



PAEDIATRIC GRAND ROUNDS EVALUATION FORM

Presented by: Dr. Kara Murias

Date: April 18, 2018

Title: Developmental Research in Calgary: Meaningful Progress
Through Collaboration

Please complete the following questions and return this questionnaire at the end of the session.

- The learning objectives were clearly stated: YES NO
- Speaker communicated in a manner that kept my interest: YES NO
- Speaker was organized and well prepared: YES NO
- Information presented in a logical/sequential manner: YES NO
- The audio visual materials were clear and enhanced the presentation: YES NO
- Key points were summarized at the end: YES NO
- My practice will change as a result of attending this session: YES NO NA
- Amount of information presented was appropriate for the allocated time: YES NO

Paediatricians - Name: _____ **please print** (to track Maintenance of Certification Credits) (If we can't read your name we can't apply your credits)

Residents/Fellows - Name: _____ **please print**

Please provide comments about this Grand Rounds presentation as well as any suggestions that you may have to enhance his/her future presentations. _____

Thank you for your feedback and time.

Dr. Julian Midgley
Director, Continuing Medical Education Program

Brenda Greig, CME Program Administrator
Tel: (403) 955-2413 Fax: (403) 955-2203