



**ASSOCIATION OF PHYSICIANS OF PAKISTANI-DESCENT OF NORTH AMERICA**  
**OHIO CHAPTER CME Meeting, May 9, 2015**  
**Evaluation Form**

**FACULTY EVALUATION**

Faculty Name: Peter Pema, MD

Presentation Title: Update on Interventional Techniques in TIA/Stroke

<b>Learning Objectives</b>		
Become comfortable and understand the Current treatment of Brain aneurysms, ruptured and unruptured.	Met <input type="checkbox"/>	Not Met <input type="checkbox"/>
Gain knowledge in acute stroke Interventional treatment and the urgency with which to refer patients.	Met <input type="checkbox"/>	Not Met <input type="checkbox"/>
Understand the paradigm shift in the acute care of stroke patients.	Met <input type="checkbox"/>	Not Met <input type="checkbox"/>
<b>Describe what changes you are going to do as a result of attending this activity?</b>		
<b>Evaluate the Speaker</b> on the following scale. (Circle One)		
Poor      Fair      Average      Good      Excellent		

Faculty Name: Ali Ajam, MD

Presentation Title: Update on Rheumatological Disorders, Immunologics, and Their Adverse Effects

<b>Learning Objectives</b>		
Discuss the Most Commonly Encountered Arthritic and Pain Syndromes in Practice.	Met <input type="checkbox"/>	Not Met <input type="checkbox"/>
Discuss Disease Processes, Focus on Therapeutic Algorithms and Options.	Met <input type="checkbox"/>	Not Met <input type="checkbox"/>
Commonly Used Medications Related Adverse Events with Focus on Biologics.	Met <input type="checkbox"/>	Not Met <input type="checkbox"/>
<b>Describe what changes you are going to do as a result of attending this activity?</b>		
<b>Evaluate the Speaker</b> on the following scale. (Circle One)		
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Faculty Name: Anthony J. Michaels, MD

Presentation Title: Abnormal Liver Function Tests - Management Updates

<b>Learning Objectives</b>		
Analyzing the Liver Function Panel.	Met <input type="checkbox"/>	Not Met <input type="checkbox"/>
Developing a Differential Diagnosis.	Met <input type="checkbox"/>	Not Met <input type="checkbox"/>
When Should a Referral be Made?	Met <input type="checkbox"/>	Not Met <input type="checkbox"/>
<b>Describe what changes you are going to do as a result of attending this activity?</b>		
<b>Evaluate the Speaker</b> on the following scale. (Circle One)		
Poor      Fair      Average      Good      Excellent		

Faculty Name: Bushra Siddiqui, MD

Presentation Title: Updates in Preventive Medicine Guidelines for Primary Care

<b>Learning Objectives</b>		
Review Standard USPSTF Preventive Health Care Guidelines.	Met <input type="checkbox"/>	Not Met <input type="checkbox"/>
Learn New Updates on Preventive Care Guidelines.	Met <input type="checkbox"/>	Not Met <input type="checkbox"/>
Learn Vaccine Updates Based on Advisory Committee on Immunization Practice Recommendations.	Met <input type="checkbox"/>	Not Met <input type="checkbox"/>
<b>Describe what changes you are going to do as a result of attending this activity?</b>		
<b>Evaluate the Speaker</b> on the following scale. (Circle One)		
Poor      Fair      Average      Good      Excellent		



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**EVALUATION OF OVERALL ACTIVITY**

**1- To what extent do you feel this activity has improved your competence (skill, abilities) in each of the following areas?**

**A Learning Objective A:** Recognize and get updated on new screening guidelines for primary care physicians, interpretation of abnormal liver function tests, new medications used in rheumatological disorders and management of transient ischemic attack/stroke.

To a great extent    To some extent    To a little extent    Not at all

**B Learning Objective B:** Demonstrate understanding on new screening guidelines for primary care physicians, interpretation of abnormal liver function tests, new medications used in rheumatological disorders and management of transient ischemic attack/stroke.

To a great extent    To some extent    To a little extent    Not at all

**C Learning Objective C:** Enhance their knowledge and follow the guidelines on new screening guidelines for primary care physicians, interpretation of abnormal liver function tests, new medications used in rheumatological disorders and management of transient ischemic attack/stroke.

To a great extent    To some extent    To a little extent    Not at all

**2- How well did this educational activity meet your educational needs?**

- Exceeded my needs
- Met most of my needs
- Met some of my needs
- Did not meet my needs

**3- What is the likelihood that you will make changes in your practice as a result of what you learned in this activity?**

- Very likely
- Somewhat likely
- Somewhat unlikely
- Very unlikely

**4- Name one thing that you plan to change in your practice or patient care as a result of what you learned in this activity?**



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**5- Did you feel the educational content contained any inappropriate promotion of the commercial product, device or Services? (If yes please explain)**

- No  
 Yes - Please explain.

**6-Selection of overall topics selected for presentation were:**

- Poor  Fair  Average  Good  Excellent

**7- What educational gaps have you identified in your own professional practice that you would like to see addressed at the future APPNA CME activities?**

**8- Please identify if any changes are required to improve its ability to meet the CME Mission?**

**9- The committee values your opinion. What topics would you like to have presented at the future APPNA CME activities?**

**10- Any Speaker would you like to be invited in the future APPNA CME activities?**



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May 9, 2015			
<input type="checkbox"/>	Peter Pema, MD	Didactic Session	1.0 hour
<input type="checkbox"/>	Ali Ajam, MD	Didactic Session	1.0 hour
<input type="checkbox"/>	Anthony J. Michaels, MD	Didactic Session	1.0 hour
<input type="checkbox"/>	Bushra Siddiqui, MD	Didactic Session	1.0 hour
Total CME Hours			

**Please write legibly.**

I \_\_\_\_\_ verify that I have attended this CME Activity and claim \_\_\_\_\_ credit hours (*Maximum 4.0 AMA PRA Category 1 Credit(s)<sup>TM</sup>*).

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Email: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

This activity has been planned and implemented in accordance with the essential areas and policies of the Accreditation Council for Continuing Medical Education through the joint sponsorship of APPNA and Ohio Chapter. APPNA is accredited by the Accreditation Council for Continuing Medical Education to present continuing medical education programs for physicians. APPNA designates this program for **4.0 credits in Category 1 of the Physicians Recognition Award of the American Medical Association**. Each physician should claim only credit for time actually spent in the educational activity.