ASATT Program Evaluation

Program Provider: ____________________________________________
Title: ________________________________________________________

NOTE: Each participant is requested to complete this evaluation tool as a way to assess the effectiveness of learning following participation in the conference.

Course Date: _________________________________________________
Topic: _______________________________________________________

Objectives for Course: Accomplished

1. Provide literature relevant to anesthesia technology practice Agree _____ Disagree _____
2. Provide evidence bases for anesthesia practice Agree _____ Disagree _____
3. Discuss current trends in anesthesia technology practice Agree _____ Disagree _____
4. Identify emerging trends for anesthesia technology Agree _____ Disagree _____

Other: Accomplished

1. The facilitator was effective in presenting the material Agree _____ Disagree _____
2. The content was related to the objectives Agree _____ Disagree _____
3. Teaching methods were effective Agree _____ Disagree _____
4. Physical facilities facilitated learning Agree _____ Disagree _____
5. My personal learning objectives were met Agree _____ Disagree _____

Additional Topics of Interest for Future Meetings:

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___________________________________________________________________________
___________________________________________________________________________