	
Better understand demands and stressors to my female patients, colleagues and staff	
Discuss and develop tactics supporting work/family responsibilities of junior employees	
none	
Educate staff and patients	
Retired	
I will work on being more supportive of women including touting their accomplishments when completing recommendations for jobs and promotions.	
More mindful of gender in decision making	
Increase patient education	
N/A	
N/A	
n/a	

N/A

Recognize the increased physical, financial and emotional stress on women before and even more so with the Covid Pandemia To incorporate this awareness in the decision making medical management of women in my practice

Be more assertive

Negotiating

Negotiating

Sharing some of the research and stats that might assist a patient to become more informed about the challenges of healthcare for women.

Continue to use peer support to help work through the added stressors placed on female healthcare workers.

Not to be a bystander when a woman is treated unfairly

Yes absolutely

I am in a Non-clinical position

Be more attentive to the individual people involved

Be more attentive to the individual people involved

It was such an eye opening presentation. It showed implicit biases and spoke about biases about recommendation letters, if a male and their female counterpart were to be expecting a child the biases around this, the hidden care labor is a powerful concept to think about. Thank you for lifting women by your profession and the presentation.

Negotiate future contracts

Identify possible burnout on women regarding their careers, well being and professional and personal satisfaction .

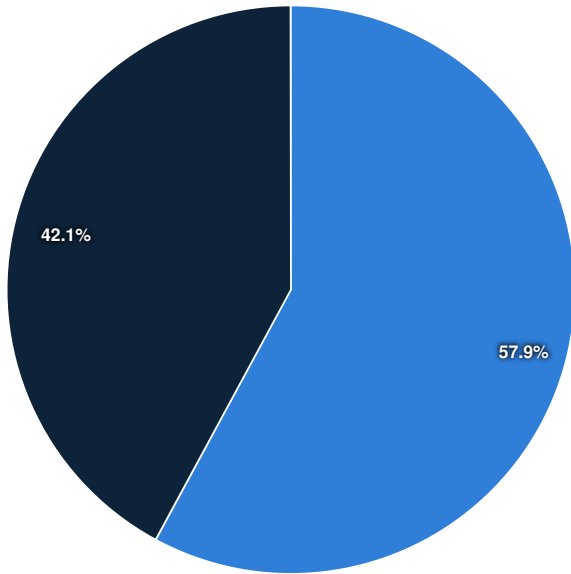
N/A

N/A

N/A



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



**Result details**

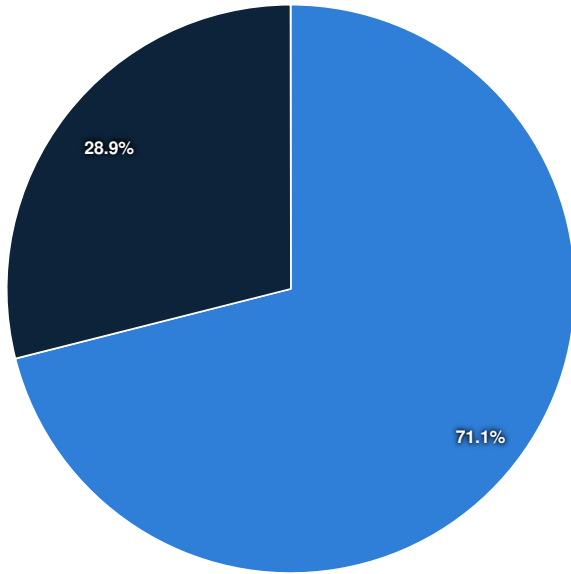
Left Blank	22
User entered value	16
Average submission length in words (ex blanks)	1.63
Will implement	
n/a	
N/a	
yes	
N/a	
n/a	
Retired	
N-A	
Na	
Na	
NA	
N/A	
N/A	

N/A

N/A

N/A

Please provide any additional comments or suggestions.

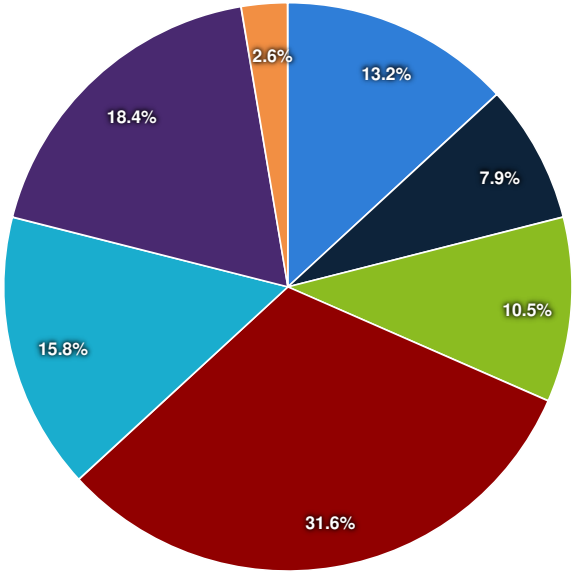


Result details

Left Blank	27
User entered value	11
Average submission length in words (ex blanks)	2.18
Excellent presentation - very informative.	
Excellent presentation	
N/a	
great presentation	
None	
N/A	
n/a	
NA	
Very good presentation	
N/A	
N/A	



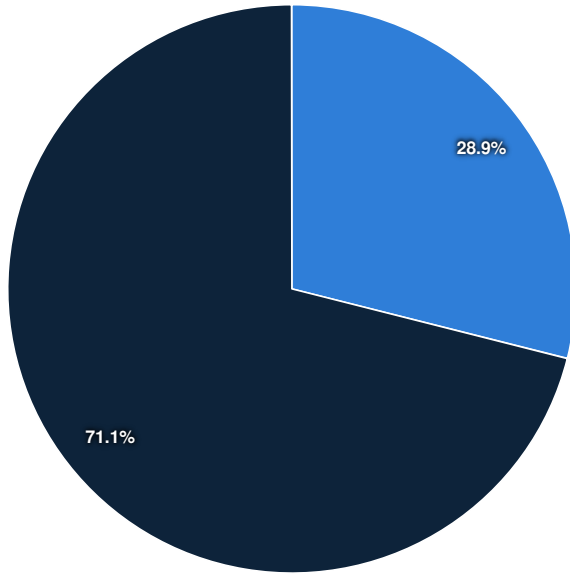
Please select one:



Result details

M.D., D.O.	5
Ph.D/Psy.D	3
ARNP/PA-C	4
R.N.	12
Pharmacist or Pharmacy Tech	6
Occupational Therapist	7
Other...	1 (view)

## Name



### Result details

Left Blank	11
User entered value	27
Average submission length in words (ex blanks)	2.85
Tiffany Pattinato	
Chaplain Maria Anderson	
Laurene Quintana	
Katja Flor Vignau OT3469	
Julie David, APRN	
Giovanna Vanegas	
Ann Marie Allen	
ALEXANDER RAKITA	
GEOFFREY N JAMES, MD	
Miriam Caban	
Daniel San Martin	
Paul Gluck	
Lorienne Watson	
Barry M. Crown, Ph.D.	
Pamela D'Souza	
Susan	
Michele D. Watson O.T.R/L	
Alvaro Mayorga-Cortes. M.D.	
Suzanne L. Keeley, Ph.D.	

Marc Thernelus

Ian Nisonson, MD

Ian Nisonson, MD

Dana Marie Ross

Aylen Gordillo

Olga Linares

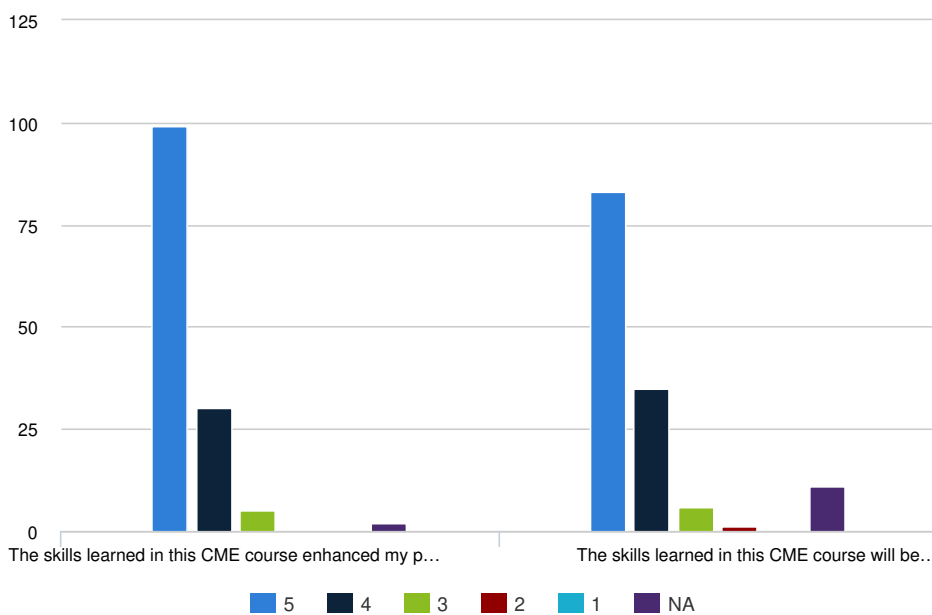
Janet C

Janet C

# Women's Cancer Symposium Evaluation

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.**

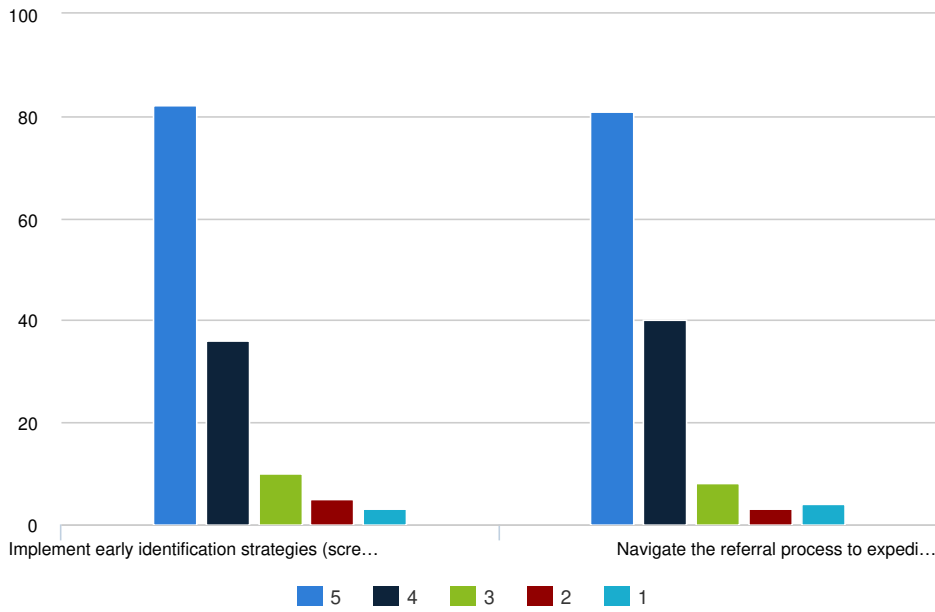


**Result details**

	<b>5</b>	<b>4</b>	<b>3</b>	<b>2</b>	<b>1</b>	<b>NA</b>
The skills learned in this CME course enhanced my professional competence.	99	30	5	0	0	2
The skills learned in this CME course will be applied in the treatment of my patients	83	35	6	1	0	11



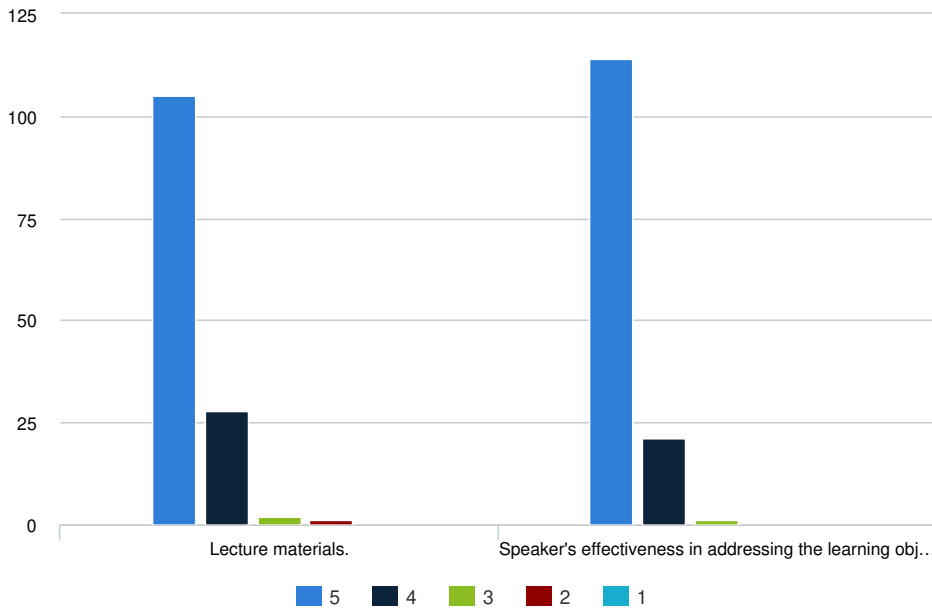
## How confident are you in your ability to:



### Result details

	5	4	3	2	1
Implement early identification strategies (screening, imaging, etc.) to detect women's cancer?	82	36	10	5	3
Navigate the referral process to expedite the time to treatment for a newly diagnosed patient?	81	40	8	3	4

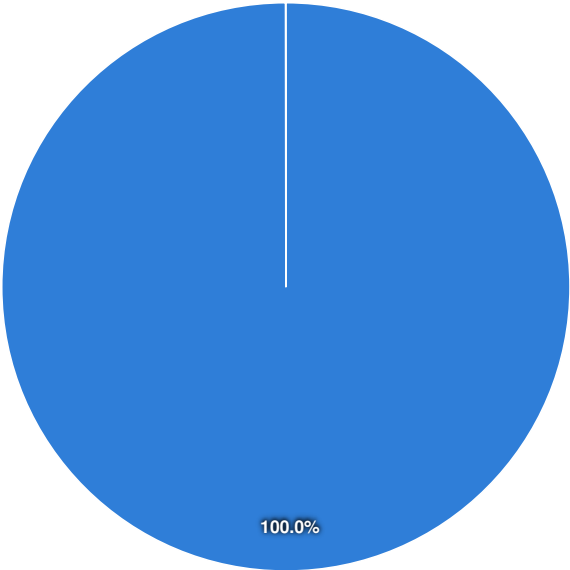
## How satisfied or dissatisfied were you with the following conference content?



### Result details

	5	4	3	2	1
Lecture materials.	105	28	2	1	0
Speaker's effectiveness in addressing the learning objectives.	114	21	1	0	0

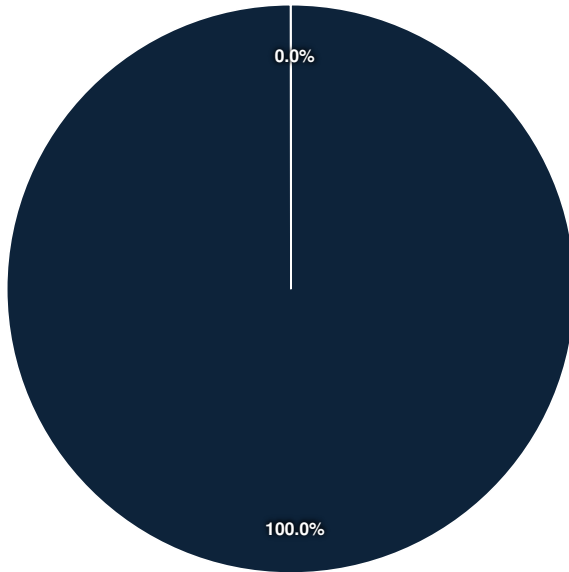
**Was this course fair, balanced and without commercial bias?**



Result details

Yes	136
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**What, if any, new skills/strategies will you apply in your clinical practice?**



**Result details**

Left Blank	0
User entered value	136
Average submission length in words (ex blanks)	8.35
Early identification	
education to my patients.	
I learned about the 45% incidence of cardiomyopathies associated with I/O therapy.	
All interpretation will be considered	
NA	
NA	
As an occupational therapist I can keep a close monitoring of patients' vital signs, body language, and close surveillance of health changes that would need to be brought up to nursing attention while under rehab intervention sessions.	
B/a	
.	
recognize those patients appropriate for genetic screening. radiation modifications	
Genetic Testing	
Apply early detection modalities	
I am now retired OBGYN	
I will probably change from carbo to cis for my HIPEC patients. Will work with radiology to better screen for ovca.	
Using more integrative therapies with patients	
More testing	
Identify patient's plan of care based on diagnosis	
Use of cesm	
Adapt Integrative medicine into my practice	
Cisplatin for HIPEC	

increased consideration of newer imaging modalities for breast cancer

Treatment landscape and sequencing

screen for ovarian cancer more frequently

EXPAND MY KNOWLEDGE

great

As an intake RN, just getting the general knowledge on Breast cancer management it's very helpful.

Consider referral for HIPEC with interval debulking surgery

I will follow what my supervising physician practices.

I will always keep a calm demeanor, use the focus in the machine

I learned more about screening and prevention

N/a

Referral to Obgyn

informational

will apply the new info to educate patients.

Understanding the use of Integrative Care and Alternative Treatments such as Accupuncture.

So much good information, I need time to digest it all.

None.

All the recommnded

Refer early to specialty practice

I can implement early identification strategies to detect women's cancer

I do not work at the moment with these types of patients; unable to apply skills. However, it was a very informative symposium.

I have a better understanding of Parp inhibitor

To be more aware and understanding of the implications medicine has on patients who have cancer.

better management of patients on Keytruda/Lenvima regimen, referral for acupuncture for AIMSS

n/a

N/A

Greater attention paid to hereditary diseases.

Use of cisplatin for HIPEC

The use and research of alternative strategies (ie yoga, music therapy, etc.) in order to apply them for the emotional needs of my clients

N/a

Do better screening for ovarian and uterine cancer

Not applicable. I am retired.

The conference gave many new things and I'm sure will be big help!the

I have retired.

NA

integrate new treatments into the proper sequency in the clinic

Aromatherapy/ acupuncture / thai chi and vitamins strategies .

Retired

Parp inhibitors, PEMBRO for EC

the information presented was very interesting. some speakers spoke very fast, and others were great with the tone and speed of the presentation.

I work with the Miami Dade County Public Schools in the ESF PT/OT Department and we get cancer

I work with the Miami Dade County Public Schools in the EBCT/CT Department and we get cancer patients, also their family members have experienced this terrible disease. Some are survivors and some have sadly passed...It was very nice to have seen and met with such dedicated group on doctors and specialists in the field.

Plastic and reconstruction Surgery integration with radiation

Yes, every informative and up to date with new information/therapies.

Consider partial breast irradiation as opposed to whole breast irradiation trying to avoid radiation damage to cardiac and lung tissue

use of plastics for more complex closures

None

Improve screening and order MRI Breasts in high risk patients

Taylor RX

Better understanding and application of Tailor Rx

As a primary care physician I am now better informed about the treatment strategies of my patients with breast and ovarian CA. I will implement therapies to treat side effects of AI.

I feel better able to refer and talk through issues with my patients - able to advise on possible treatment strategies and outcomes that may be offered. Better able to support patient.

WITH REGARDS TO PAP SMEAR. PATIENT DONT NEED TO DO IT EVERY YEAR. IN OUR CLINIC IT HAS BEEN ADVISED TO PATIENT TO DO A PAP SMEAR EVERY YEAR.

Patient treatment

It gave me enhanced knowledge and clarity

NCCA ways to treat breast cancer

I have acquired and enhanced knowledge in the treatment of breast cancer and this knowledge will help educate my patients

N/A

New knowledge about immunotherapy in women's cancers New knowledge on XRT changes New knowledge on imaging of breast cancer

Taylor RX results and implementation

Better understanding of new guidelines

Con las nuevas estrategias puedo atender mejor a mis pacientes y brindar diagnósticos más certeros

Drugs treatment

nOne

I will advocate for patients to have early detection/screening, lower risk factors, minimize toxicity, and focus on quality of life.

more referrals for CESM

Very informative

Integrative oncology strategies to mitigate side effects of AI

As you read through the list below, think about how each one applies to your own skill set. ... Hospitals or other organizations in which you work will expect new nurses to be ... It's okay if you're not a pro at all of them.

Current Therapies

I we implement

Better evaluation of radiographic interpretations and appropriate type of specific tests

.

Treatment options for pain / breast cancer

Early referral

The careful selection of imaging for breast cancer screening

education patients, families and staff

education patients, families and staff

Imaging for high risk patients.

education

Understanding how to help my patients navigate the system and provide support.

Yes I'll apply new strategies also new concepts for me.

clinical trials with ai

I am currently working on an exploratory study which objective is to analice the relation (if existent) between neoadjuvant therapy in recently diagnosed breast cancer patients and diet on genomic instability. The Symposium helped me enhance my knowledge about new therapies so will definately complement the background and justification

I will apply no particular new skills in my clinical practice.

specific treatment approaches for OT/PT/ST inpatient setting

NA

Contrast enhanced mammography

Apply new knowledge

additional management strategies for management of treatment related vulvovaginal dryness

greater skills and awareness

yes

appropriate

prevention was a former area of weakness---now imprved

Our clinic will incorporate a new protocol to target early identification of woman's cancer during the screening/imaging process. This is an area we need have an improved approach.

APBI with external beam RT

sentinel lymph node staging for endometrial cancer

.

screening practices

We follow most current practices in Breast Imaging

high risk screening and breast cancer prevention options

.

new chemo strategies

.

N/a

Better assessments

n/a

No change

Will have a better understanding of treatment modalities

Contrast enhanced mammography Ovarian cancer treatment and diagnosis breast reconstruction fat transfer techniques

Protocols

.

Work in multidisciplinary team

once patient diagnosed with cancer, when appropriate, immediately refer to genetics counseling team for evaluation and testing

N/A

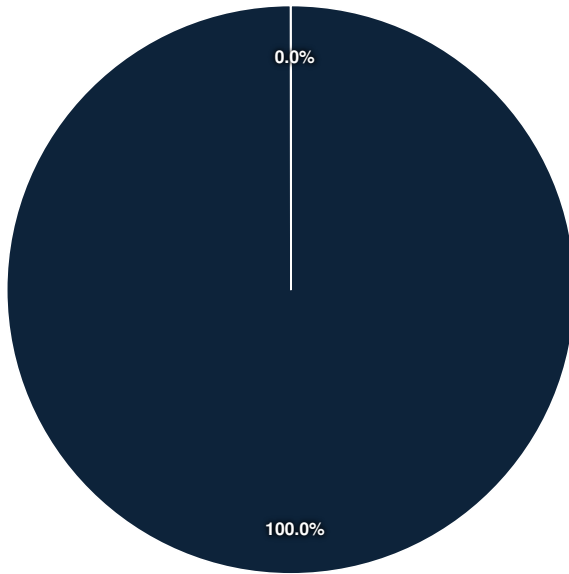
I'm not clinical, but planning on using GYO and Breast educational content for MCI clinical pathways.

interesting imaging/ treatment options

use of cem



**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	136
Average submission length in words (ex blanks)	4.96
I will implement	
N/A	
Yes, I will be able to recommend the correct medications for myocarditis induced by I/Os.	
Facility	
NA	
Currently not in clinic setting	
N/A	
None	
.	
will implement new information	
N/A	
N/A	
I am now retired.	
nothing	
N/A	
NA	
nothing	
Na	
Resource constraints	
NA	
N/A	

n/a

nothing

I AM A SONOGRAPHER

very informative

I will take the time to applied the lessons learned.

None

I am a Physician Assistant who works under my supervising physician prctice

n/a

N/A

N

We have an OBGYN

informational

update the info and new tech.

I have nothing not to implement.

I am

I attended this course for personal knowledge and am not currently practicing with clients in this area.

N/A

N/A

I can implement new strategies

I do not work at the moment with these types of patients.

Time

To be more aware and understanding of the implications medicine has on patients who have cancer.

NA

n/a

retired

n/a

Nothing

I would like to look into applying and adapting the above mentioned techniques to the pediatric patient. There may be limits with types of applications depending on the child, the parent and their medical condition or tolerance.

N/a

Non applicable

I am a retired physician.

My husband is a Platic surgeon that sees many breast Ca Pt and we will implement the new developments

I have retired.

NA

I am planning to implement new strategies in my clinic

Like I said I would like to introduce Aromatherapy/ acupuncture and vitamins strategies in my practice with patients as they need it .

Retired

No barriers

I am not a physician, however the information was interesting and I like to keep up on the current methods and treatments...I found Ting Boa's topic very interesting in allowing some natural remedies to enhance the therapies...there should be an N/A for all categories that represent implementation of strategies for

those of us that are not physicians...

N/A

Plastic and reconstruction Surgery integration with radiation

N/A

N?A

n/a

my scope of practice

NA

n/a

N/A

None

n/a

I WILL CHECK AND SPEAK WITH OUR DOCTORS AND ADVISE THEM ON WHAT WAS IN THE HANDSOUT.

N/a

none

n/a

As I stated above, I will advise my patients on regards to choices in reconstructive surgery

N/A

My role as a chemotherapy nurse educator

na

Ñ/A

Pretendo implementar nuevas habilidades en mis diagnósticos

I will need practice

i am retired

none

none

Information

N/A

That being said, in your nursing courses you will have to develop, adopt, or expand new study strategies and critical thinking skills as ... As you know, your decision to apply to CCRI's Nursing program

none

I we implement

N/A retired, but on FIU Herbert Wertheim College of Medicine teaching staff

.

None

N/A

Some of the things learned are not available in my country

n/a

N/a

potential barriers: insurance, financial

I plan on implementing strategies for sharing new knowledge

Every day we learned somehings to apply

n/a

I do plan on implementing new ways of diagnose (using imaging skills and stratification) as well as new monoclonal antibodies for treatment.

I don't like to expose myself to cancer patients.

productivity and insurance time given for therapy with patients with such diagnosis and prognosis

NA

I want to review the data for myself

n/a

N/a

n/a

yes

nurse working in general oncology population

nothing

At this moment we can not incorporate all skills/strategies as we are just starting up and need more equipment. New approaches that are now learnt will be followed.

Time to create the protocol

I plan to

.

n/a

Nothing is keeping us from practicing new skills

N/A

.

none

.

N/a

Not applicable

n/a

Reflects current practice

N/A

call center not dedicated to breast patients

NA

.

Work in multidisciplinary team

n/a

N/A

N/A - not clinical

N

none



excellent program which provided current treatment options

It was a good flow of information despite the fact that it was virtual. This format may give professionals an additional ability to not have to displace themselves while also attending the presentation.

N/a

Excellent!

The speakers were very good and I love listening to them again

This was an excellent presentation! Thank you!

lots of technical issue in the beginning

very practical and informative, overall excellent

No comment. It was an amazing presentation Congratulations

Great lectures

You had few technology issues....logging on to the site was very easy and came into the program quickly and easily...thank you for a terrific great program.

Thank you so much for this interesting course. I have a deep admiration for all these Doctors and Professionals. May God bless you all!!!!

Great presentations! Connection was a little challenging.

also great topic sexuality after Gyn Ca

difficulty with technology. can't wait for in person to come back!

Better flow of presentations. Multiple episodes of frozen images and refreshing the site

The courses were excellent, some of the lectures were very complex and the short time period allotted to the lecturers did not allow for complete understanding of the data

n/a

N)A

Muchas gracias a los expositores y organizadores, fue excelente.

Future topics - AI and bone density

none

None

I only attended the entire Morning sessions from 7:45 AM through 11:30 AM

Excellent

Thank you very much for invite me

Unfortunately, the flow was not the best. It kept freezing and needed to keep refreshing. It was not conducive to trying to listen as I worked.

excellent conference

great program

The zoom format had terrible interruptions and delays limiting some of the viewing but aside from that the content was very good

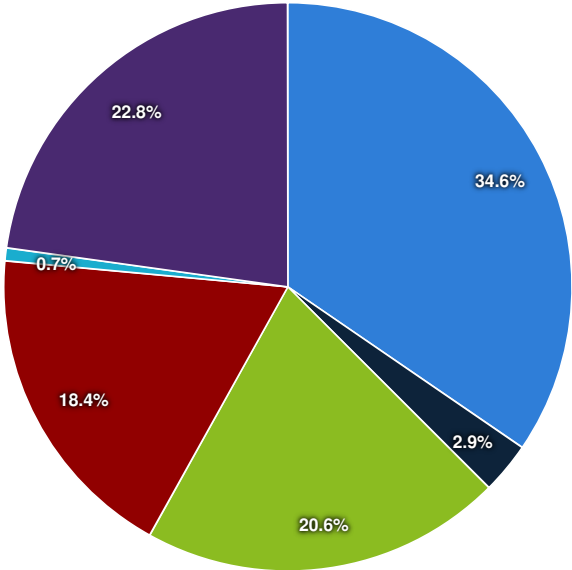
Thanks

N/A

Encountered ongoing IT issues with link and other people placed comments on chat box. Most likely the link or virtual platform wasn't able to manage the high number of participants.

excellend conference

Please select one:

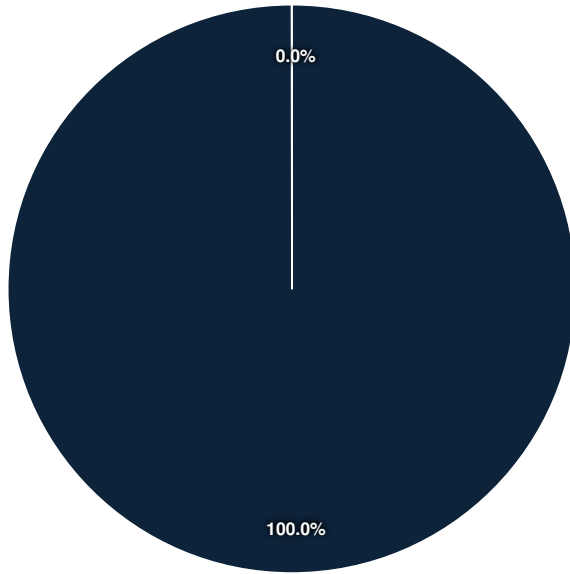


Result details

M.D., D.O.	47
Ph.D/Psy.D	4
ARNP/PA-C	28
R.N.	25
Mental Health Counselor	1
Other...	31 (view)



## Name



### Result details

Left Blank	0
User entered value	136
Average submission length in words (ex blanks)	2.71
Brenda Blomeley	
Luz Baquero	
Janine Smith	
Sabine Larose	
Johnny D. Pallango, BSN, RN, OCN	
Patricia Tapanes Fontao	
Liudmila Camejo Rojas	
Geoffrey James	
Leandra Berrios	
alfred brandon	
Karissa Nazur	
Eric Freling, MD	
Maria Bustillo	
Eric D. Schroeder	
Jennifer Vives	
Irma Rey MD	
Jennifer Navarro	
Nancy Eklund	
VINEETHA BINOY	
Natalie Urbano	
Monique S. Wheatley	
Susan Smith	

mark caruso

LOURDES BLANCO

Ada Caballero

Stella Fernandez

Stephen A Grabelsky, MD

Sandra Cohen

Diana Olivia Naya

Rebekah J Lopez

Josephine Alexandra Previlon

Dr. Tameka Irons

Janet Sanguily-Gonzalez

Zunli Mo

Francine Solomon

Tania Cabiellles ARNP

Lorienne Watson

Montserrat Buia

Laura DeRycke

Lourdes Mireya Manríquez Mejía

Jacqueline Rios

Mary Gwendolyn Elgincolin

Humberto Armando Arteaga

Faith L March

gary michel

Michele D. Watson O.T.R/L

Beatrice Hecker

Troy Gatcliffe

Jennifer Patterson

Rosa Espinosa

Joe Mendoza, Jr.,M.D.,FACEP

Caridad L. Vaclavek, M.D.

Elsa Pestana

Lenore T. Noel

Miri Sinclair

JUAN HERRADA

María Consuelo balvin

Lynn Nusbaum MD

Ashley Belen Lopez

Kathleen M Dumas

Blanca Iris Oyola, MS.ED., OTR/L

Fahed Fayad MD

Khareem Burkli

Alberto Sanchez de Fuentes

Nicole Costa

Sara Rhode

Anaisys Ballesteros

Vanessa Lopez

Maria Esther Jaurrieta

Maria Garcia-Rivera MD

Carole Ann Johnson

CHRISTINE MARGARET JOY ALBAN

Eyglén Lopez

Vincent Ross N. Lirio

Maria Ramirez

Ivo D. Pestana

Tejal Mehta

Ana L Chayeb

Dora Escobedo APRN

Alexander Rakita

Monica Lawrence Villalobos {Monique Lawrence}

Cinthia Bravo

margaret gaub,m.d.

Katja Vignau

Mary Beth Tomaselli, MD

María Elena Vengoechea

Belkys Prado

Oliver Zivanovic, M.D.

Yvonne Maxwell

Walter Mendieta

Ian Nisonson, MD, FACS

Jessica Jacomino Wohl

Dorothy M Hunter

Patricia Ronquillo

Dr U.N. Shagaya

Daniel San Martin

Cristina Castillo

Ingrid D. Blanco

Carlene Campbell Diaz

Luis Eduardo Carias-Torres

Nekeisha Dacres

Rocio Carolina Cortes Pastrana

Johanne Guerrier

Grace M. Leon

Michelle Charmaine Garcia

Luis Arroyo

Ciara Venegas

Giovanina variegas

Daniel Morganstern MD

Roselle Okubo

Leticia Sosa Rivera

Luz Morales

dr. charles vogel

Christina Smith

Claudia Carvajal

Nicholas C. Lambrou

Carina Reyes

SYLVIA VIVES-MONTANO

DEEPA MASRANI

Bobbi Haddix

Sarah Anderson

Thomas Morrissey

Stephany Phang

Tamara Kimball

Idalis Otero

a. corella, MD

Erika Nager

Carolanne Rincon

Maria Pilar Martinez

Martha Isabel Cotes Mestre

Jody Murray

Ana Botero

Gisela L Pereira

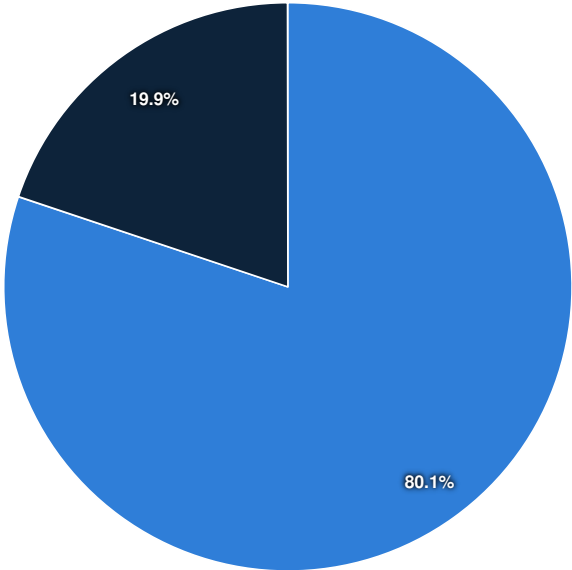
Ahmad Taha

Cristhian J. Alegria

NADIA SRUR RIVERO

robert derhagopian

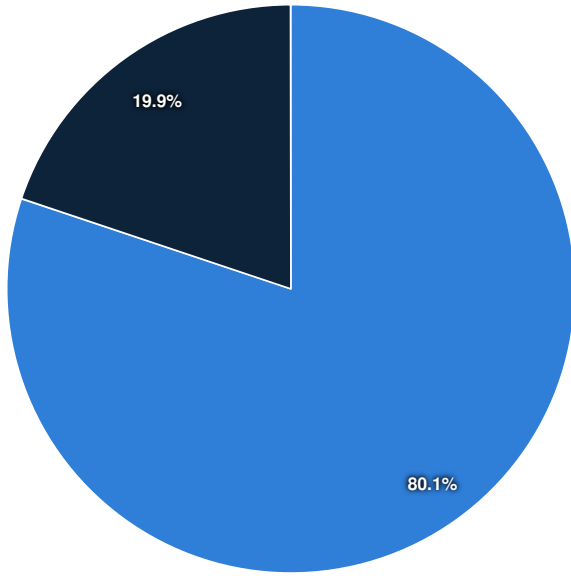
**Attestation**



**Result details**

I attest that I have participated in this live virtual symposium in its entirety.	109
I attest that I have participated in _____ hours of instruction during this live webinar.	27

# hours attestation



## Result details

Left Blank	109
User entered value	27
Average submission length in words (ex blanks)	0.44
8 hrs	
6	
7	
5	
8	
3.5	
4	

2

6 hours

all

7.5

5hours

5

4

5

5

3.75 hours (Entire morning- 7:45 AM-11:30 AM)

5

4

4 hours

2

3

3 hours

1

4

3

0

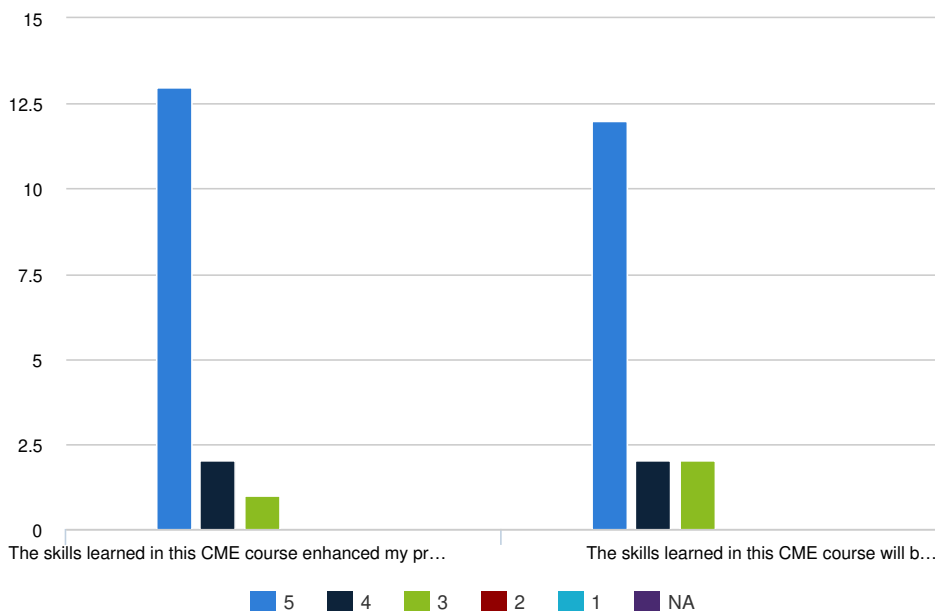
6 hours.	



## MCVI Grand Rounds Evaluation - May 5, 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.

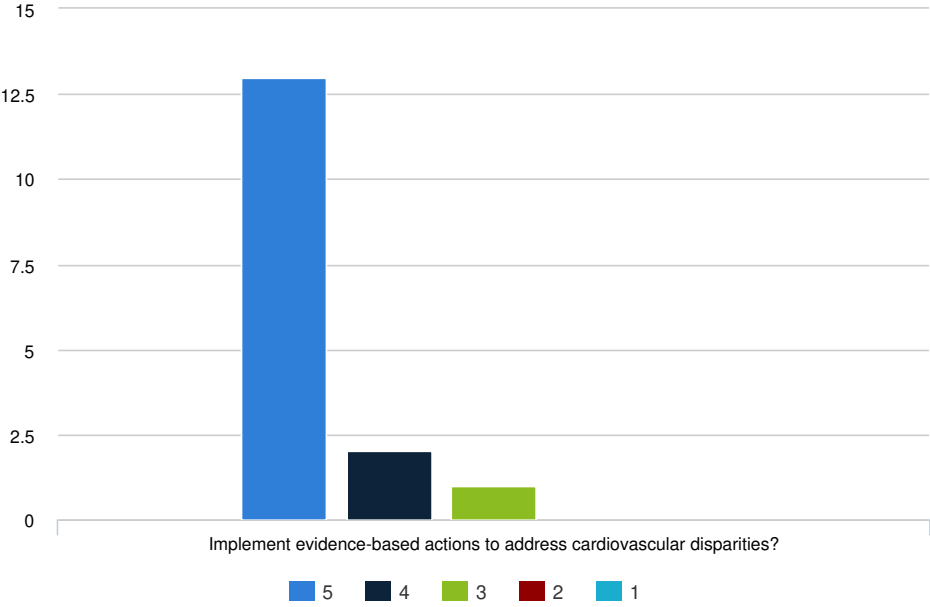
**Please score your agreement with or assessment of the following questions and statements by rating on a scale of 1 to 5, with 5 representing the highest level of satisfaction or agreement.**



Result details

	5	4	3	2	1	NA
The skills learned in this CME course enhanced my professional competence.	13	2	1	0	0	0
The skills learned in this CME course will be applied in the treatment of my patients	12	2	2	0	0	0

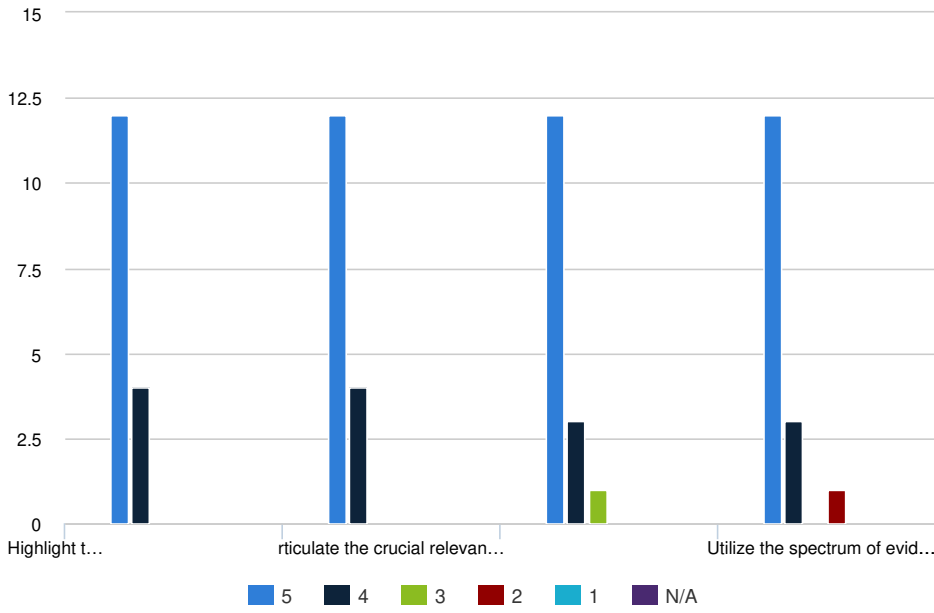
**How confident are you in your ability to:**



**Result details**

	<b>5</b>	<b>4</b>	<b>3</b>	<b>2</b>	<b>1</b>
Implement evidence-based actions to address cardiovascular disparities?	13	2	1	0	0

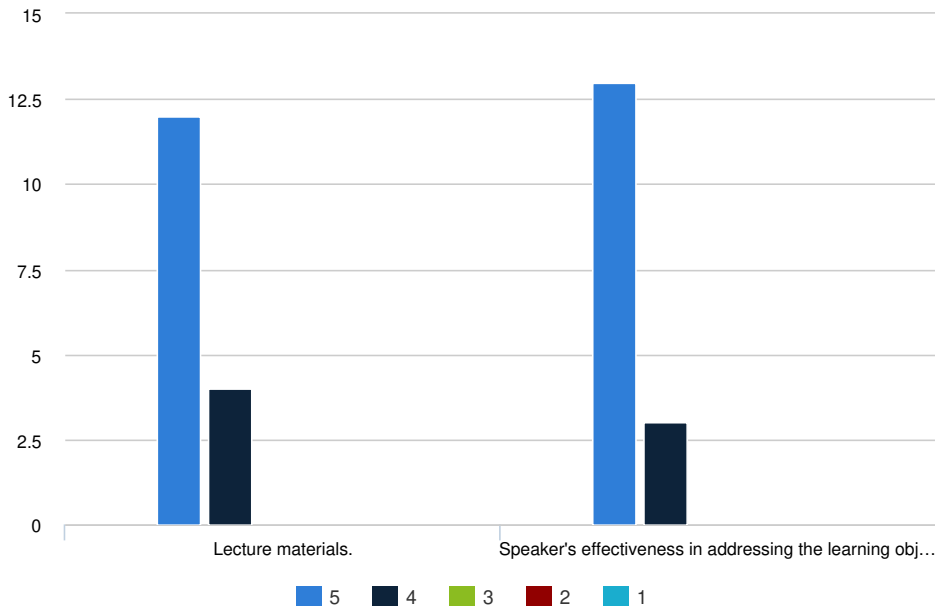
**As a result of attending this conference, to what extent do you agree that you will be better able to: (rate the objectives)**



**Result details**

	5	4	3	2	1	N/A
Highlight the magnitude of cardiovascular disparities and their recent trends.	12	4	0	0	0	0
Articulate the crucial relevance of social and environmental determinants of health.	12	4	0	0	0	0
Utilize the spectrum of evidence-based actions to address cardiovascular disparities.	12	3	1	0	0	0
Address challenges and opportunities for disparities reduction in clinical settings.	12	3	0	1	0	0

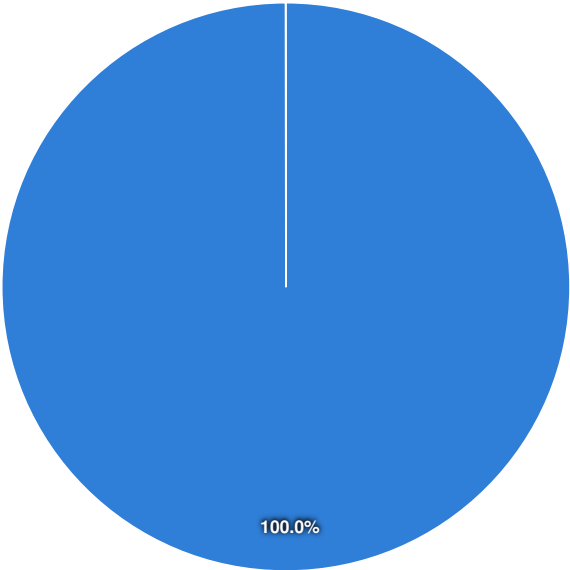
## How satisfied or dissatisfied were you with the following conference content?



### Result details

	5	4	3	2	1
Lecture materials.	12	4	0	0	0
Speaker's effectiveness in addressing the learning objectives.	13	3	0	0	0

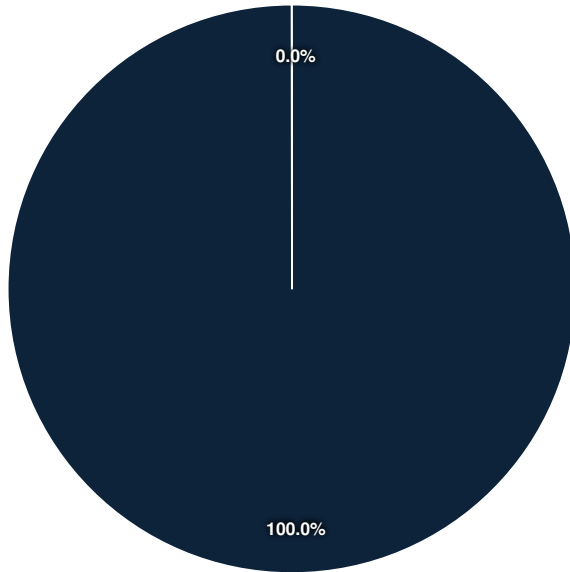
**Was this course fair, balanced and without commercial bias?**



Result details

Yes	16
-----	----

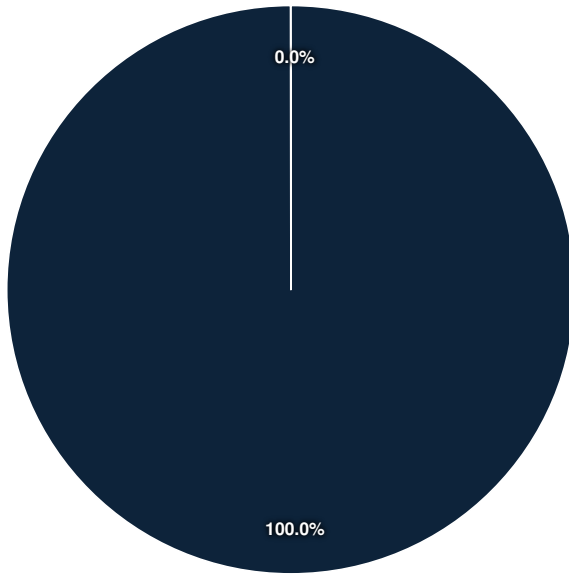
**What, if any, new skills/strategies will you apply in your clinical practice?**



Result details

Left Blank	0
User entered value	16
Average submission length in words (ex blanks)	6.00
Greater awareness and strategies to act now to improve disparities in care provided	
Consider socio-economic level of my patients more than I have in the past. Think of what meds they can afford & not use the newer drugs if less expensive ones will work.	
Be aware of disparities	
Use registries	
N/A	
Bioetica	
Will be more vigilant reference racial disparity in diagnosis of cardiovascular disease.	
more awareness to diparities	
None	
N/A	
none	
N/a	
Expanding my eveluation of dietary and social issues affecting health	
More education to low social economic patients	
n/a	
Revise guidelines	

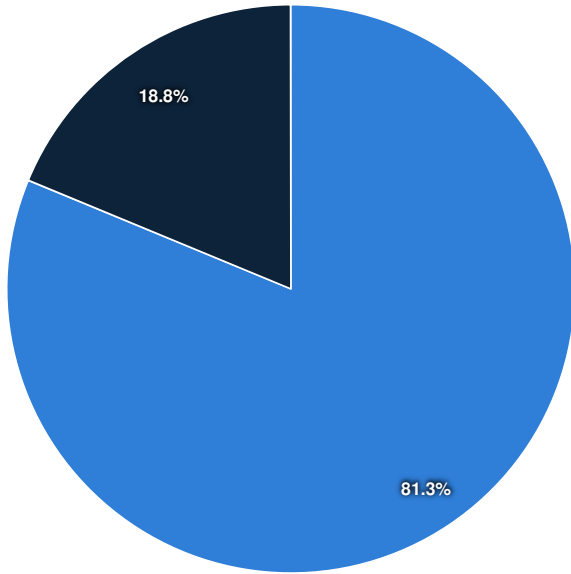
**If you do not plan to implement any new skills/strategies in your clinical practice, what is keeping you from doing so?**



Result details

Left Blank	0
User entered value	16
Average submission length in words (ex blanks)	2.50
none	
Nothing is keeping me from implementing skills/strategies.	
NA	
None	
N/A	
Si planeo implementar nuevas habilidades	
Insurance constraints	
yes	
Does not apply to my practice	
N/A	
out of scope	
N/a	
Nothing	
No barrier	
no	
Time constraint	

Please provide any additional comments or suggestions.

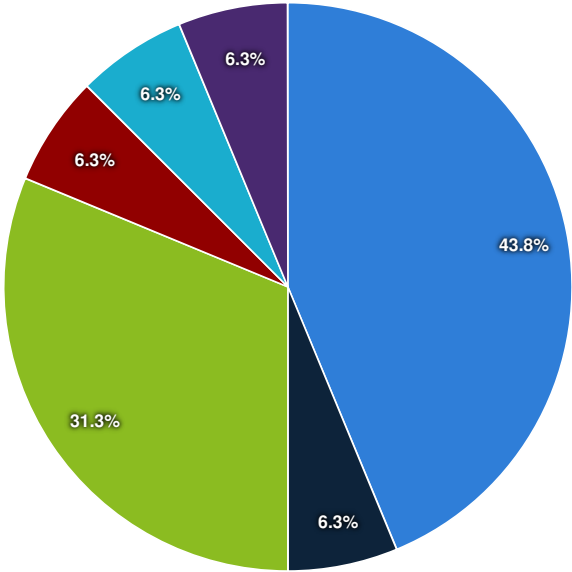


Result details

Left Blank	13
User entered value	3
Average submission length in words (ex blanks)	5.33
Disparities is an important topic. Please provide more CMEs with actionable steps to improve.	
NA	
None	



Please select one:



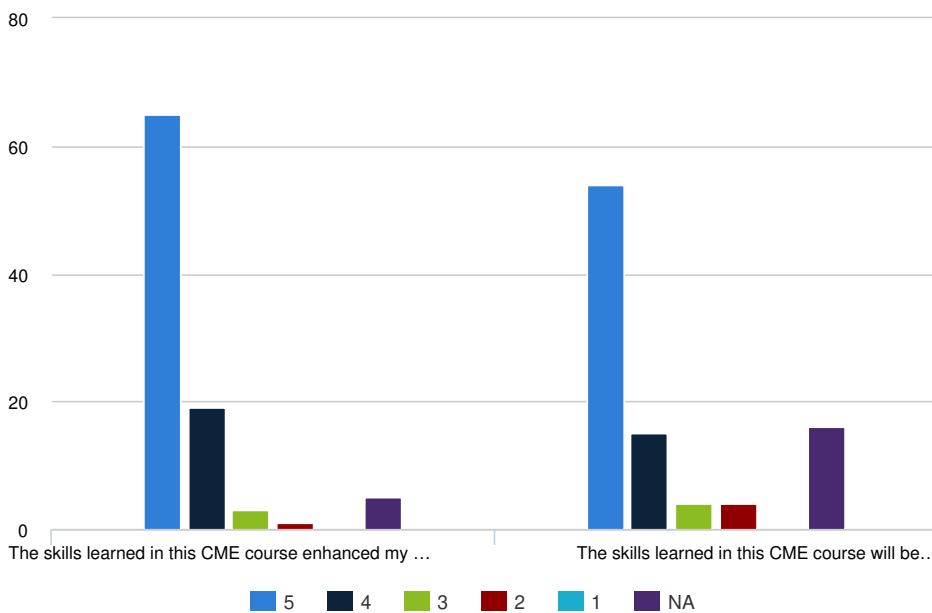
Result details

M.D., D.O.	7
ARNP/PA-C	1
R.N.	5
Sonographer	1
Pharmacist	1
Other...	1 (view)

# Summit of the Americas Evaluation

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.

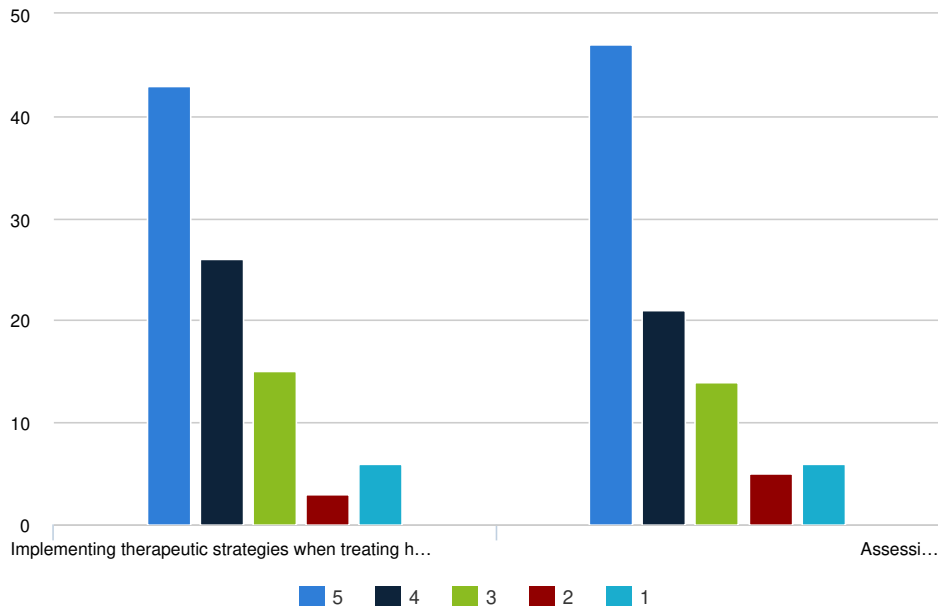
**Please score your agreement with or assessment of the following questions and statements by rating on a scale of 1 to 5, with 5 representing the highest level of satisfaction or agreement.**



Result details

	5	4	3	2	1	NA
The skills learned in this CME course enhanced my professional competence.	65	19	3	1	0	5
The skills learned in this CME course will be applied in the treatment of my patients	54	15	4	4	0	16

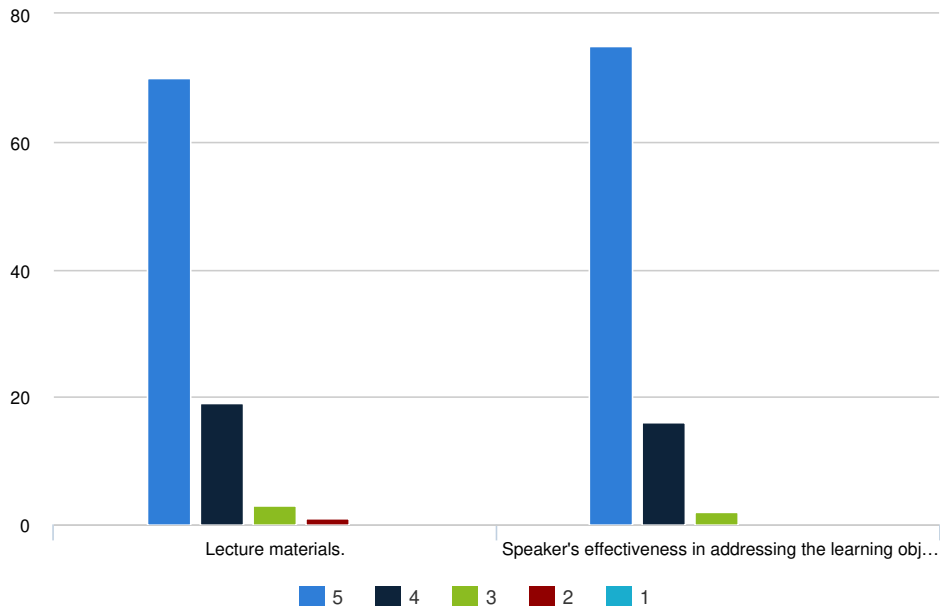
## How confident are you in your ability to:



### Result details

	5	4	3	2	1
Implementing therapeutic strategies when treating hematologic malignancies.	43	26	15	3	6
Assessing your ability to review the role and timing of hematopoietic cell transplantation and potential combinations of immunotherapeutic treatment options.	47	21	14	5	6

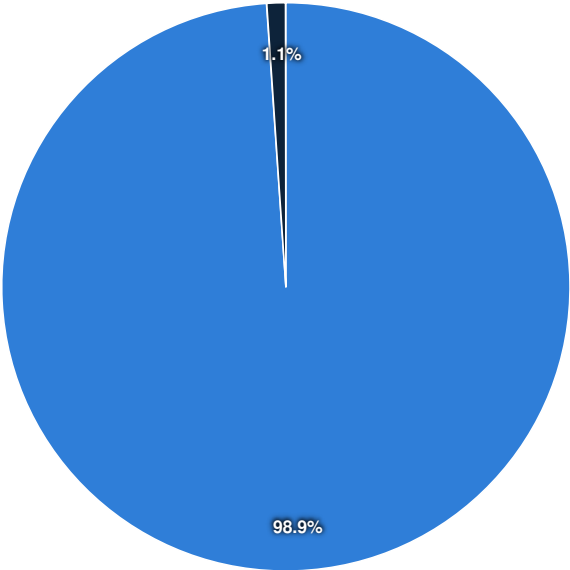
## How satisfied or dissatisfied were you with the following conference content?



### Result details

	5	4	3	2	1
Lecture materials.	70	19	3	1	0
Speaker's effectiveness in addressing the learning objectives.	75	16	2	0	0

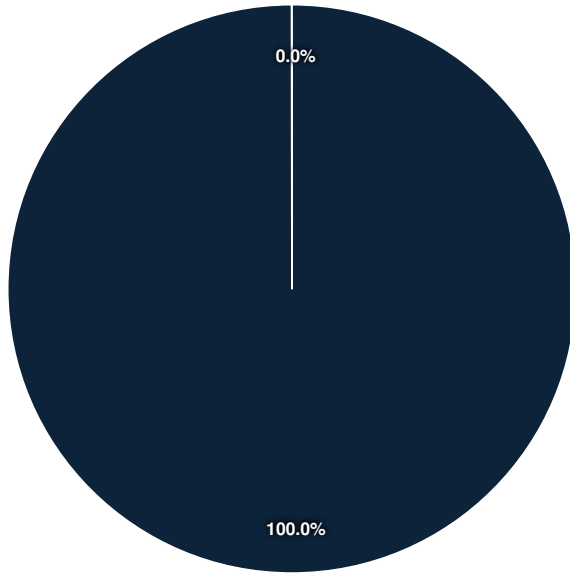
**Was this course fair, balanced and without commercial bias?**



**Result details**

Yes	92
No	1

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



**Result details**

Left Blank	0
User entered value	93
Average submission length in words (ex blanks)	6.98
Change in Multiple Myeloma managemen	
No	
I am still an student, I will keep searching about new innovating therapeutics methods in order to keep expanding my knowledge within this field.	
continue to assess the appropriateness of CART/ HSCT	
N/A	
N/A	
.	
great speakers and topic	
n/a	
This lecture has helped me by keeping me up to date with CAR-T therapy outcomes which will help me anticipate possible treatment options my patient will most likely be receiving.	
I work in clinical research and like to stay up to date. This conference was fantastic. Thank you so much!	
none	
CAR NK CELLS	
I am retired	
N/A	
the latest novel treatments	
other	
N/A	
may be	
Excellent. Will implement in clinical practice and continue learning more.	
Management of refractory myeloma	

.

new treatments and research to be implemented

Great work

I would apply the skill of confidence and knowledgeability as I saw demonstrated by the speakers today. I feel that this would aid in my pharmaceutical practices by increasing the quality of my efforts.

N/A

Yes I get new strategies to apply in my practice

New regimens for all

.

N/A

n/a

Better overall understanding of patient management and sequencing

a

none

N/A

Unfortunately just to enhance my knowledge

N/A

N/A

none

none

Look for more studies on CAR NK studies

See the different Immunotherapeutic treatment Options in mu setting.

N/A

protocol builds

more mindful in treating patients undergoing these therapies

Consider NK cell approach for refractory lymphoid malignancies

Not applicable. I'm retired.

Improved understanding of immunotherapies and their current role in treating various hematologic malignancies.

n/a

MM therapeutic options and strategies.

..

Updates with AML and ALL therapies.

n/a

I will ensure as much as I can and will implement new strategies in the care of all patients my patients

An improved knowledge base for our Multidisciplinary Clinic presentations/discussions.

CART

Evaluate therapeutic options.

N/a

As a general internist, I am not directly initiating cancer treatments, but the content of the symposium was especially valuable in providing information/guidance that allows me to understand the treatment options better for my patients with hematologic malignancies.

when referring to practice please add another N/A...I think the knowledge is outstanding and will enhance my knowledge.

I have retired

Retiring

.

This is outside my scope of practice.

Non clinical

Close monitoring of patients' vital signs through out treatment and modification of patient's rehab intervention to each individual patients' needs and/or tolerance to treatments.

Great information on CAR (T/NK) therapy and current research data; will definitely incorporate this information

Better understanding of the tx options

better use of chemotherapy free treatment in older patients with b-all

handling patient medication

Multiple myeloma new treatments.

I will be able to implement a new strategies in my practice

Any

Aplicare los nuevos conocimiento en uso profesional y personal.

Preventive skills through lifestyle modification, early detection, and referral to oncology.

n/a

Improved BMT eval and considerations for CART

ALL management

Learning about the new ways to sequence MM drugs

good evidence in support of new treatment strategies

the management of the treatment depending on age of px.

Changing the therapeutic regimen of an oncology patient that it's not responding , it's really a difficult process , but thanks to this new research we can improve the life expectancy of ours patients

new tx options for patients

Need to have slides made to download

I am not a physician but appreciate staying up to date with the knowledge provided.

Knowing how to educate my patients

No cell info

new therapies

.

Now I'm aware of treatment options available

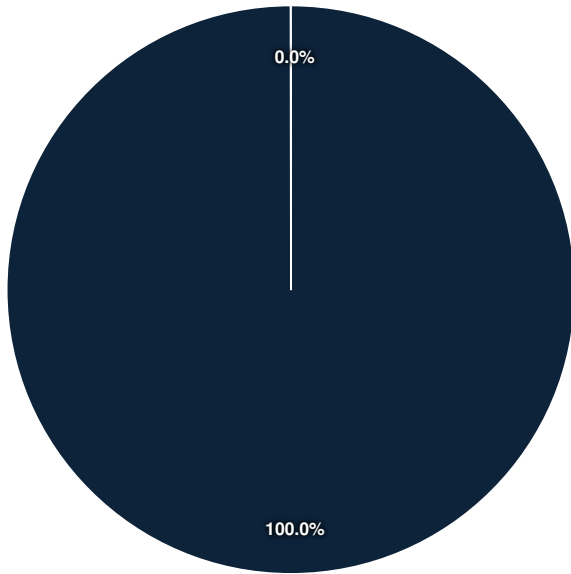
indications of CAR T cells

Refer patients immediately to a top hematology oncology facility to receive optimum breakthrough therapies

Immunotherapy is an amazing treatment that if we use it we can help patients to find the cure.



**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	93
Average submission length in words (ex blanks)	4.35
Costing and availability in my region	
No	
I am still a medical student	
n/a	
Profesional improve	
Profesional improve	
.	
hoping next year it will be live	
n/a	
N/A	
I am work in clinical trials. This conference had improved my knowledge base of the disease.	
not my clinical practice	
car nk cells	
I am retired.	
N/A	
none	
other	
N/A	
nothing	
Na	
None	

.

n/a

amazing team work

The majority of what I learned today was medical in nature and would be difficult to apply to my role in the pharmaceutical industry.

N/A

Well mainly the high cost for treat cancer in general

None

.

N/A

n/a

Do not treat patients directly

Na

I am a student

Retail pharmacist

Not in my field of practice

N/A

Retired

i am retired

i am retired

I plan to implement what I have learned.

N/A

N/A

resources

nothing

N/A

I am a retired physician.

N/A.

a very thorough information which is a good addition to my knowledge as a pharmacy tech

n/a

..

Plan to implement learning.

n/a

i will implement skills and strategies

N/A

N/A.

Patient considerations.

N/A

Refer cancer patients to heme/onc specialists for active treatment.

I do not have a practice; however, the knowledge set forth by the speakers is valuable to my own personal knowledge...so very interesting....treatments have really become so much more with the immunotherapies..

I have retired

Retiring

This is outside my scope of practice.

Non clinical

N/A - my role as an Occupational Therapist is the rehabilitation of the patient in terms of his ADLs, his functional mobility and his safety while maintaining vital signs within normal readings.

Evolving data is still useful, even when evolving

Ñ/a

n/a

not applicable in office setting

None

I will be able to

Cell stem

Igual existen directrices establecidas, aunque compartire el enlace a mis colegas.

I am not an oncologist though interested in widening my knowledge in oncology

n/a

Deferring to Dr. Ruiz

NA

none

n/a

First, I need to finish my residency program.

I will implement this new strategies when i consider it's necessary.

N/a

More questions still re role CART and transplant

I am not a physician

N/A

N a

financial aspects

.

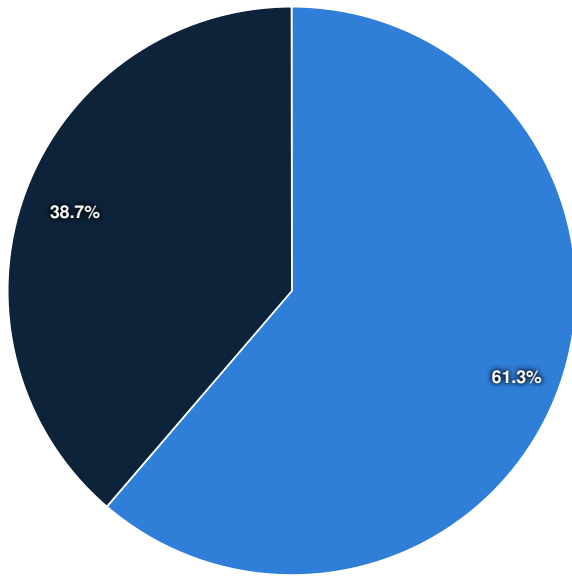
N/A

insurance barrier

Nothing

As an RN I don't have so much autonomy of making changes.

Please provide any additional comments or suggestions.



Result details

Left Blank	57
User entered value	36
Average submission length in words (ex blanks)	10.14
Excellent, really loved this symposium.	
.	
Nothing	
Please fix connection. I had to restart my video stream multiple times.	
One of the presenters had issues with the microphone, other than that it was a great conference.	
Excellent program.	
I enjoyed this update in CAR-T therapy as well as the info on the management of these malignancies.	
.	
Great seminar, this is the first I've attended and I really enjoyed it.	
For me nothing more thank you for invite me.	
Thank you! Would love a heme malignancy symposium/conference geared towards nurse practitioners and physician assistants!	
Na	

None

Excellent over all presentations

great program, cant wait for the live program next year!

Fantastic session

Excellent!

Very good presentation and information shared today.

excelent lectures

This symposium was very informative and well structure. Special thank you to all presenters.

The presentation was very detailed and informative

Learned a great deal from the presentations. Especially excited at the implications of the studies presented by the last presenters, including Dr. Sackstein's study strategies to augment tissue delivery using fucosylated CAT-T cells, and the possibility that this can similarly be done with natural killer cells to also augment target cell treatments with decreased toxicity and increased effectiveness. Enjoyed learning about updates in multiple myeloma and lymphoma treatments as well as transplantation updates.

the information provided was outstanding... I really enjoyed all speakers....there seemed to be some technical difficulty with Dr. Soiffer, the voice was sometimes was not heard....however the rest were great.... I found it very easy to log into the program and very user friendly...thank you

This was an excellent Symposium!

Very good.

Not

Gracias a los expositores y organizadores.

While I praise research efforts to find better treatments for cancers, oncologists need to stress more on preventive aspects of cancer and early detection.

n/a

I will really recommend talk about more focusely on certain types of cancer

Myeloma scope extensive but very complete Too rapid Would benefit by reviewing slides

The slides were difficult to ready I don't think they were formatted correctly.

Hand outs to download

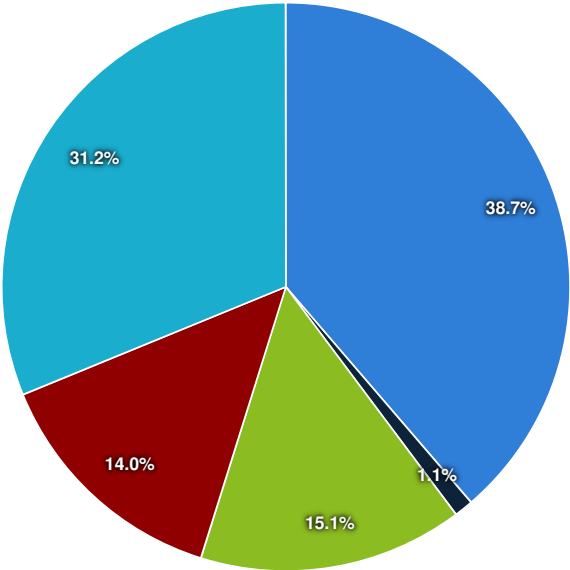
I appreciated the fact that you could pause and rewind the presentation through the whole day.

none

N/A



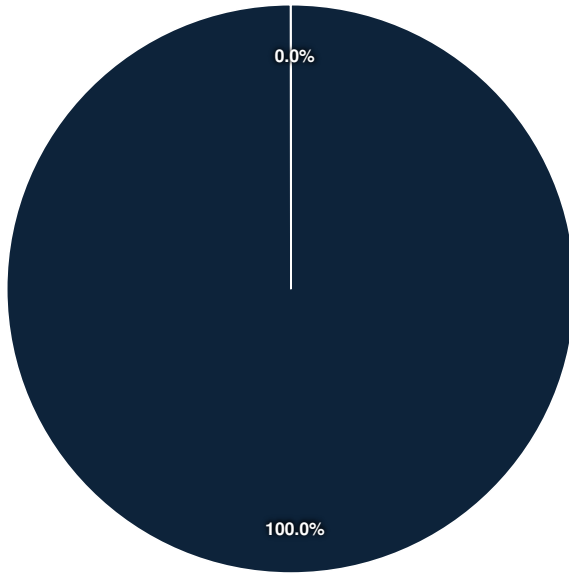
Please select one:



Result details

M.D., D.O.	36
Ph.D/Psy.D	1
ARNP/PA-C	14
R.N.	13
Other...	29 (view)

## Name



### Result details

Left Blank	0
User entered value	93
Average submission length in words (ex blanks)	2.74
Cheryl Alexis	
Emily Valdes	
Luis Armando Almodovar Ramos	
Katrina Piedra	
Aurelina	
Aurelina	
Lissette Gomez-Rios	
Miri Sinclair	
bethany cruz	
Ingemar Enrique Latino	
Yazmin Rodriguez	
Warren R Janowitz	
Fahed Fayad	
Wayne F. Bizer, DO	
John J Przygoda MD	
Marina Fooks	
Andreana morency	
C David Claghorn	
doured daghistani	
Patricia Tapanes Fontao	
Lyle Feinstein	
Stacey Berrios PA-C	



Yessenia Rojas

Maggie Varena

Christian Kirklon Farquharson

Geoffrey N. James, MD

Luis Eduardo Carias-Torres

Seettal Patel

Alexandria Diego

Mary Heise

Jessica Pappanikou

Ken Kumer PharmD

Jacqueline darlington

Carolina Alonso

Chelsea Shipman

Omar M. Salazar, MD

Miguel Andres Delgadillo

Miguel E .Rodriguez

Margaret L. Gaub, M.D.

Margaret L. Gaub, M.D.

Horace Laryea

Jose A Nazario

Michelle Mas Kildare

Jessica Unzaga

Barry M. Crown, Ph.D.

Shirley Ann Riggs, M.D.

Caridad L. Vaclavek M.D.

Christopher Hayhurst

Maricar Bravo

Alaina Walcott

Maria Ramirez

Orfirio Sanchez

walter mendieta

BRIDGETTE CHAMBERS

Dr Luciano M DiCarlo

Josephine A. Previlon

Jules G. Minkes D.O.

Princess Morgan

Amalia M. Landa-Galindez MD

Kathleen M. Dumas, R.N.

Lenore T. Noel

James R. Fletes MD

Jessica Wohl

LaToya Nesbeth

Cristina Castillo

Liudmila Camejo Rojas

Laura Hedetniemi

Alexander Rakita

Talia Zahra

Christine Margaret Joy Alban

Yelitza Silva

Lourdes Mireya Manríquez Mejía

Santiago Ramírez Castro

Dra.Monica Lawrence Villalobos

Michael U.N. Ozuomba

Sharmeen Roy

Jannelle Vicens

Tiba B Al Sagheer

George Nahas

Leonette Kemp

Gabriela Garcia Segura

Sandogil Villegas

Monica Tadros

P citron

Jennifer Paulson

Ana Martin

Eric Zetka

Harold Alvarez

Loren Mckay

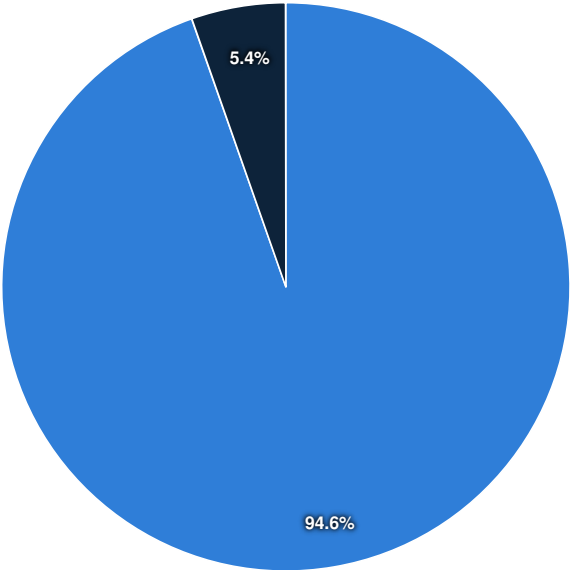
Rajwant Uppal

Tarek Ben Othman

Christopher S.Virtue, M.D.

Sandra Sepulveda

**Attestation**



**Result details**

I attest that I have participated in this live virtual symposium in its entirety.	88
I attest that I have participated in _____ hours of instruction during this live webinar.	5



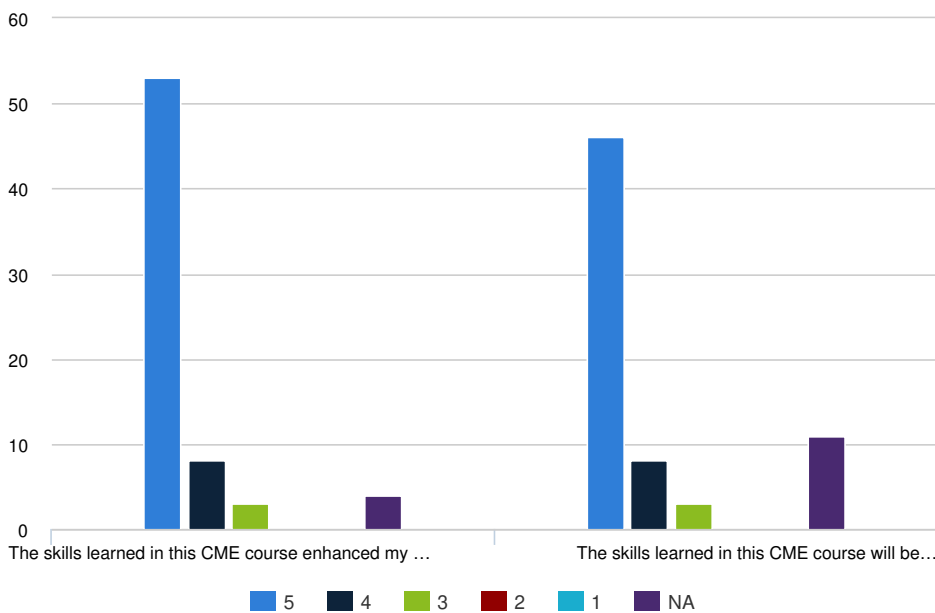
5

3

## Pepe Alvarez Evaluation - May 18, 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.

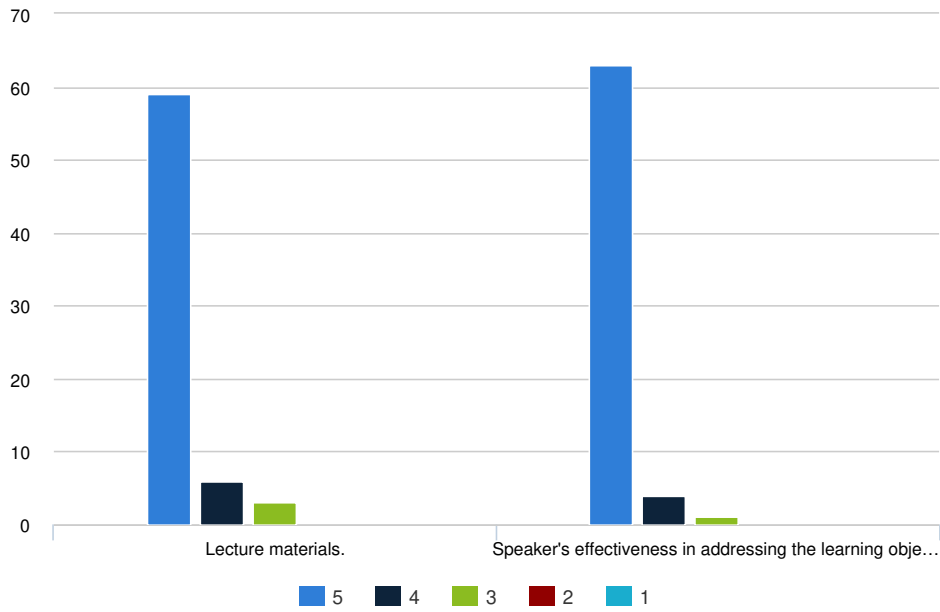
**Please score your agreement with or assessment of the following questions and statements by rating on a scale of 1 to 5, with 5 representing the highest level of satisfaction or agreement.**



Result details

	5	4	3	2	1	NA
The skills learned in this CME course enhanced my professional competence.	53	8	3	0	0	4
The skills learned in this CME course will be applied in the treatment of my patients	46	8	3	0	0	11

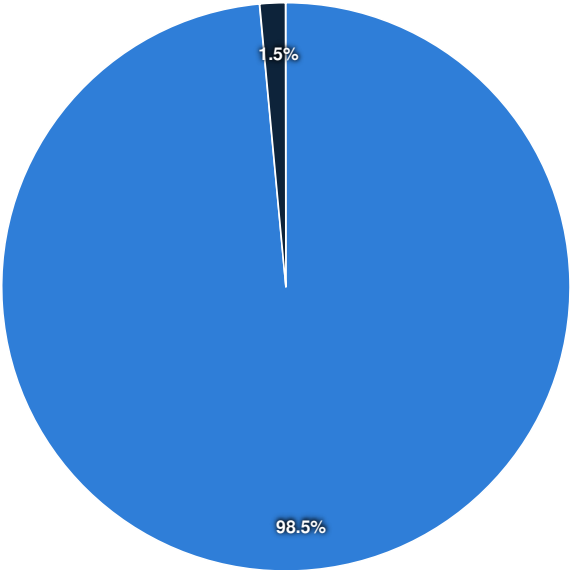
## How satisfied or dissatisfied were you with the following conference content?



### Result details

	5	4	3	2	1
Lecture materials.	59	6	3	0	0
Speaker's effectiveness in addressing the learning objective	63	4	1	0	0

**Was this course fair, balanced and without commercial bias?**

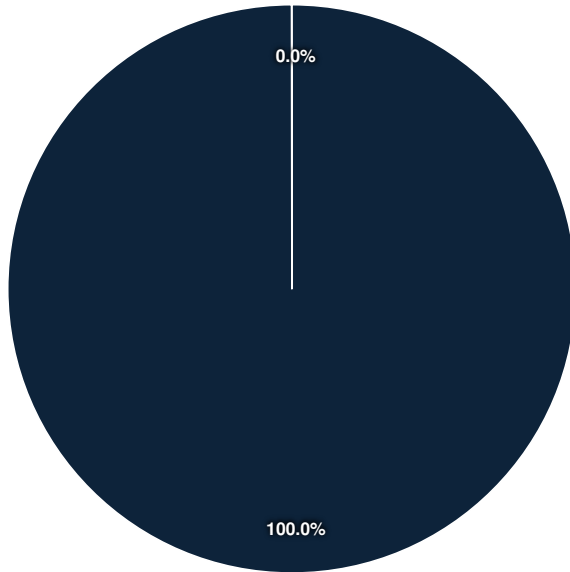


Result details

Yes	67
No	1



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



Result details

Left Blank	0
User entered value	68
Average submission length in words (ex blanks)	6.47
interventional management of thrombosis	
management of VTE	
consider additional therapies for dvt	
none - retired	
Great info, well organized and nicely presented clinical information, will apply info as applicable	
Referring DVT patients for interventions early on to prevent post DVT complications.	
Nothing new	
Better risk stratification for pulmonary embolism	
using contrast initially to determine vascular deformities. Refer to specialist.	
More precise consideration in treatment of patients with DVT and PE.	
N/A	
Consider implementing tools that I have not used before to decrease stress on this burden in caval and iliac DVT.	
Preventive measures to diagnose early DVT	
Everything learned was important and helpful to apply during pt treatment	
More aggressive and involve a multidisciplinary approach	
N/A	
Better endovascular therapies	
Aplicar los conocimientos	
yes	
none	
More aggressive duplex monitoring of calf vein dvt's	
N/A	

na

Manejo del paciente con esta complicación

NA

Evaluation of the pop veins .

It will help me with invasive procedures

N/A

Educated staff and patients

assessment and implementation

None

Evaluation of DVT and treatment options

N/A

Patient education

Knowledge of new data on RX of DVT's and PE's, and increasing success of interventional radiological procedures being used. Helpful to me in my teaching assignments

geared towards interventional personnel. none at the present time.

N/A

As an Occupational Therapist I can always maintain close monitoring of patients vital signs while performing their therapeutic interventions, and modify their treatment protocols to their individual needs and challenges.

Debulking of massive PE it's an important life saving option in treatment

n/a

When to use tools beyond anticoagulation

Use guidelines

More aggressive IVR approach to DVT management

new troponin test

Get patient up and walking as soon as cleared by Dr

Improvement in assessment and treatment for DVT

All advise

Continue to treat DVT/PE patients.

Judgement with aggressive interventional Tx

..

Yes, especially with the increase in thrombotic events that have emerged from COVID.

more aggressive approach to iliofemoral dvt

Not applicable. I attended the course for an update on current surgical procedures.

Not applicable. I am a retired physician.

I will definitely refer suspected cases of DVT to hospitals that are equipped with right equipment and physicians able to deal with DVT/Pulmonary Embolism and its complications

NA

I have retired.

More aggressive approach in the management of DVT and PE

None

aware of DVT in podiatry

diagnose DVT

retired

n/a

N/A

Better understanding of the treatment options

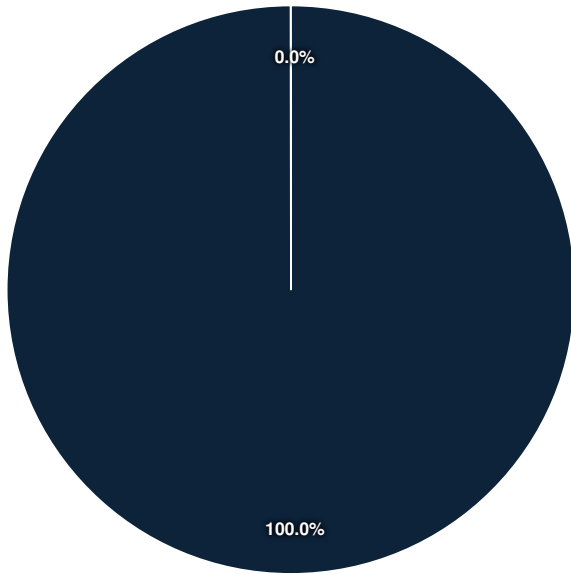
Knowing the long term effects of COVID on Vascular health.

N/A

Triaging patients efficiently who present with an acute PE between invasive and medical therapy.

Aware of newer entities in treatment of patients.

**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	68
Average submission length in words (ex blanks)	3.13
I am not an interventional physician, nonetheless the lecture was very interesting	
none	
na	
retired	
Will surely implement	
N/A	
I already perform such procedures	
NA	
N/A	
N/a	
N/A	
NA	
None	
N/a	
will do	
N/A	
NA	
Estan directrices	
NA	
no new information presented	
None	

Na

La falta de medios diagnósticos

Na

I do

N/a

N/A

N/a

agree

Lecture was directed more to vascular interventionalists

N/a

Retired

None

Retired

excellent material to learn from, however, interventional part not practiced in the noninvasive lab.

N/A

N/A

Early w/u for possible malignancy in unexplained DVTd

n/a

Not at present nothing

Use guidelines for better assessing patients.

Nothing

na

Get patient walking and gentle ex's as soon as cleared by Dr

No barriers

None

Not applicable

Nothing

..

N/A

nothing

I am an Occupational Therapist.

I am a retired physician.

I do plan to change my practice pattern

NA

I have retired.

Nothing

None

out of scope

parts that were out of scope

for general knowledge and to answers possible inquiries from friends, etc.

n/a

N/A

Not my area of expertise

Not my area of expertise.

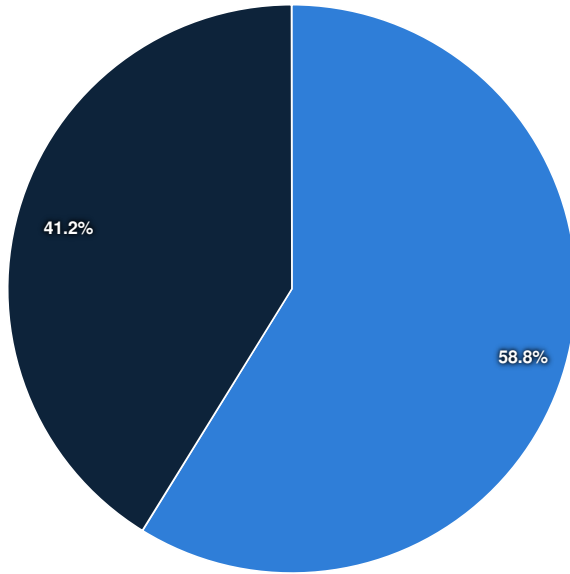
Presentation was informational as it doesn't apply to the NICU population

N/A

No barriers to implementation

N/A

Please provide any additional comments or suggestions.



Result details

Left Blank	40
User entered value	28
Average submission length in words (ex blanks)	4.11
Good speaker	
na	
He was an excellent speaker!	
Outstanding informative webinar.	
N/A	
Continue with this great teaching lecture. Thanks	
NA	
Gracias al expositor y organizaciones	
Good	
did not seem to be up to date.....more of a 'this is what we do at our institution' talk...disappointing	
Enjoyed very much!	
Great lecture ! Thank you	
None	
N/a	
None	

Excellent content

n/a

Such a lovely tribute.

Extraordinary conference

Continue the good work. I enjoy this seminar every year.

Excellent conference!

Excellent lecture provided by talented physician

Excellent presentation! Thank you!

Excellent lecture and thorough review of the literature

n//a

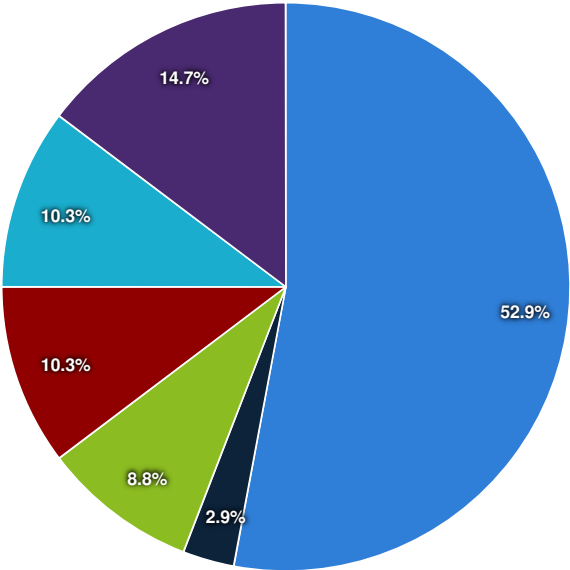
Lecture sometimes got too technical for my level of interest.

Speaker excellent.

N/A



Please select one:



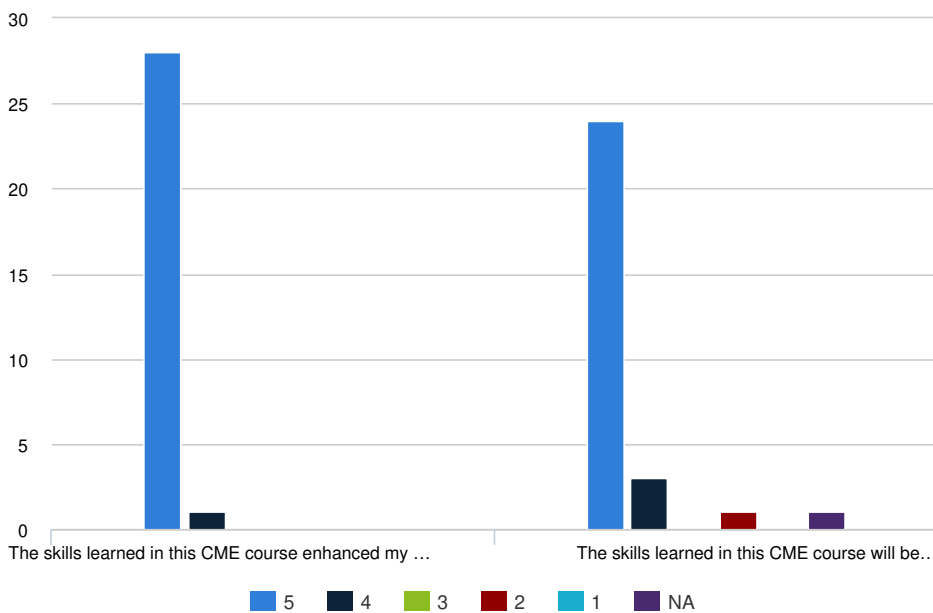
Result details

M.D., D.O.	36
Ph.D/Psy.D	2
ARNP/PA-C	6
R.N.	7
Occupational Therapist	7
Other...	10 (view)

## MCVI Fellows Presentations Evaluation - June 2, 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.

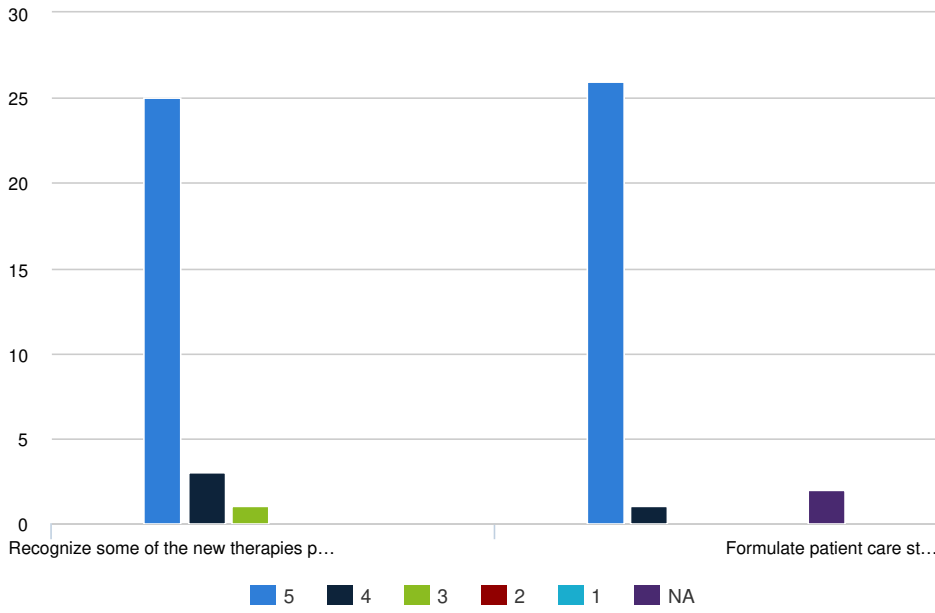
**Please score your agreement with or assessment of the following questions and statements by rating on a scale of 1 to 5, with 5 representing the highest level of satisfaction or agreement.**



Result details

	5	4	3	2	1	NA
The skills learned in this CME course enhanced my professional competence.	28	1	0	0	0	0
The skills learned in this CME course will be applied in the treatment of my patients.	24	3	0	1	0	1

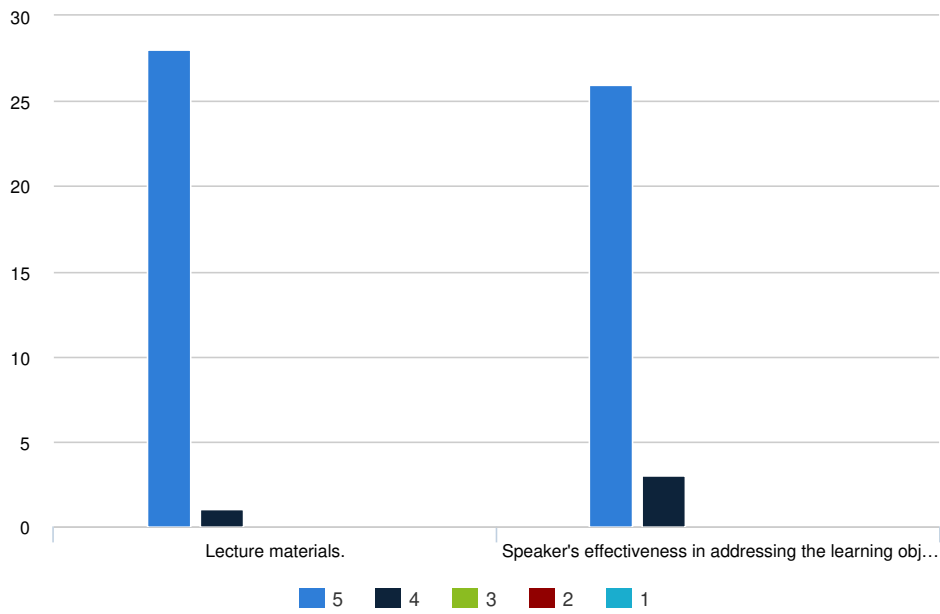
**As a result of attending this conference, to what extent do you agree that you will be better able to: (rate the objectives)**



**Result details**

	<b>5</b>	<b>4</b>	<b>3</b>	<b>2</b>	<b>1</b>	<b>NA</b>
Recognize some of the new therapies poised to impact the immediate future of interventional medicine.	25	3	1	0	0	0
Formulate patient care strategies to properly identify and treat disease related to vascular and endovascular pathologies.	26	1	0	0	0	2

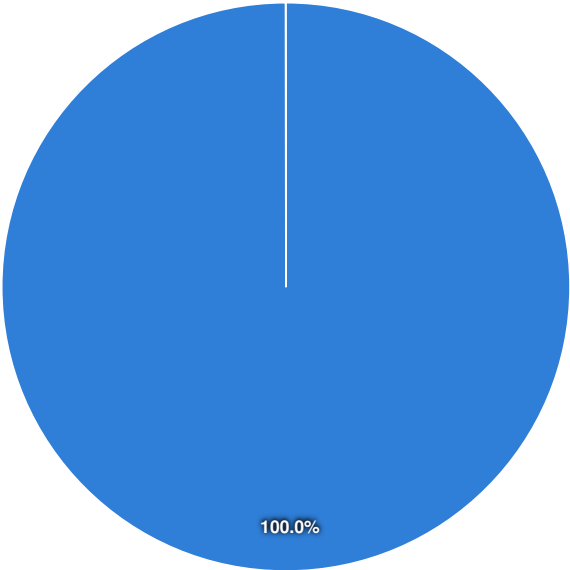
## How satisfied or dissatisfied were you with the following conference content?



### Result details

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

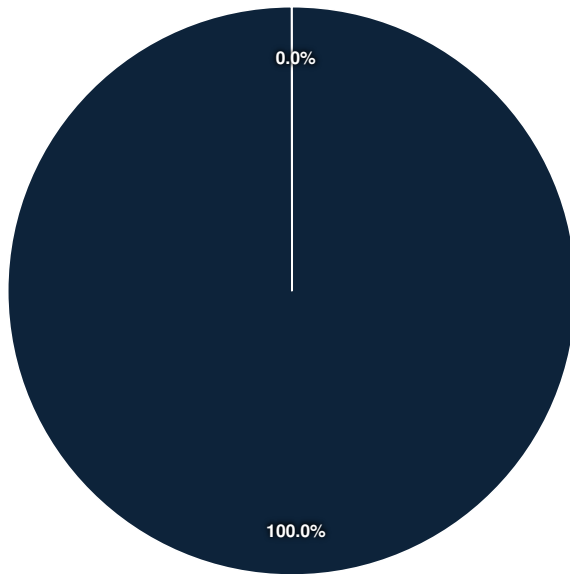
**Was this course fair, balanced and without commercial bias?**



Result details

Yes	29
-----	----

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



Result details

Left Blank	0
User entered value	29
Average submission length in words (ex blanks)	7.72
N/A	
N/A	
.	
Same skills already used.	
New strategies for treating calcified CFA lesions	
CEUS	
N/a	
N/a	
It helped me learn about the different options of treatment plans for my patients	
It helped me learn about the different options of treatment plans for my patients	
Contrast enhanced ultrasound as diagnostic imaging for endoleaks as alternative to CT with iodine based contrast.	
better understanding of IRE	
Greater use of thrombectomy	
None	
I will applied skills as necessary.	
Will consider proper referral for thrombectomy in selected pt with PE	
As a nurse once the MD is willing to apply new skills. For better outcome I will support him in providing the necessary nursing skills. For example large bore continuous aspiration throboectomy for PE is more successful and time consuming.	
I now have better knowledge of imaging options to help diagnose and treat vascular disease.	
Patient education	
Consider new treatment modalities for patients with cerebral neoplasms.	

New treatment modalities for my patients.

Consider new diagnostic and treatment modalities for patients.

Consider new treatment modalities for patients.

Learning the interventional technology used in endovascular procedures.

As an Occupational Therapist I can always maintain close monitoring of patients vital signs while performing their therapeutic interventions, and modify their treatment protocols to their individual needs and challenges.

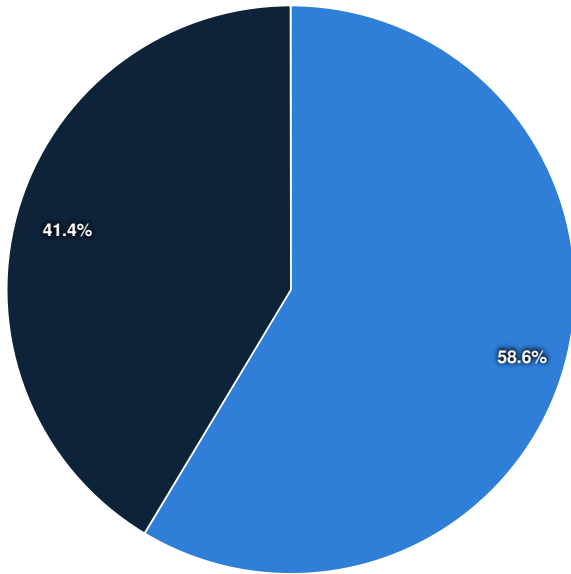
U/S FOR ENDOLEAK

Will apply information as applicable

.

None

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

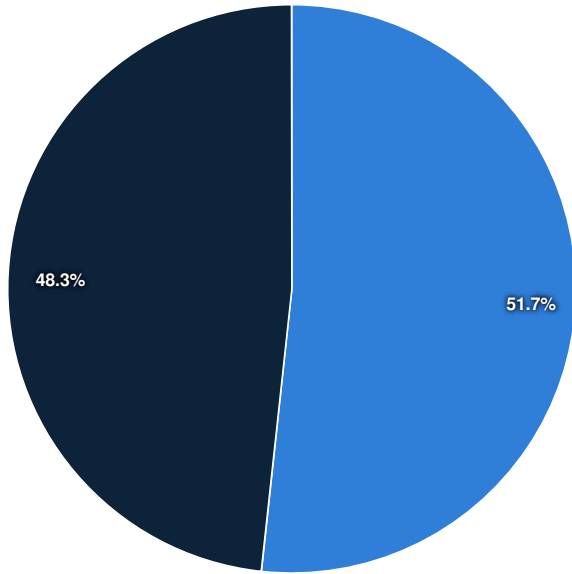


Result details

Left Blank	17
User entered value	12
Average submission length in words (ex blanks)	3.75
N/A	
.	
I attended this webinar for general knowledge.	
N/A	
Specificity of imaging options and potential risks.	
N/a	
N/A	
Consider new treatment modalities for patients.	
Refer patients for new diagnostic and treatment modalities.	
Refer patients for these newer treatment modalities.	
.	
N/A	



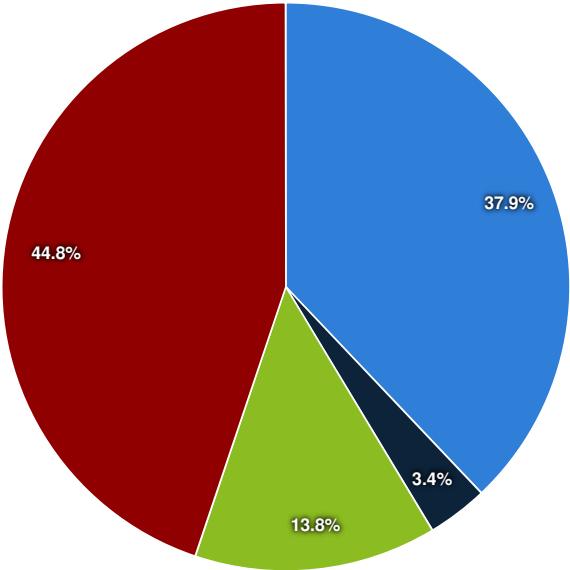
Please provide any additional comments or suggestions.



Result details

Left Blank	15
User entered value	14
Average submission length in words (ex blanks)	3.86
N/A	
.	
Great to see the fellows and hear their research	
Great to see the fellows and hear their research	
Excellent talks, nice evening, Thanks!	
The Fellows did an excellent job on focused research and education.	
N/A	
I would love for some Obstetrics and Gynae presentations	
None	
None	
None	
None.	
None.	
N/A	

Please select one:



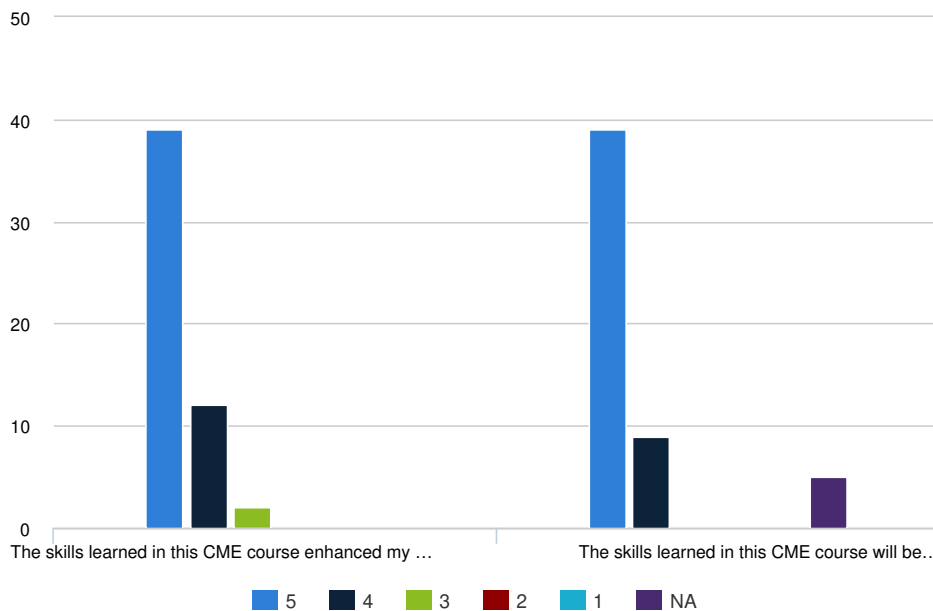
Result details

M.D., D.O.	11
PA-C	1
R.N.	4
Other...	13 (view)

# Suicide Awareness and Prevention in the Hospital Setting Evaluation - June 17, 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.

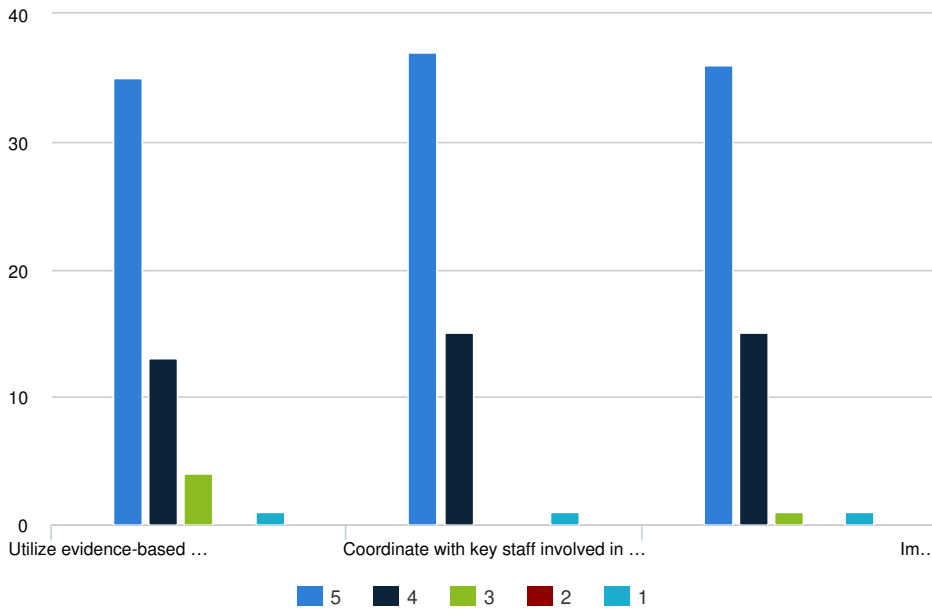
**Please score your agreement with or assessment of the following questions and statements by rating on a scale of 1 to 5, with 5 representing the highest level of satisfaction or agreement.**



Result details

	5	4	3	2	1	NA
The skills learned in this CME course enhanced my professional competence.	39	12	2	0	0	0
The skills learned in this CME course will be applied in the treatment of my patients	39	9	0	0	0	5

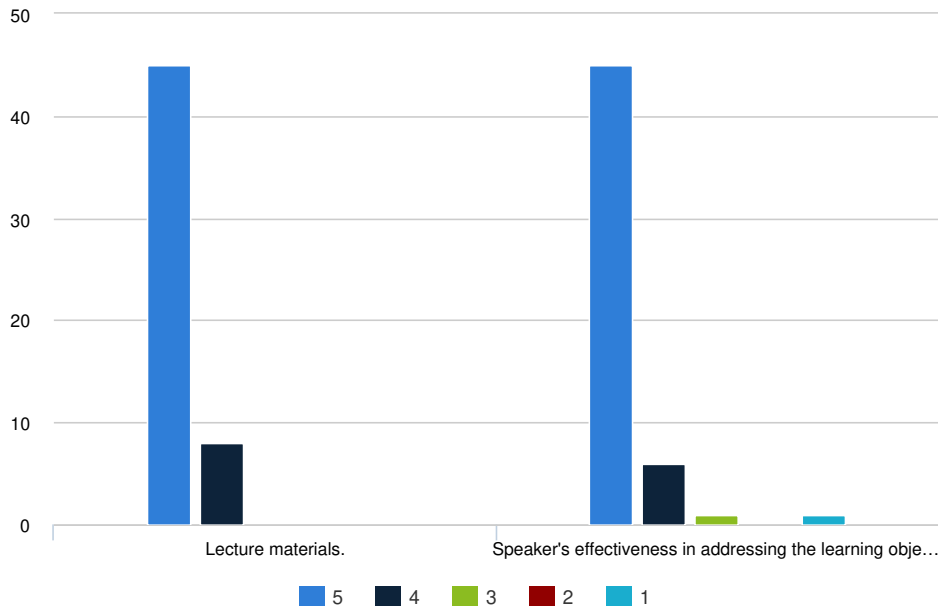
## How confident are you in your ability to:



### Result details

	5	4	3	2	1
Utilize evidence-based screening tools to identify patients at risk for suicide.	35	13	4	0	1
Coordinate with key staff involved in patient safety for the care of patients at risk for suicide.	37	15	0	0	1
Implement appropriate treatment protocols for patients identified with suicidal thoughts, plans or ideations.	36	15	1	0	1

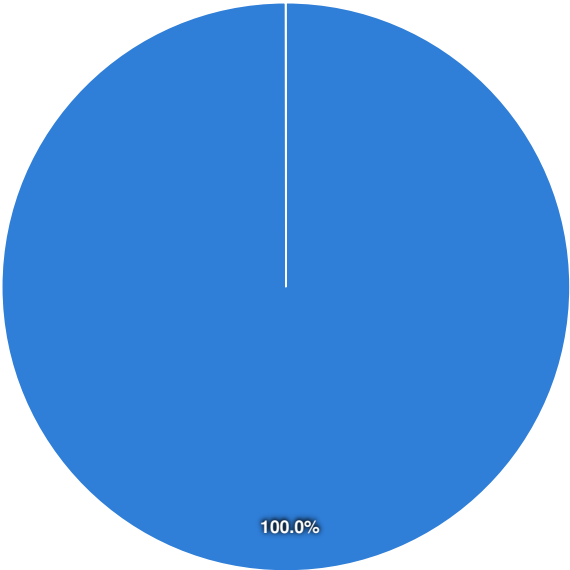
## How satisfied or dissatisfied were you with the following conference content?



### Result details

	5	4	3	2	1
Lecture materials.	45	8	0	0	0
Speaker's effectiveness in addressing the learning objectives	45	6	1	0	1

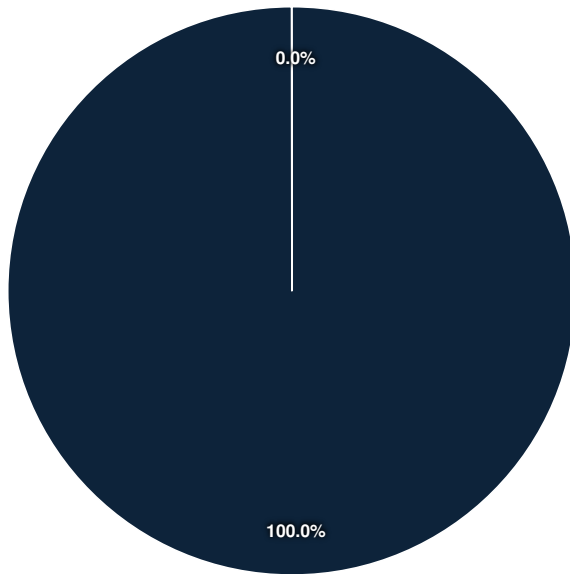
**Was this course fair, balanced and without commercial bias?**



Result details

Yes	53
-----	----

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



Result details

Left Blank	0
User entered value	53
Average submission length in words (ex blanks)	12.58
All of them, mostly the one related to avoid to worry about being extra cautious and do the right thing.	
NA	
I will provide education to staff	
Informative lecture and speakers	
evaluating risk for inpatients for suicide	
Evaluate our current suicide prevention strategies to evaluate if it matches up with the recommendations proposed by our expert speakers.	
n/a	
I don't work at bedside, but empowering those who do to speak up when a patient may be at risk for suicide and not be afraid to speak up. It's better to overreact about the situation than to not do anything about it.	
Although not a clinician in the hospital setting, knowing the signs/symptoms of a patient at risk for suicide, beyond a formal screening tool, is critical as a screening tool may not necessarily capture this risk.	
Ensure each pt is directly asked about thoughts of suicide	
ask the question about suicide	
Sitter active involvement in patient monitoring/care	
Better identify patients at risk	
It was a great review	
Utilize prevalence data when educating re risks of suicide. Encourage thorough history and consideration of all psychosocial factors.	
Utilize assessment skills shared here	
For at risk patients, initiate direct assessment, including specific questions, and recruit collegial help at once.	
Not to shy away from asking the questions, obtain as much information as possible	

na

Include staff in assessments

importance of being vigilant regarding suicide awareness and screening

Strategies to ID patients

continue established practice and screening

Screening tools especially to high risk patients

Always being aware, asking uncomfortable questions for the safety of our patients

More effectively assess mental status of my patients

I appreciate learning about the process used on the floors to be better able to communicate this with other providers.

Proper evaluation and patient history!

Use of the diagnostic tool in Cerner.

Retired. However, in my teaching role in FIU Herbert Wertheim College of Medicine, one of my teaching assignments is "Suicidality" and in that role I can utilize what I have learned from this wonderful lecture.

None really

Keep alert for at risk population and signs. Be aware of active/passive statements

One thing that resonated with me is the idea that if you have a "feeling" that something isn't right, you should follow through.

Screening for suicide

I learned about the available resources one can refer families and patients to for additional support.

More attention to risk factors and passive vs. active

Better and consistent screening

NA

Learning where to find tools in CERNER as outpatient facility.

Finding tools on CERNER

I agree, ask the uncomfortable questions regarding assessing for suicide.

I found the information to be helpful. I will be applying the knowledge to screen patients who may be having suicidal thoughts.

All of it

Ask appropriate questions relating to suicide

In the case of suicide, safety planning is one such approach. Safety planning is a brief intervention, collaboratively developed by a clinician and patient, that leads to a prioritized list of coping strategies and supports. The plan might include ways to manage thoughts of suicide between provider visits, steps to reduce access to lethal means, and supports that the patient can access.

Increased awareness and empathy. Increasing patient education.

NA

No new skills, but reminders aplenty.

Will be more aware of checking for suicidal thoughts and behavior.

Valuable information.

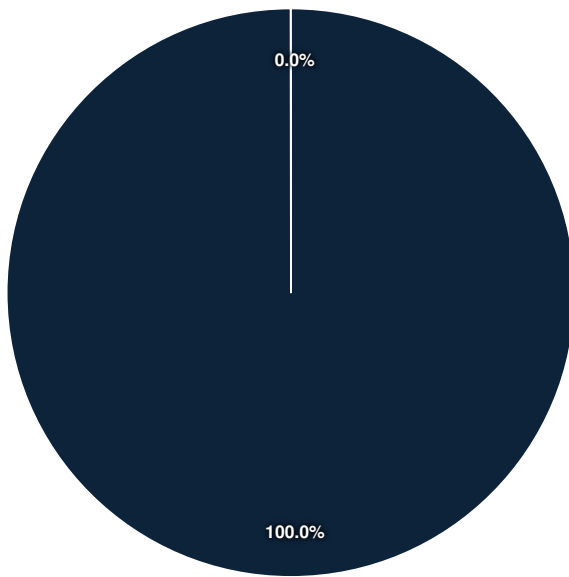
N/A

Strategies to Ask, in conjunction with Incr Level of Awareness that Patients w acute or chronic health conditions, may become further challenged by hospitalization or change in health status, whereby they may consider suicide. Information about tools such as the C-SSRS. Clarity about definitions, include active & passive components. Be Direct, Ask Questions. The presentation & Q&A provided examples of how to properly alert Members of the Medical, Nursing, Administrative & Hospital Security Departments, of potential Patients, and if there is a change in status. Policy for Visitors or Family, not to bring into the Patient's room.



Pay closer attention to signs & symptoms that might suggest major depression and or suicide

**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	53
Average submission length in words (ex blanks)	3.87
.	
NA	
N/A	
Staff shortages sometimes are a challenge	
n/a	
I do not see any issues that will prevent me for implementing the recommendations and strategies outlined by the expert speakers.	
not clinica	
N/A	
N/A	
N/A	
I will utilize it	
N/a	
n/a	
n/a	
N/A	
n/a	
n/a	
n/a	
na	
I will implement these strategies to practice and advising colleagues to do so.	
already comply	

No problems

currently up to date

Nothing. We must make time.

N/a

Nothing

n/a

I will

n/a

N/A

Already aware

NA

NA

Plan to implement

Not applicable.

N/A

N/a

The population I treat is fairly low risk for suicide, and I am already aware of most of the content of the talk.

I will

I will

Yes, the statistics were impressive.

I plan to implement the skills.

N/a

Time constraints dealing with patients

N/A

N/a

Do not provide direct care

I'm already implementing all of the strategies covered. But the refresher was nice.

Nothing

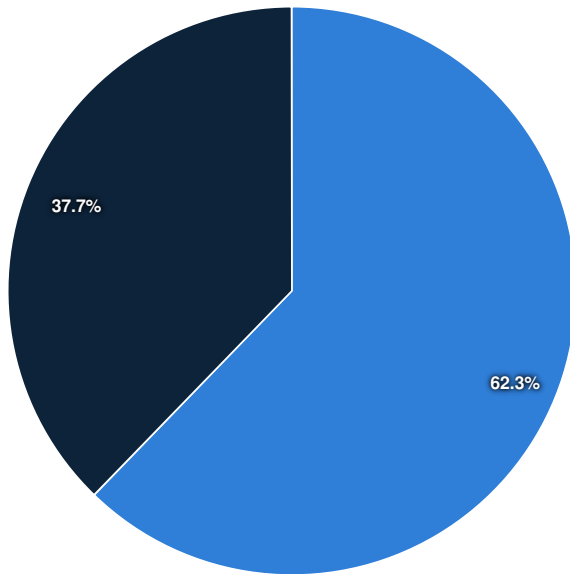
Do not have a clinical practice but will use information learned to guide decisions made regarding suicide in a hospital setting.

N/A

Not applicable

N/A

**Please provide any additional comments or suggestions.**



**Result details**

Left Blank	33
User entered value	20
Average submission length in words (ex blanks)	14.10
.	
NA	
More lectures Like this would be beneficial	
I think this was a well-done, well-needed presentation and I hope there will be more sessions dedicated to mental health topics in the future like this one.	
Great presentation!	
Suggest more info on the elements required in the medical (psych) eval after identifying a pt. at risk and the development of a safety plan, I.E...who, how.	
Very important patient care information. Excellent presentation, especially information about allaying fears during patient interviews.	
In enjoyed having 3 people involved in the topic	
I encourage more mental health topics. Maybe a monthly event with different topics?	
None	
Great presentation be Dr. Girshman, Dr. Rohaidy and Amy Exum. Appreciate all the hardwork to pull this together.	
Would have liked more what-if scenarios from everyday cases. I would cut back the lecture a bit so as to get to questions.	
excellent well organized lecture	

excellent well organized lecture.

Good content and well informed speakers. Much needed topic. Thank you

Nothing

None

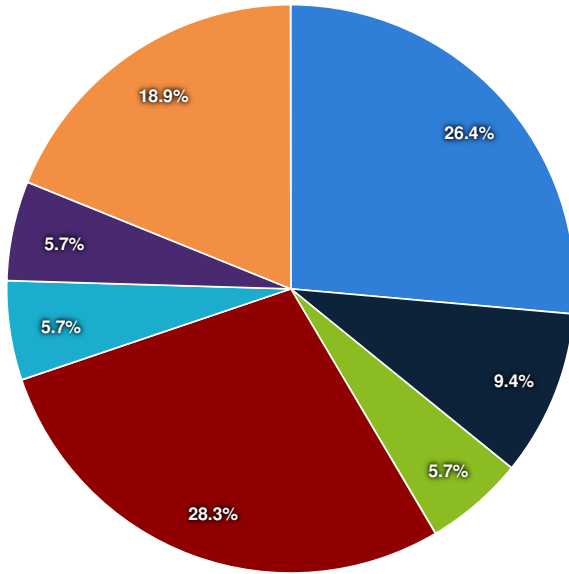
Examples of how to ask patients the questions on the tools. MANY patients are going to fake good if read a list of questions...patients are smart and know how to cover up.

Good speakers.

What is the procedure to download or access slides after the presentations? There was a list of resources at the end, & a slide about Risks & Protective Factors. As indicated amongst the submitted Questions, I found the ~ 8 hour Mental Health First Aid course informative for me; it is also available for Health Professionals & the General Public, and had originated in Australia. Some Churches have had NAMI Facilitated Programs about Mental Health, which can be helpful as sometimes Family or Acquaintances also notice changes in Patients.

Great presentation!

Please select one:



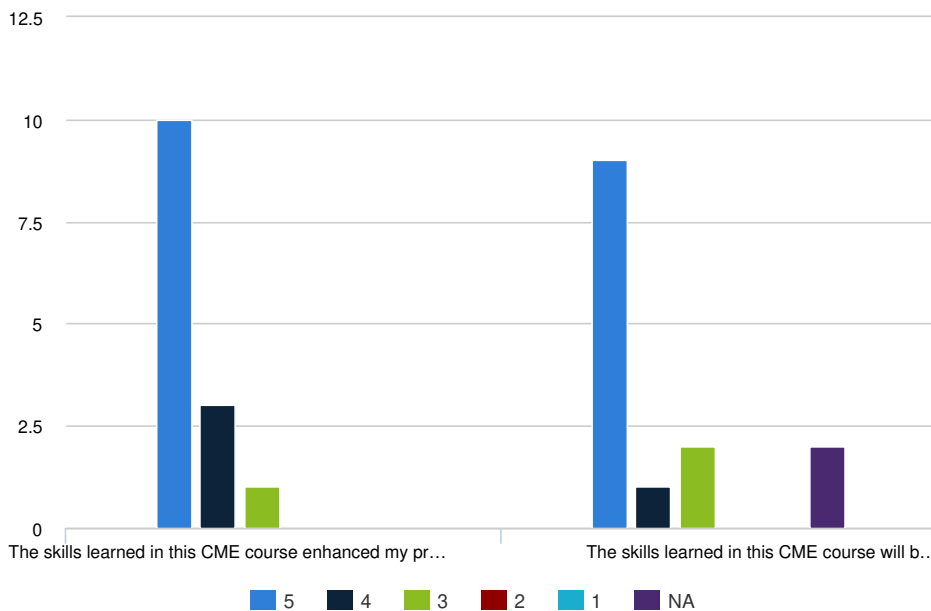
Result details

M.D., D.O.	14
Ph.D/Psy.D	5
ARNP/PA-C	3
R.N.	15
Occupational Therapist	3
Social Work	3
Other...	10 (view)

# Promoting Physician Well-Being Evaluation - June 24, 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.

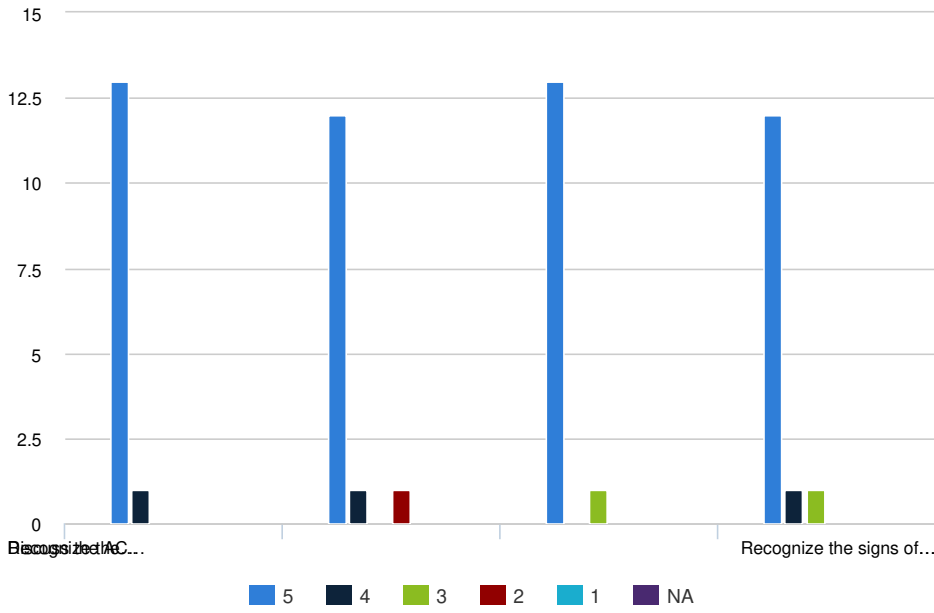
**Please score your agreement with or assessment of the following questions and statements by rating on a scale of 1 to 5, with 5 representing the highest level of satisfaction or agreement.**



**Result details**

	<b>5</b>	<b>4</b>	<b>3</b>	<b>2</b>	<b>1</b>	<b>NA</b>
The skills learned in this CME course enhanced my professional competence.	10	3	1	0	0	0
The skills learned in this CME course will be applied in the treatment of my patients.	9	1	2	0	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)**

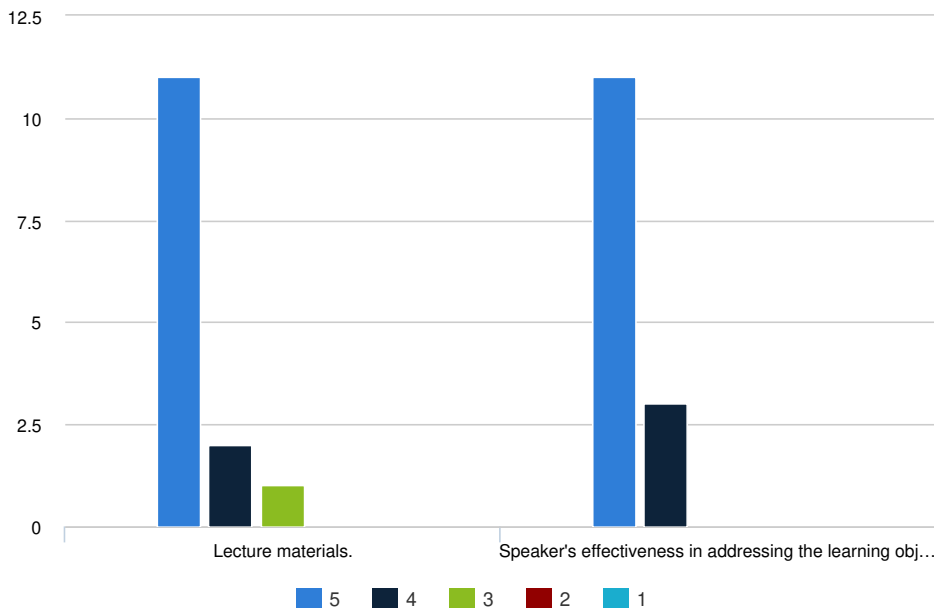


**Result details**

	<b>5</b>	<b>4</b>	<b>3</b>	<b>2</b>	<b>1</b>	<b>NA</b>
Recognize the importance of well-being for physicians and residents.	13	1	0	0	0	0
Discuss the ACGME Common Program Requirements for Residency Education (formally known as Duty Hour regulations).	12	1	0	1	0	0
Recognize the signs of fatigue/sleep deprivation, burnout, depression, and substance abuse.	13	0	1	0	0	0
Evaluate the effect of fatigue/sleep deprivation, burnout, depression, and substance abuse on physician's functioning and performance.	12	1	1	0	0	0



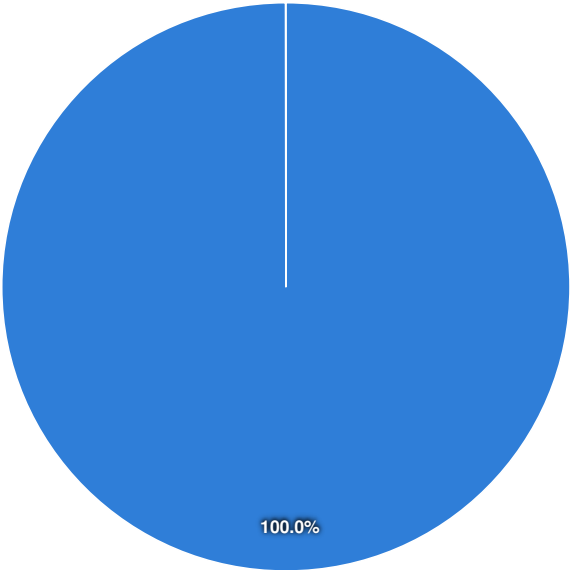
## How satisfied or dissatisfied were you with the following conference content?



### Result details

	5	4	3	2	1
Lecture materials.	11	2	1	0	0
Speaker's effectiveness in addressing the learning objectives.	11	3	0	0	0

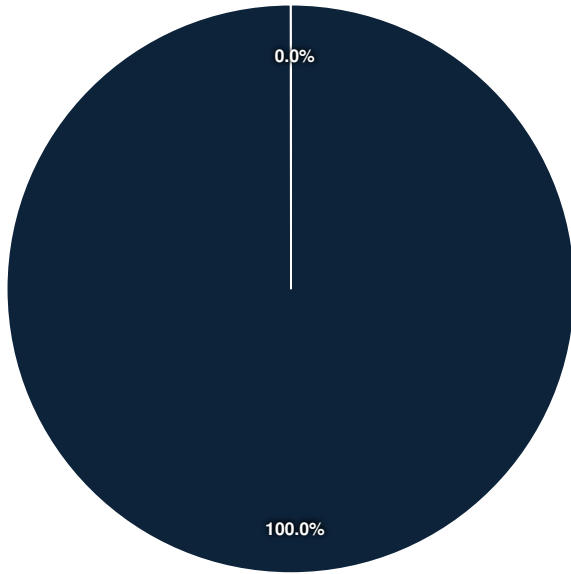
**Was this course fair, balanced and without commercial bias?**



Result details

Yes	14
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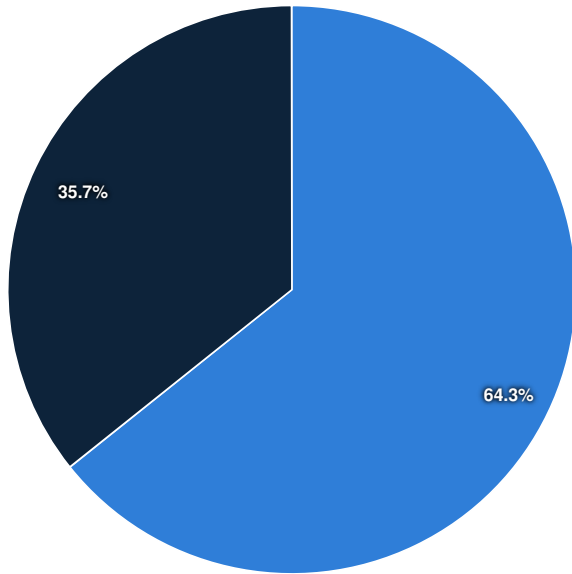
**What, if any, new skills/strategies will you apply in your clinical practice?**



Result details

Left Blank	0
User entered value	14
Average submission length in words (ex blanks)	6.93
Learnt about how to recognize the signs of fatigue	
continue to enforce and be vigilant on fatigue/burnout signs and symptoms	
N/A	
N/A	
.	
Talking about burnout	
Good	
recognize signs of sleep deprivation	
Be aware of burnout and stress associated with long working hours and lack of sleep.	
I was misled by the title and thought that it was going to be. about practicing physicians and not just about residents/house staff	
Greater awareness of what is happening at the resident level	
being more aware of burnout in residents	
N/A	
Practicing meditation. Limiting caffeinated drinks	

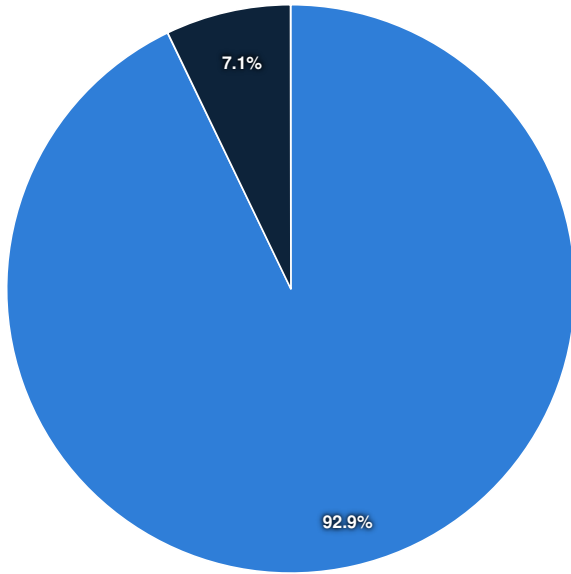
**If you do not plan to implement any new skills/strategies in your clinical practice, what is keeping you from doing so?**



**Result details**

Left Blank	9
User entered value	5
Average submission length in words (ex blanks)	8.60
Not in clinical practice but applicable to observations or interactions when teaching residents or medical students	
Not in clinical practice but applicable to observations or interactions when teaching residents or medical students	
N/A.	
I have no contact with medical residents.	
n/a	

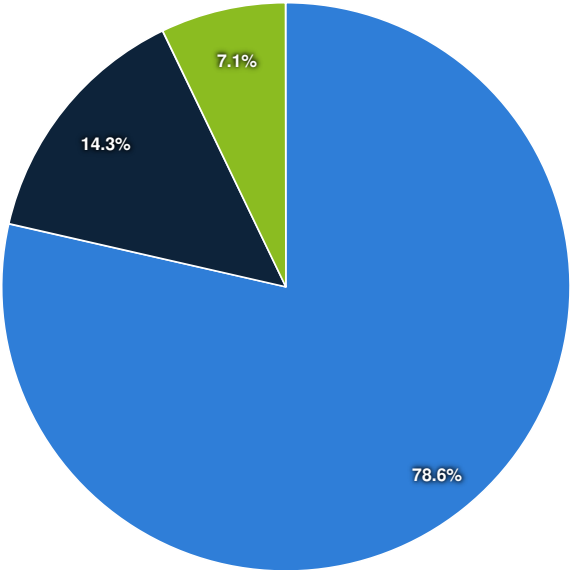
Please provide any additional comments or suggestions.



Result details

Left Blank	13
User entered value	1
Average submission length in words (ex blanks)	2.00
Excellent content.	

Please select one:



Result details

M.D., D.O.	11
DPM	2
Other...	1 (view)