



Emerging Challenges In Primary Care: *2012*

Activity Evaluation Summary

CME Activity: Emerging Challenges in Primary Care: 2012
Saturday, June 16, 2012
DoubleTree by Hilton Denver Tech Center
Greenwood Village, CO

Course Director: Gregg Sherman, MD

**Date of Evaluation
Summary:** July 7, 2012



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In June 2012, the National Association for Continuing Education (NACE) sponsored a CME program, *Emerging Challenges in Primary Care: 2012*, in Denver, CO.

This educational activity was designed to provide primary care physicians, nurse practitioners, physician assistants and other primary care providers the opportunity to learn about Diabetes, Atrial Fibrillation, Inflammatory Bowel Disease, Osteoporosis, Pulmonary Arterial Hypertension, Alpha-1 Antitrypsin Disorder, ADHD in Adults, and Chronic Low Back Pain.

In planning this CME activity, the NACE performed a needs assessment. A literature search was conducted, national guidelines were reviewed, survey data was analyzed, and experts in each therapeutic area were consulted to determine gaps in practitioner knowledge, competence or performance.

One hundred eighty one healthcare practitioners registered to attend *Emerging Challenges in Primary Care: 2012* in Denver, CO. One hundred twenty six healthcare practitioners actually attended this conference. Each attendee was asked to complete and return an activity evaluation form prior to the end of the conference. One hundred twenty completed forms were received. The data collected is displayed in this report.

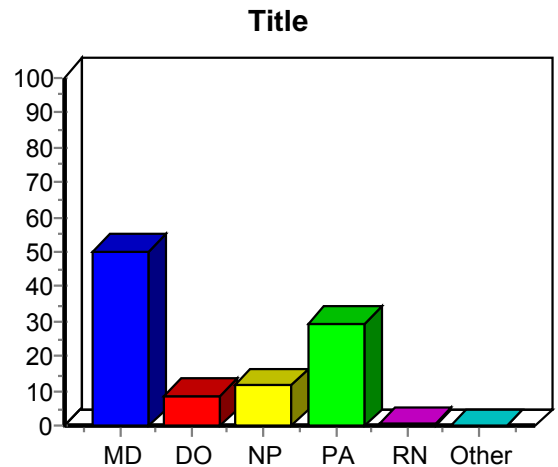
CME ACCREDITATION

The National Association for Continuing Education is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians.

The National Association for Continuing Education designates this live activity for a maximum of 8 *AMA PRA Category 1 Credits*[™]. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

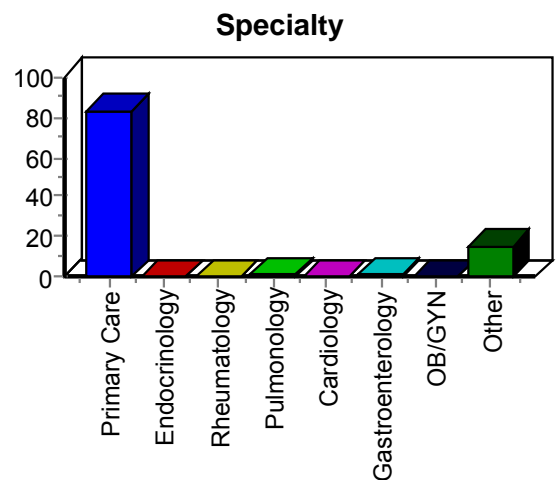
What is your professional degree?

Label	Frequency	Percent	Valid Percent
MD	60	50.00	50.00
DO	10	8.33	8.33
NP	14	11.67	11.67
PA	35	29.17	29.17
RN	1	0.83	0.83
Other	0	0.00	0.00
Total Valid	120	100.00	100.00



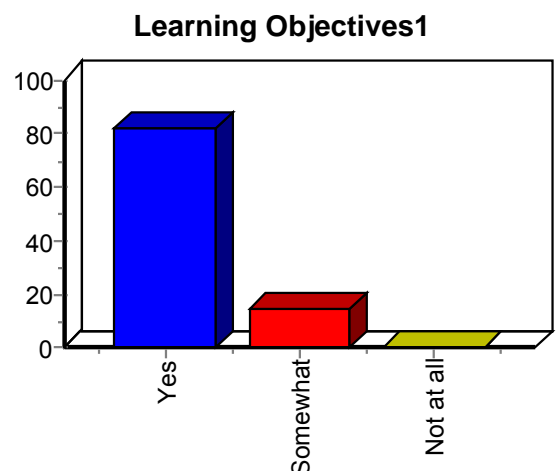
What is your specialty?

Label	Frequency	Percent	Valid Percent
Primary Care	100	83.33	83.33
Endocrinology	0	0.00	0.00
Rheumatology	0	0.00	0.00
Pulmonology	1	0.83	0.83
Cardiology	0	0.00	0.00
Gastroenterology	1	0.83	0.83
OB/GYN	0	0.00	0.00
Other	18	15.00	15.00
Total Valid	120	100.00	100.00



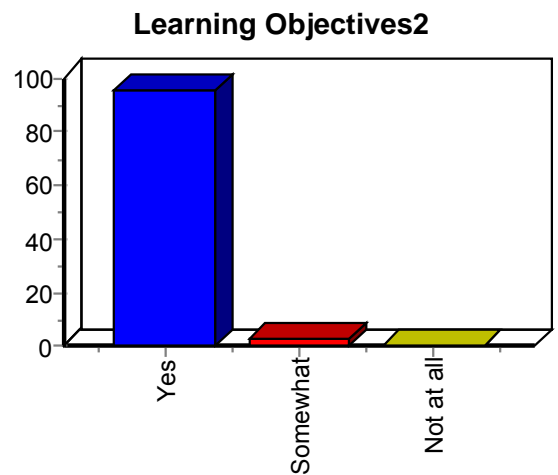
Upon completion of this activity, I can now - Address the importance of early diagnosis for enhancing outcomes in type 2 diabetes; identify evidence-based strategies for type 2 diabetes management; discuss the role of newer therapies in the pathophysiology and management of type 2 diabetes; and discuss the role of the chronic care model in optimizing diabetes care:

Label	Frequency	Percent	Valid Percent
Yes	98	81.67	85.22
Somewhat	17	14.17	14.78
Not at all	0	0.00	0.00
Total Valid	115	95.83	100.00
Total Missing	5	4.17	
Total	120	100.00	



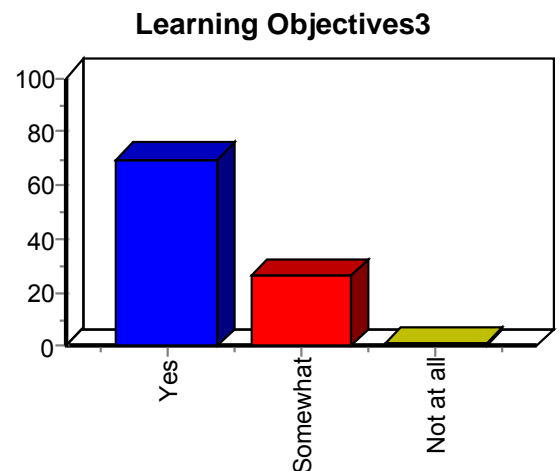
Upon completion of this activity, I can now - Use the CHADS2 score to assess stroke risk in patients with atrial fibrillation (AF); describe the benefits versus risks of antithrombotic therapy for stroke risk reduction in AF patients; identify appropriate therapeutic interventions for AF patients depending on the level of stroke risk; optimize the long-term management of AF patients receiving antithrombotic therapy:

Label	Frequency	Percent	Valid Percent
Yes	114	95.00	97.44
Somewhat	3	2.50	2.56
Not at all	0	0.00	0.00
Total Valid	117	97.50	100.00
Total Missing	3	2.50	
Total	120	100.00	



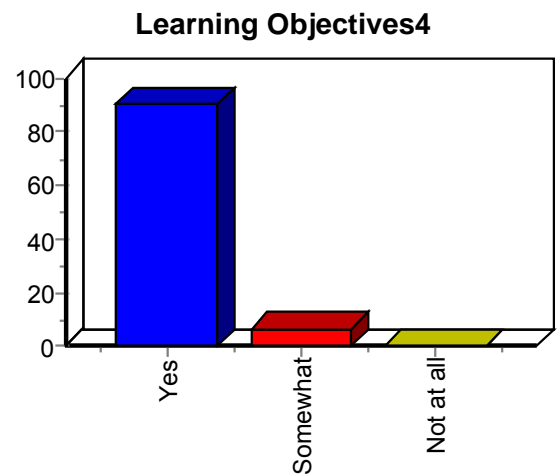
Upon completion of this activity, I can now - Identify the conditions referred to as inflammatory bowel disease (IBD), and discuss their clinical presentations; implement appropriate pharmacologic and non-pharmacologic therapeutic strategies for managing IBD in accordance with evidence-based guidelines; tailor the available medications to the various presentations of IBD with attention to the induction and the maintenance of remission; use currently available laboratory tests to maximize benefit while minimizing toxicity; employ approaches for effectively communicating the risks and benefits of IBD treatment options and facilitating adherence:

Label	Frequency	Percent	Valid Percent
Yes	84	70.00	72.41
Somewhat	31	25.83	26.72
Not at all	1	0.83	0.86
Total Valid	116	96.67	100.00
Total Missing	4	3.33	
Total	120	100.00	



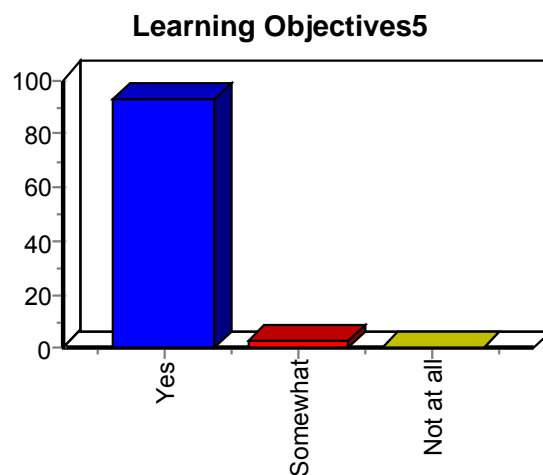
Upon completion of this activity, I can now - Discuss screening strategies for osteoporosis in postmenopausal women; identify candidates for pharmacologic treatment of postmenopausal osteoporosis; evaluate and compare available therapies for osteoporosis; and discuss barriers to adherence and effectiveness of osteoporosis therapy:

Label	Frequency	Percent	Valid Percent
Yes	109	90.83	93.16
Somewhat	8	6.67	6.84
Not at all	0	0.00	0.00
Total Valid	117	97.50	100.00
Total Missing	3	2.50	
Total	120	100.00	



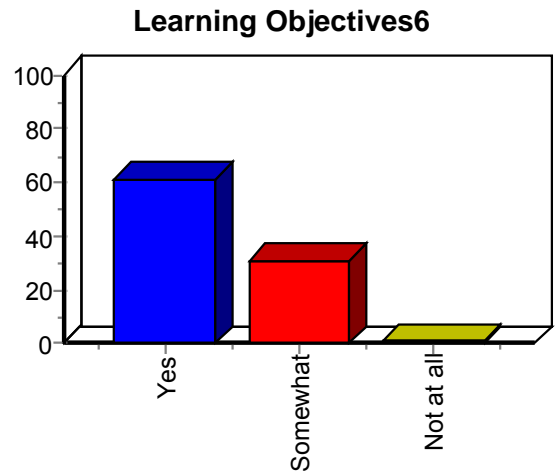
Upon completion of this activity, I can now - Discuss the pathophysiology of low back pain (LBP); Recognize Waddell signs and how they can predict symptom magnification; Recognize the limitations of some commonly prescribed therapies for back pain; Demonstrate increased awareness of evolving pharmacotherapies and their role in low back pain:

Label	Frequency	Percent	Valid Percent
Yes	111	92.50	97.37
Somewhat	3	2.50	2.63
Not at all	0	0.00	0.00
Total Valid	114	95.00	100.00
Total Missing	6	5.00	
Total	120	100.00	



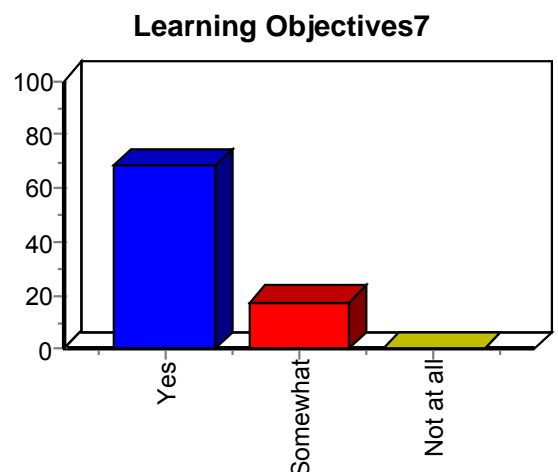
Upon completion of this activity, I can now - Address the pathophysiology of PAH; discuss when and how to screen patients for PAH; identify current therapies in the management of PAH; and discuss how to appropriately monitor patients receiving treatment for PAH:

Label	Frequency	Percent	Valid Percent
Yes	73	60.83	65.77
Somewhat	37	30.83	33.33
Not at all	1	0.83	0.90
Total Valid	111	92.50	100.00
Total Missing	9	7.50	
Total	120	100.00	



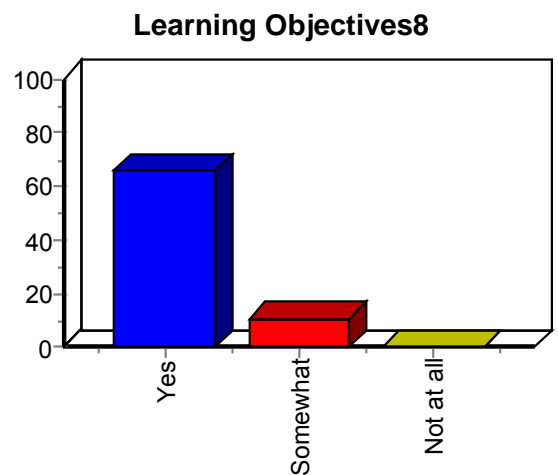
Upon completion of this activity, I can now - Describe the pathophysiology and impact of AAT deficiency; Define approaches for the early identification of patients with AAT deficiency; Discuss strategies to improve testing in primary care settings; Discuss management of patients with AAT:

Label	Frequency	Percent	Valid Percent
Yes	82	68.33	79.61
Somewhat	21	17.50	20.39
Not at all	0	0.00	0.00
Total Valid	103	85.83	100.00
Total Missing	17	14.17	
Total	120	100.00	



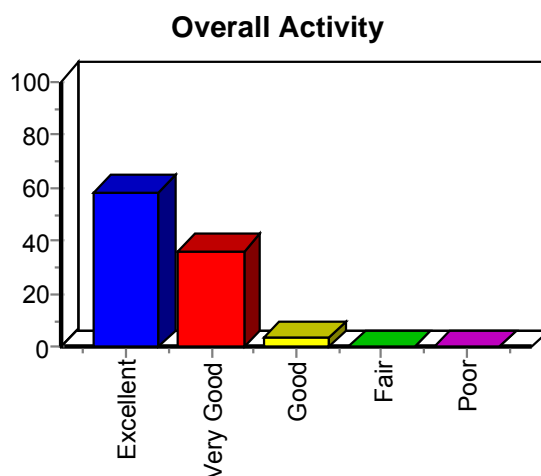
Upon completion of this activity, I can now - Describe existing guidelines and best practices in the diagnosis and treatment of ADHD in adults; identify risks for co-morbidities in adult patients with ADHD with emphasis on anxiety disorders, mood disorders, and substance use/abuse disorders; plan a pharmacologic treatment program for adults diagnosed with simple ADHD and more complex ADHD that is complicated by co-morbidities; identify psychosocial treatments for adults diagnosed with ADHD:

Label	Frequency	Percent	Valid Percent
Yes	79	65.83	86.81
Somewhat	12	10.00	13.19
Not at all	0	0.00	0.00
Total Valid	91	75.83	100.00
Total Missing	29	24.17	
Total	120	100.00	



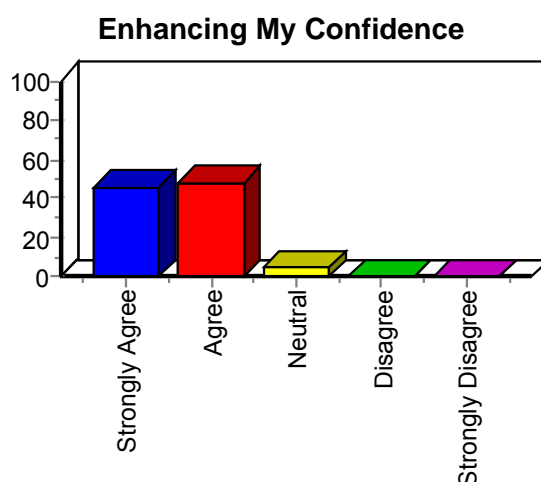
Overall, I would rate this activity as:

Label	Frequency	Percent	Valid Percent
Excellent	70	58.33	59.83
Very Good	43	35.83	36.75
Good	4	3.33	3.42
Fair	0	0.00	0.00
Poor	0	0.00	0.00
Total Valid	117	97.50	100.00
Total Missing	3	2.50	
Total	120	100.00	



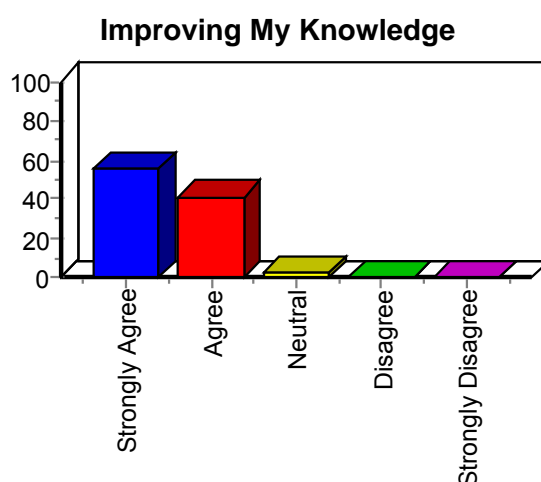
Overall, this activity was effective in enhancing my confidence in caring for patients with the condition(s) presented?

Label	Frequency	Percent	Valid Percent
Strongly Agree	55	45.83	46.61
Agree	58	48.33	49.15
Neutral	5	4.17	4.24
Disagree	0	0.00	0.00
Strongly Disagree	0	0.00	0.00
Total Valid	118	98.33	100.00
Total Missing	2	1.67	
Total	120	100.00	



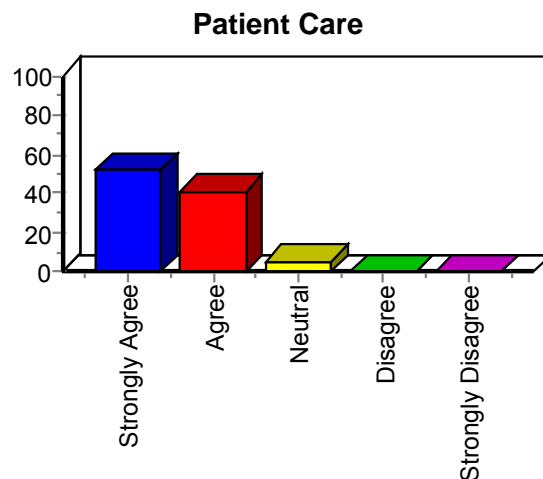
Overall, this activity was effective in improving my knowledge in the content areas presented:

Label	Frequency	Percent	Valid Percent
Strongly Agree	67	55.83	56.78
Agree	49	40.83	41.53
Neutral	2	1.67	1.69
Disagree	0	0.00	0.00
Strongly Disagree	0	0.00	0.00
Total Valid	118	98.33	100.00
Total Missing	2	1.67	
Total	120	100.00	



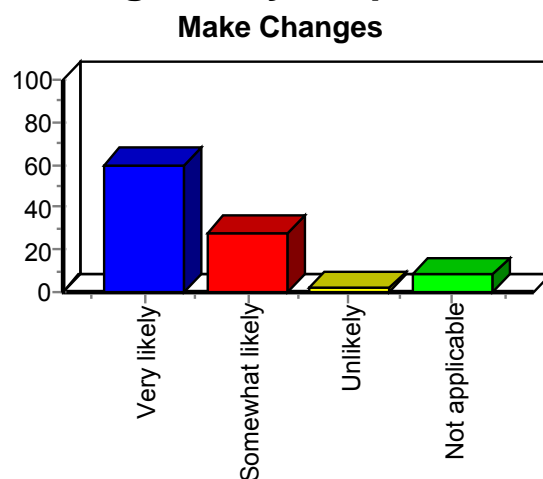
As a result of this activity, I have learned new strategies for patient care:

Label	Frequency	Percent	Valid Percent
Strongly Agree	62	51.67	52.54
Agree	50	41.67	42.37
Neutral	6	5.00	5.08
Disagree	0	0.00	0.00
Strongly Disagree	0	0.00	0.00
Total Valid	118	98.33	100.00
Total Missing	2	1.67	
Total	120	100.00	



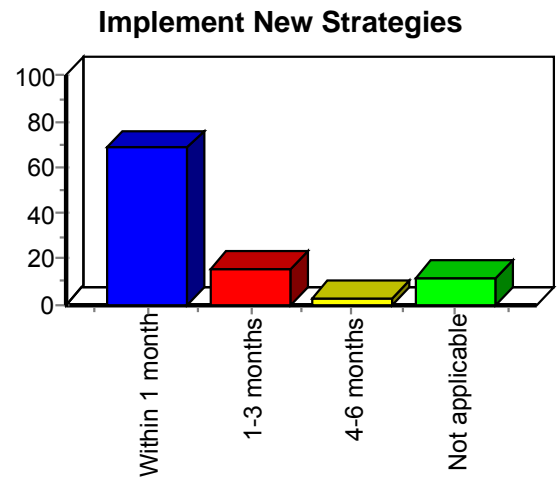
How likely are you to implement these new strategies in your practice?

Label	Frequency	Percent	Valid Percent
Very likely	72	60.00	61.02
Somewhat likely	34	28.33	28.81
Unlikely	3	2.50	2.54
Not applicable	9	7.50	7.63
Total Valid	118	98.33	100.00
Total Missing	2	1.67	
Total	120	100.00	



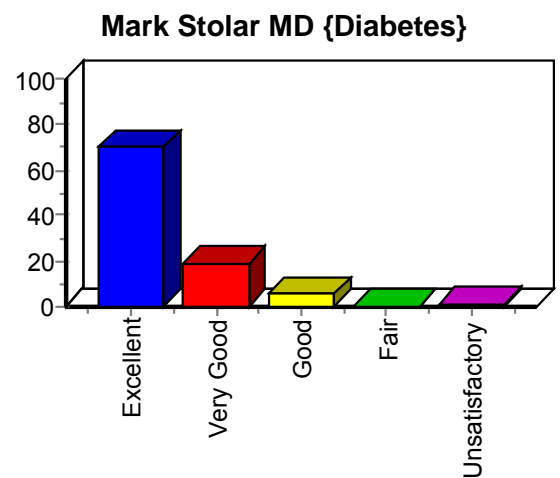
When do you intend to implement these new strategies into your practice?

Label	Frequency	Percent	Valid Percent
Within 1 month	82	68.33	69.49
1-3 months	19	15.83	16.10
4-6 months	3	2.50	2.54
Not applicable	14	11.67	11.86
Total Valid	118	98.33	100.00
Total Missing	2	1.67	
Total	120	100.00	



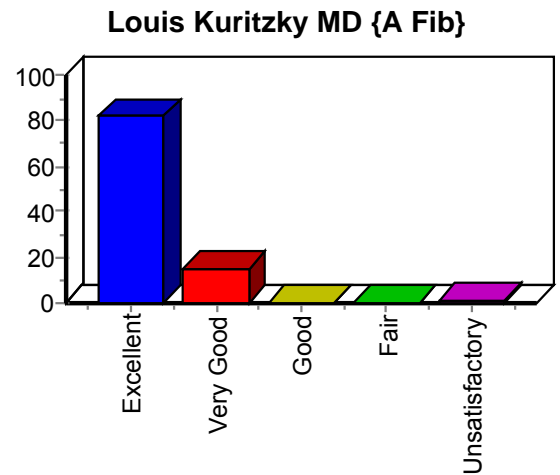
In terms of delivery of the presentation, please rate the effectiveness of the speaker: Mark Stolar, MD (Diabetes):

Label	Frequency	Percent	Valid Percent
Excellent	84	70.00	73.68
Very Good	22	18.33	19.30
Good	7	5.83	6.14
Fair	0	0.00	0.00
Unsatisfactory	1	0.83	0.88
Total Valid	114	95.00	100.00
Total Missing	6	5.00	
Total	120	100.00	



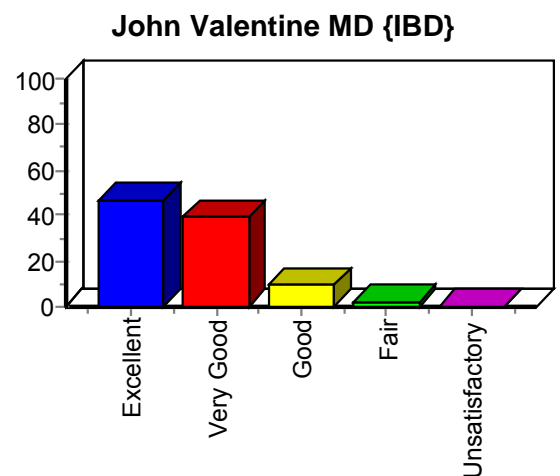
In terms of delivery of the presentation, please rate the effectiveness of the speaker: Louis Kuritzky, MD (A Fib):

Label	Frequency	Percent	Valid Percent
Excellent	99	82.50	83.90
Very Good	18	15.00	15.25
Good	0	0.00	0.00
Fair	0	0.00	0.00
Unsatisfactory	1	0.83	0.85
Total Valid	118	98.33	100.00
Total Missing	2	1.67	
Total	120	100.00	



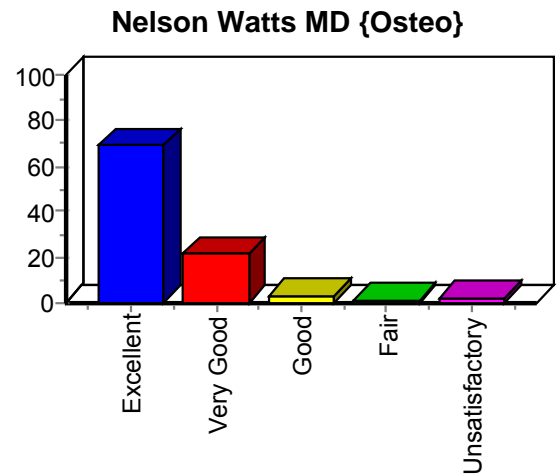
In terms of delivery of the presentation, please rate the effectiveness of the speaker: John Valentine, MD (IBD):

Label	Frequency	Percent	Valid Percent
Excellent	56	46.67	48.28
Very Good	47	39.17	40.52
Good	11	9.17	9.48
Fair	2	1.67	1.72
Unsatisfactory	0	0.00	0.00
Total Valid	116	96.67	100.00
Total Missing	4	3.33	
Total	120	100.00	



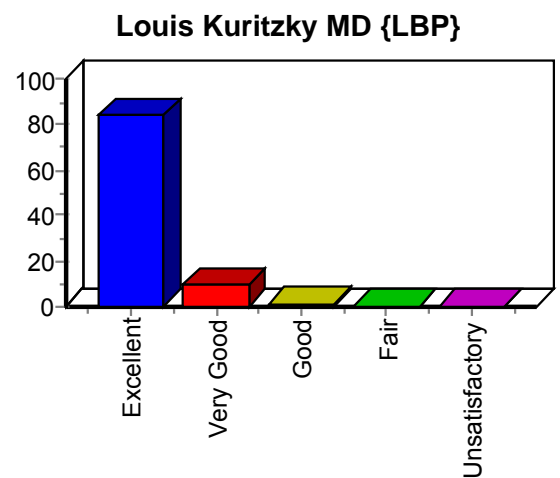
In terms of delivery of the presentation, please rate the effectiveness of the speaker: Nelson Watts, MD (Osteo):

Label	Frequency	Percent	Valid Percent
Excellent	83	69.17	72.17
Very Good	26	21.67	22.61
Good	3	2.50	2.61
Fair	1	0.83	0.87
Unsatisfactory	2	1.67	1.74
Total Valid	115	95.83	100.00
Total Missing	5	4.17	
Total	120	100.00	



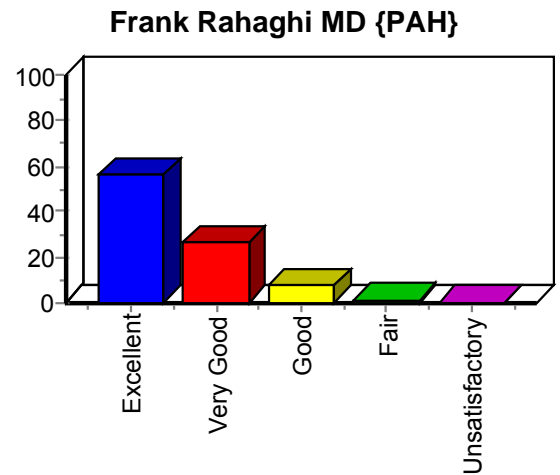
In terms of delivery of the presentation, please rate the effectiveness of the speaker: Louis Kuritzky, MD (LBP):

Label	Frequency	Percent	Valid Percent
Excellent	101	84.17	89.38
Very Good	11	9.17	9.73
Good	1	0.83	0.88
Fair	0	0.00	0.00
Unsatisfactory	0	0.00	0.00
Total Valid	113	94.17	100.00
Total Missing	7	5.83	
Total	120	100.00	



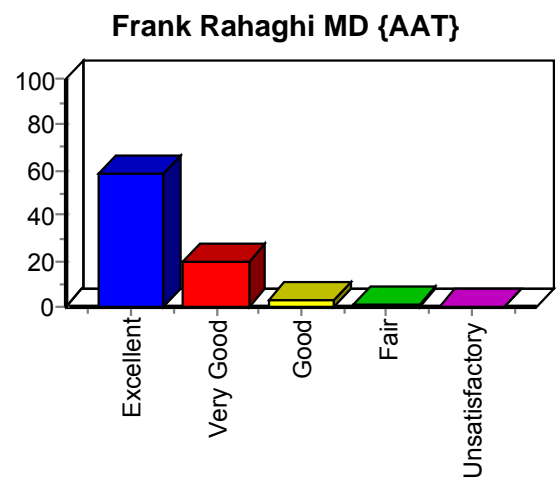
In terms of delivery of the presentation, please rate the effectiveness of the speaker: Frank Rahaghi, MD (PAH):

Label	Frequency	Percent	Valid Percent
Excellent	67	55.83	62.04
Very Good	31	25.83	28.70
Good	9	7.50	8.33
Fair	1	0.83	0.93
Unsatisfactory	0	0.00	0.00
Total Valid	108	90.00	100.00
Total Missing	12	10.00	
Total	120	100.00	



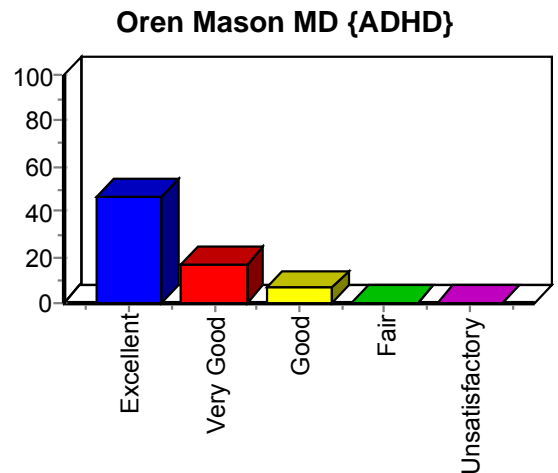
In terms of delivery of the presentation, please rate the effectiveness of the speaker: Frank Rahaghi, MD (AAT):

Label	Frequency	Percent	Valid Percent
Excellent	71	59.17	71.72
Very Good	24	20.00	24.24
Good	3	2.50	3.03
Fair	1	0.83	1.01
Unsatisfactory	0	0.00	0.00
Total Valid	99	82.50	100.00
Total Missing	21	17.50	
Total	120	100.00	



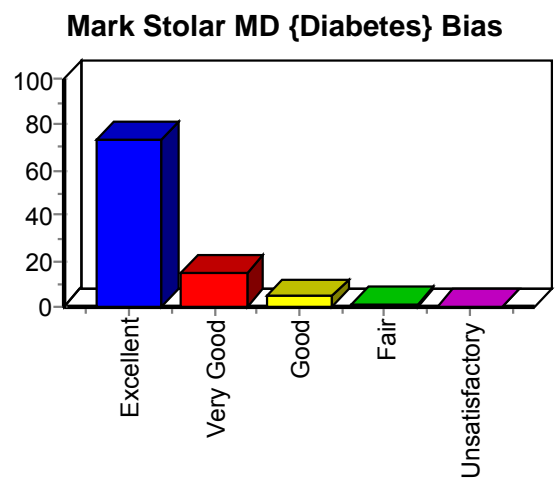
In terms of delivery of the presentation, please rate the effectiveness of the speaker: Oren Mason, MD (ADHD):

Label	Frequency	Percent	Valid Percent
Excellent	56	46.67	66.67
Very Good	20	16.67	23.81
Good	8	6.67	9.52
Fair	0	0.00	0.00
Unsatisfactory	0	0.00	0.00
Total Valid	84	70.00	100.00
Total Missing	36	30.00	
Total	120	100.00	



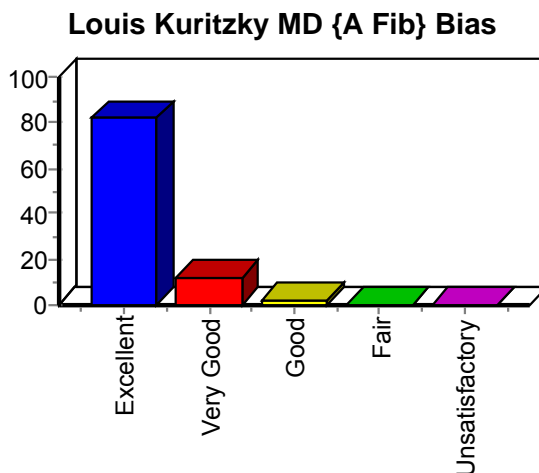
To what degree do you believe that the subject matter was presented fair, balanced, and free of commercial bias? Mark Stolar, MD (Diabetes):

Label	Frequency	Percent	Valid Percent
Excellent	89	74.17	78.07
Very Good	18	15.00	15.79
Good	6	5.00	5.26
Fair	1	0.83	0.88
Unsatisfactory	0	0.00	0.00
Total Valid	114	95.00	100.00
Total Missing	6	5.00	
Total	120	100.00	



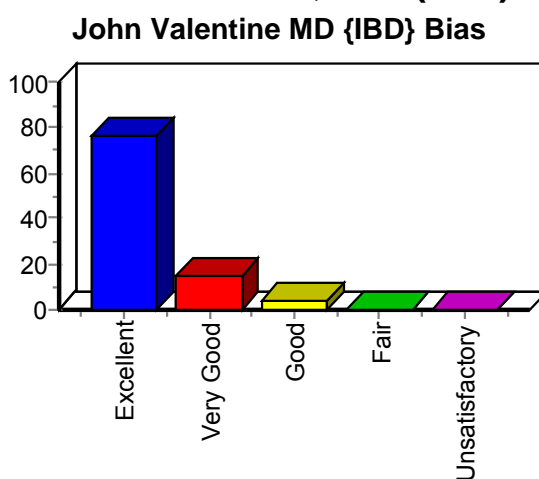
To what degree do you believe that the subject matter was presented fair, balanced, and free of commercial bias? Louis Kuritzky, MD (A Fib):

Label	Frequency	Percent	Valid Percent
Excellent	99	82.50	85.34
Very Good	15	12.50	12.93
Good	2	1.67	1.72
Fair	0	0.00	0.00
Unsatisfactory	0	0.00	0.00
Total Valid	116	96.67	100.00
Total Missing	4	3.33	
Total	120	100.00	



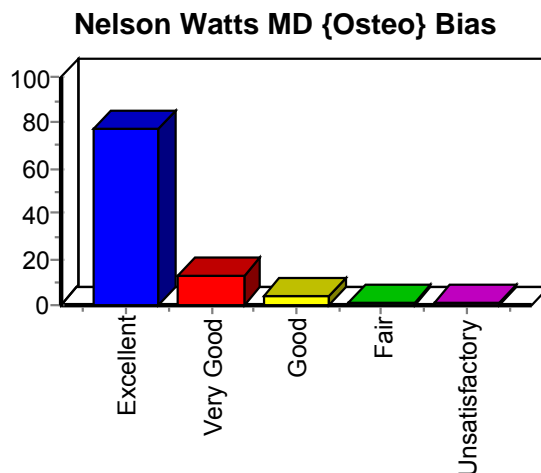
To what degree do you believe that the subject matter was presented fair, balanced, and free of commercial bias? John Valentine, MD (IBD):

Label	Frequency	Percent	Valid Percent
Excellent	92	76.67	80.70
Very Good	18	15.00	15.79
Good	4	3.33	3.51
Fair	0	0.00	0.00
Unsatisfactory	0	0.00	0.00
Total Valid	114	95.00	100.00
Total Missing	6	5.00	
Total	120	100.00	



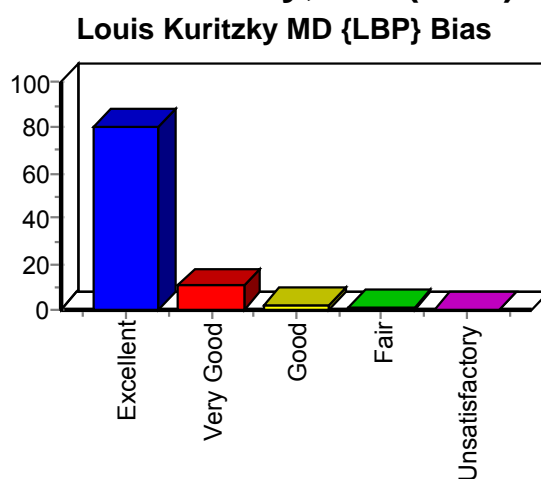
To what degree do you believe that the subject matter was presented fair, balanced, and free of commercial bias? Nelson Watts, MD (Osteo):

Label	Frequency	Percent	Valid Percent
Excellent	93	77.50	80.87
Very Good	16	13.33	13.91
Good	4	3.33	3.48
Fair	1	0.83	0.87
Unsatisfactory	1	0.83	0.87
Total Valid	115	95.83	100.00
Total Missing	5	4.17	
Total	120	100.00	



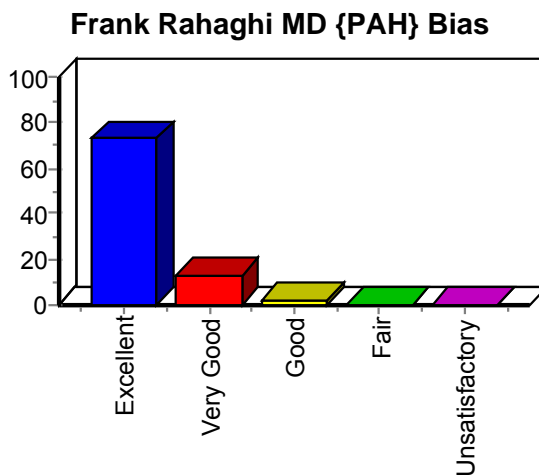
To what degree do you believe that the subject matter was presented fair, balanced, and free of commercial bias? Louis Kuritzky, MD (LBP):

Label	Frequency	Percent	Valid Percent
Excellent	97	80.83	86.61
Very Good	12	10.00	10.71
Good	2	1.67	1.79
Fair	1	0.83	0.89
Unsatisfactory	0	0.00	0.00
Total Valid	112	93.33	100.00
Total Missing	8	6.67	
Total	120	100.00	



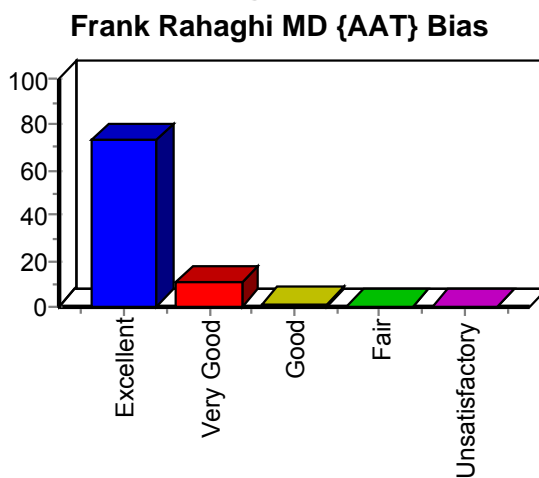
To what degree do you believe that the subject matter was presented fair, balanced, and free of commercial bias? Frank Rahaghi, MD (PAH):

Label	Frequency	Percent	Valid Percent
Excellent	88	73.33	83.02
Very Good	16	13.33	15.09
Good	2	1.67	1.89
Fair	0	0.00	0.00
Unsatisfactory	0	0.00	0.00
Total Valid	106	88.33	100.00
Total Missing	14	11.67	
Total	120	100.00	



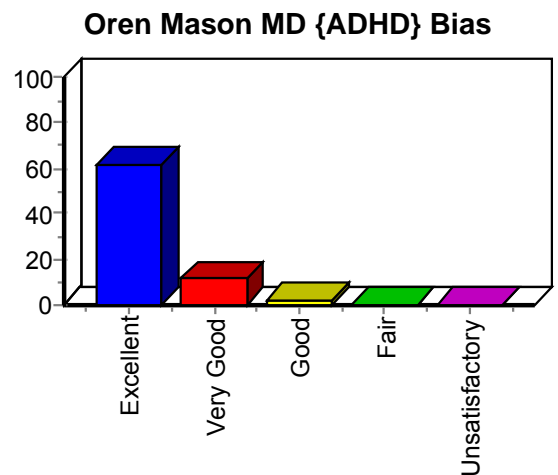
To what degree do you believe that the subject matter was presented fair, balanced, and free of commercial bias? Frank Rahaghi, MD (AAT):

Label	Frequency	Percent	Valid Percent
Excellent	87	72.50	87.00
Very Good	12	10.00	12.00
Good	1	0.83	1.00
Fair	0	0.00	0.00
Unsatisfactory	0	0.00	0.00
Total Valid	100	83.33	100.00
Total Missing	20	16.67	
Total	120	100.00	



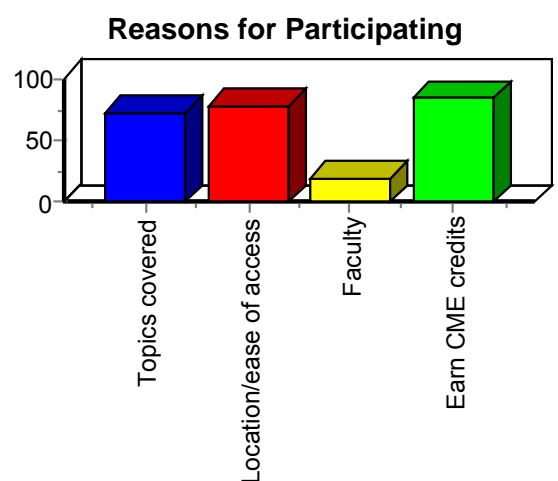
To what degree do you believe that the subject matter was presented fair, balanced, and free of commercial bias? Oren Mason, MD (ADHD):

Label	Frequency	Percent	Valid Percent
Excellent	74	61.67	82.22
Very Good	14	11.67	15.56
Good	2	1.67	2.22
Fair	0	0.00	0.00
Unsatisfactory	0	0.00	0.00
Total Valid	90	75.00	100.00
Total Missing	30	25.00	
Total	120	100.00	



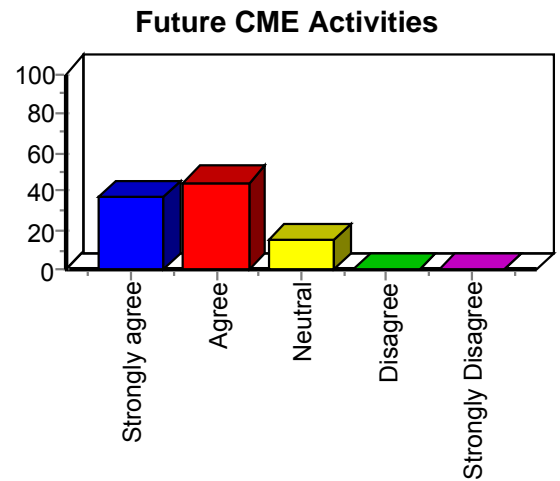
Which statement(s) best reflects your reasons for participating in this activity:

Label	Frequency	Percent	Valid Percent
Topics covered	87	72.50	73.11
Location/ease of access	93	77.50	78.15
Faculty	22	18.33	18.49
Earn CME credits	101	84.17	84.87
Total Valid	119	99.17	100.00
Total Missing	1	0.83	
Total	120	100.00	



Future CME activities concerning this subject matter are necessary:

Label	Frequency	Percent	Valid Percent
Strongly agree	45	37.50	38.79
Agree	53	44.17	45.69
Neutral	18	15.00	15.52
Disagree	0	0.00	0.00
Strongly Disagree	0	0.00	0.00
Total Valid	116	96.67	100.00
Total Missing	4	3.33	
Total	120	100.00	



What is your professional degree?

Comment
FNP Student

What is your specialty?

Comment
Family Medicine
Orthopedics
Internal Medicine
Family Medicine
Allergy
Internal Medicine
Urgent Care
Urology
Urology
Urology
Pediatrics
Geriatrics
Psychiatry
Administrative

As a result of this activity, I have learned new strategies for patient care. List these strategies:

Comment
Use CHADS2 to make choices in A fib. Use FRAX for osteoporosis
Use of FRAX and CHADS2. Increased surveillance for AATD
More aggressive treatment of DM earlier and test for AAT
Use of new medications
Waddell's signs
Learning indications for new medications
Determining the best treatment of selected osteoporosis patients
Combo therapy early in the management of diabetes
CHADS use and check vitamin D levels
More analytical approach to treatment
Correct tests to order when considering pulmonary HTN
ADHD screening tool
Screen and follow up more aggressively for osteoporosis
New ways to implement pharmacotherapy when treating patients
Use CHADS and more effective screening for ADHD
New drugs and appropriate indication/side effects in treating the individual patient
I will be more aggressive in testing COPD patients for AAT
Better understanding of DM and best treatments. I am much better able to risk stratify A fib patients

Comment
Testing for osteoporosis
More use of agents in DM
Early treatment for osteoporosis
Use FRAX and rethink diabetic medications
Think more critically about IBS vs IBD. Keep working on smoking cessation for all
Medication interactions in diabetes
CHAD scoring consideration and increased awareness of IBD medications
Appropriate treatment for osteoporosis
Evaluate AF patients with CHADS
How to treat back pain
Use of CHADS score and use of FRAX
Management of back pain and best medications for osteoporosis
Screening tests and CHADS2
Use of CHADS
Screening tools
Better screening for osteoporosis and effectively treat low back pain
Use of insulins and GLP1
CHADS2 and low back pain
Use of CHADS
Use CHADS score
Importance of early control of diabetes
Treat diabetes earlier and better awareness of osteoporosis
Earlier consideration multiple medications in diabetes
Use CHADS score to risk stratify
Use CHADS to guide therapy
Use Frax tool
Use CHADS and understand much more about pulmonary hypertremia
Understanding PAH
Great refresher and update on primary care issues. Treatment for IBD
Patient testing and pain management
Use CHADS score
Increase testing for osteoporosis. Better understanding of new anti thrombotic
New diabetes management
Use of anticoagulants
Treatment and diagnostic strategies
AAT testing for all COPD patients
FRAX for osteoporosis
FRAX use in osteoporosis
Start Dm treatment with 2 drugs. Consider adult ADHD diagnosis more often
Apply CHADS2 score and screen for AAT deficiency
PDE-5 inhibitors not only aren't prohibited in PAH but may be helpful
Check AAT levels for COPD patients
Using the CHADS2 and FRAX tools. Management for back pain and treatment options
Start insulin earlier and use CHADS more frequently

Comment
Lower A1C goals
Like the approach to LBP
LBP approach and use of meds in OP
Considering AAT testing for COPD patients and using the CHADS scoring
Management of IBD and pain management
Avoiding narcotics in those with low back pain
Low back pain treatment and testing AAT
Reevaluate osteoporosis treatment choices and diabetes treatments
Consider IBD earlier and increase use of GLP
Use of CHADS2 and better understanding and treatment of Crohn's
Cymbalta for chronic LBP
Different Rx for pulmonary hypertension
Starting treatment earlier
Back pain treatment
Use of multiple drugs for diabetes. Start using FRAX to determine if OP needs to be started
I will employ physical therapy at a sooner rate
Cymbalta as alternative to LBP and CHADS and FRAX uses

What topics would you like to see offered as CME activities in the future?

Comment
More on pulmonary hypertension
Migraines and the dizzy patient
Skin cancers
Dementia and delirium
Chronic liver disease
Pediatrics and family practice
Obesity
Thyroid disorders
Joint pain
Lipid management
Arthritis treatment
Orthopedics for primary care
Hormone replacement therapy
Dermatology and depression
Hypertension
Anything dermatology related
Asthma management and HTN management
More pain management
Alternative medications for common geriatric problems
Radiology and orthopedics
HTN/COPD/hyperlipidemia
EOE

Comment
Pain management
DVT management and pelvic pain
Psychiatry issues
Depression in primary care
More women's based health issues
Renal failure and hyperthyroidism
STD treatments and advances
Heart failure and more on diabetes
Review of new therapeutics
Gyn and dermatology
Dermatology/COPD/PCOS/Fibromyalgia
Depression and anxiety
Women's health
Hypertension
Lipids
Preventative medicine
Geriatrics
Urology topics
Pediatrics
Dermatology
Addiction treatment
Testosterone replacement
Infectious diseases and menopause
Alzheimer's disease
Pediatric and sports medicine topics
Chronic pain management
Endocrine topics
Hypertension and hyperlipidemia
More on diabetes
Dermatology
More on diabetes
ASVD management
Depression and use of opioids in the primary setting
CAD and COPD
Orthopedics in primary care and chronic pain management
Depression/anxiety and ADHD
HTN and GERD

Additional comments:

Comment
Thank you-excellent
The hotel was excellent
Very strong presentations

Comment
I have paid a lot of money for conferences not as good as this one-well done
Dr. Valentine's information was excellent
Thank you-one of the best CME programs I have been to in a while and a great price
Excellent program
Thank you
Great hotel and a wonderful location-thanks
Great program! I especially enjoyed Dr. Kuritzky
Dr. Kuritzky was fantastic
Great conference
Have paid hundreds in past for similar programs and most did not compare in presentation/facility or even the lunch! Great job!
Very good conference
This is always a great conference
Excellent speakers and good audience participation
Thank you for a well designed and informative CME program. I have attended many NACE programs all of which were very good but this was the best
Excellent
Excellent
Excellent again!
Too long for a CME event even though there were very good topics presented
Regular attendee of NACE conferences and again really enjoyed the overall experience but most of all the free/quality and evidenced-based CME's!
Dr. Kuritzky is a great speaker
Thank you
Thank you for this educational opportunity
Probably the best conference topics/faculty/lack of commercial bias that I have been to short of AAFP national conference
I really enjoyed this event and will be back
I liked the case scenarios
Great program and much better than last year
Excellent course-great CME!
Very useful again this year
Thank you
Good speakers
Great day
Thank you so much-great information
Dr. Kuritzky was a really good presenter
Thank you
Excellent schedule
Dr. Kuritzky was excellent
Excellent-please provide more seminars
Excellent program
Thank you
Great speakers-amazing that this conference is available for free

Comment
Very good

Item Statistics:

	Title	Specialty	Learning Objectives1	Learning Objectives2	Learning Objectives3	Learning Objectives4	Learning Objectives5
Mean	2.23	2.12	1.15	1.03	1.28	1.07	1.03
	Learning Objectives6	Learning Objectives7	Learning Objectives8	Overall Activity	Enhancing My Confidence	Improving My Knowledge	Patient Care
Mean	1.35	1.20	1.13	1.44	1.58	1.45	1.53
	Make Changes	Implement New Strategies	Mark Stolar MD {Diabetes}	Louis Kuritzky MD {A Fib}	John Valentine MD {IBD}	Nelson Watts MD {Osteo}	Louis Kuritzky MD {LBP}
Mean	1.57	1.57	4.65	4.81	4.35	4.63	4.88
	Frank Rahaghi MD {PAH}	Frank Rahaghi MD {AAT}	Oren Mason MD {ADHD}	Mark Stolar MD {Diabetes} Bias	Louis Kuritzky MD {A Fib} Bias	John Valentine MD {IBD} Bias	Nelson Watts MD {Osteo} Bias
Mean	4.52	4.67	4.57	4.71	4.84	4.77	4.73
	Louis Kuritzky MD {LBP} Bias	Frank Rahaghi MD {PAH} Bias	Frank Rahaghi MD {AAT} Bias	Oren Mason MD {ADHD} Bias	Reasons for Participating	Future CME Activities	
Mean	4.83	4.81	4.86	4.80	-	1.77	