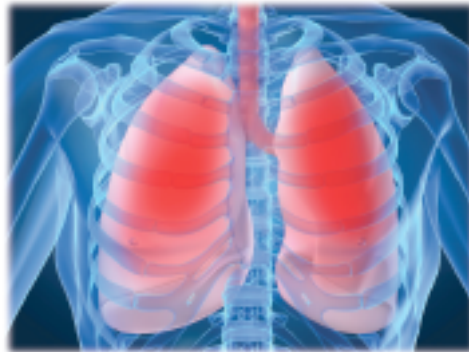# NACE
NATIONAL ASSOCIATION FOR CONTINUING EDUCATION

300 Northwest 70th Avenues, Suite 102 • Plantation, Florida 33317
(954) 723-0057 Phone • (954) 723-0353 Fax
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Challenges in Pulmonary and Critical Care: 2013

December 7, 2013
Cleveland Clinic Florida
Weston, FL

Course Director
Franck Rahaghi, MD, MHS, FCCP

Program Evaluation
January 7, 2014

In December 2013, the National Association for Continuing Education (NACE) sponsored a CME activity, *Challenges in Pulmonary and Critical: 2013*, in Weston, FL.

This educational activity was designed to provide an update in the prevention, diagnosis, and management of pulmonary disease to pulmonologists, hospitalists, and other health care providers who treat patients with pulmonary diseases. Current findings in pulmonary research in such topics as pulmonary arterial hypertension, bronchoscopy, COPD, alpha-1 antitrypsin deficiency, PE & CTEPH, idiopathic pulmonary fibrosis, and lung cancer were presented.

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 eight healthcare practitioners registered to attend *Challenges in Pulmonary and Critical: 2013* in Weston, FL. One hundred twenty nine 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 nineteen 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 7 *AMA PRA Category 1 Credits™.* Physicians should claim only the credit commensurate with the extent of their participation in the activity.

National Association for Continuing Education is approved as a provider of nurse practitioner continuing education by the American Association of Nurse Practitioners. AANP Provider Number 121222. This program has been approved for 7.0 contact hours of continuing education (which includes .75 hours of pharmacology).

What is your professional degree?

Label	Frequency	Percent	Valid Percent
MD	76	63.87	63.87
DO	4	3.36	3.36
NP	10	8.40	8.40
PA	10	8.40	8.40
RN	5	4.20	4.20
Other	15	12.61	12.61
Total Valid	119	100.00	100.00

Title
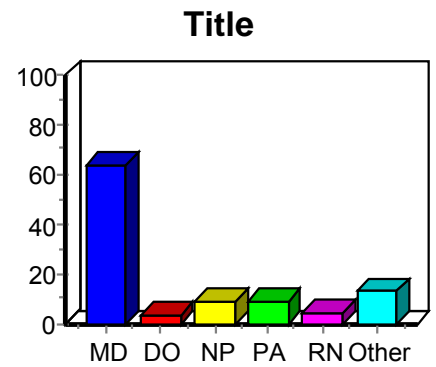
What is your specialty?

| Label	Frequency	Percent	Valid Percent
Primary Care	55	46.22	46.61
Endocrinology	0	0.00	0.00
Rheumatology	2	1.68	1.69
Pulmonology	36	30.25	30.51
Cardiology	2	1.68	1.69
Gastroenterology	1	0.84	0.85
Other	22	18.49	18.64
Total Valid	118	99.16	100.00
Total Missing	1	0.84	
Total	119	100.00	

Specialty
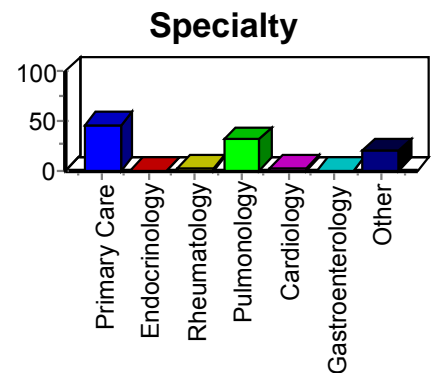
Upon completion of this activity, I can now - Discuss the pathophysiology of pulmonary arterial hypertension (PAH); describe the workup of patients suspected of having PAH; explain criteria for diagnosis and accurate assessment of disease severity in patients with PAH; address therapeutic options in the management of patients with PAH and effective use of targeted treatment options for PAH:

| Label	Frequency	Percent	Valid Percent
Yes	81	68.07	70.43
Somewhat	34	28.57	29.57
Not at all	0	0.00	0.00
Total Valid	115	96.64	100.00
Total Missing	4	3.36	
Total	119	100.00	

Learning Objectives1
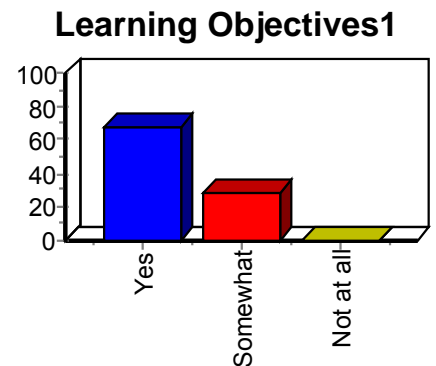
Upon completion of this activity, I can now - Define the tools available to interventional bronchoscopy; explain patient selection criteria for interventional bronchoscopy; and discuss the pipeline of new procedures:

| Label	Frequency	Percent	Valid Percent
Yes	82	68.91	69.49
Somewhat	33	27.73	27.97
Not at all	3	2.52	2.54
Total Valid	118	99.16	100.00
Total Missing	1	0.84	
Total	119	100.00	

Learning Objectives2
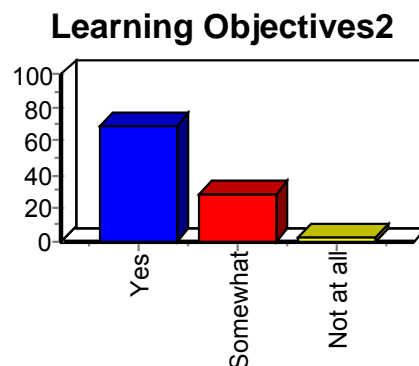
Upon completion of this activity, I can now - Address the pathogenesis and diagnosis of COPD; discuss findings of recent trials and evidence-based treatment options for COPD; describe the new GOLD guidelines; and discuss new and evolving treatments for COPD:

| Label	Frequency	Percent	Valid Percent
Yes	105	88.24	88.24
Somewhat	14	11.76	11.76
Not at all	0	0.00	0.00
Total Valid	119	100.00	100.00

Learning Objectives3
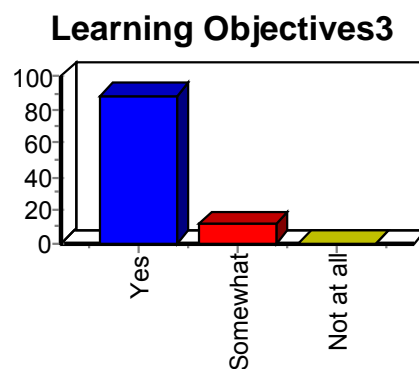
Upon completion of this activity, I can now - Discuss the etiology of alpha-1 antitrypsin deficiency (AATD); explain the treatments for AATD; and address how to change your office flow to incorporate testing for AATD, utilization of ancillary staff, and the pulmonary function lab:

| Label	Frequency	Percent	Valid Percent
Yes	93	78.15	79.49
Somewhat	21	17.65	17.95
Not at all	3	2.52	2.56
Total Valid	117	98.32	100.00
Total Missing	2	1.68	
Total	119	100.00	

Learning Objectives4
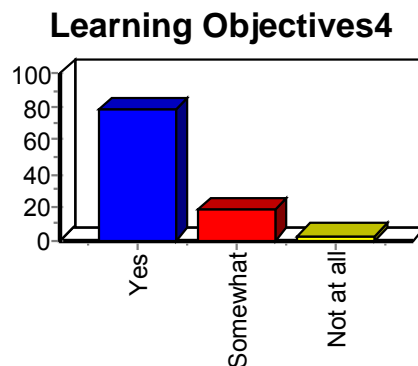
Upon completion of this activity, I can now - Address the diagnosis of pulmonary embolism (PE) and chronic thromboembolic pulmonary hypertension (CTEPH) with emphasis on the role of the ventilation perfusion (VQ) scan; describe the current management of PE; and explain surgical and new therapeutic options for CTEPH:

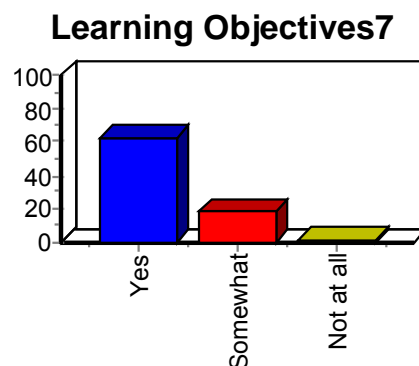| Label	Frequency	Percent	Valid Percent
Yes	89	74.79	81.65
Somewhat	17	14.29	15.60
Not at all	3	2.52	2.75
Total Valid	109	91.60	100.00
Total Missing	10	8.40	
Total	119	100.00	

Learning Objectives5
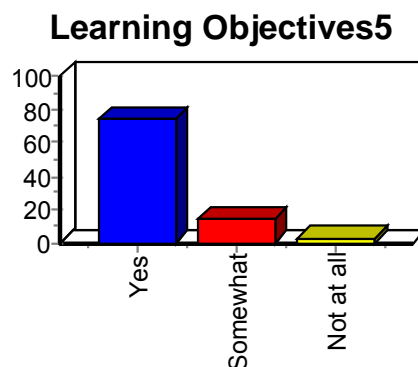
Upon completion of this activity, I can now - Describe the state-of-the-art approach to diagnosing idiopathic pulmonary fibrosis (IPF) from among a range of diffuse parenchymal lung disorders; define prognostic features for individual IPF patients; explain appropriate pharmacotherapeutic options for individual IPF patients while having a general understanding of the options under intense investigation; and discuss the role of available nonpharmacological therapies including pulmonary rehabilitation, oxygen supplementation and lung transplantation in IPF management:

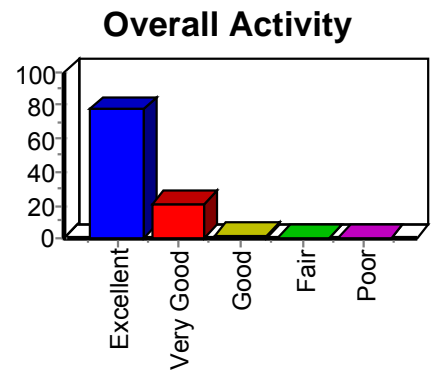| Label	Frequency	Percent	Valid Percent
Yes	81	68.07	76.42
Somewhat	21	17.65	19.81
Not at all	4	3.36	3.77
Total Valid	106	89.08	100.00
Total Missing	13	10.92	
Total	119	100.00	

Learning Objectives6
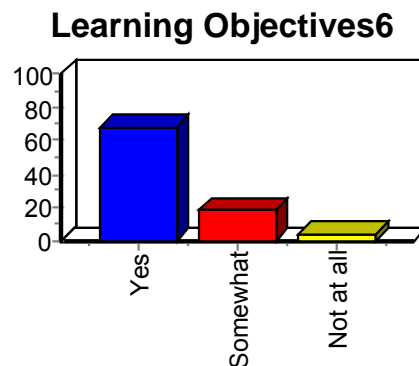
Upon completion of this activity, I can now - Discuss the screening of patients for lung cancer; explain approaches to evaluation of pulmonary nodules and the importance of adequate tissue acquisition for histology and molecular characterization as it pertains to treatment decisions; describe the current classification of lung cancer patients; explain new treatment options and genetics for lung cancer; and discuss future developments in the treatment of lung cancer:

Label	Frequency	Percent	Valid Percent
Yes	75	63.03	76.53
Somewhat	21	17.65	21.43
Not at all	2	1.68	2.04
Total Valid	98	82.35	100.00
Total Missing	21	17.65	
Total	119	100.00	

Learning Objectives7

Overall, I would rate this activity as:

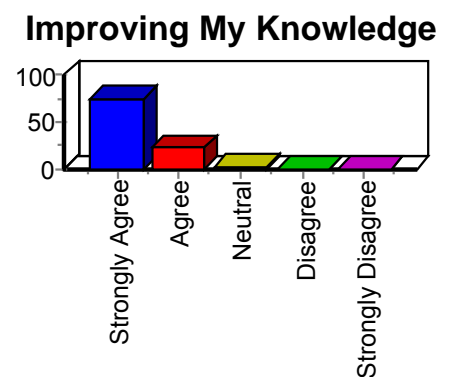| Label	Frequency	Percent	Valid Percent
Excellent	93	78.15	78.15
Very Good	25	21.01	21.01
Good	1	0.84	0.84
Fair	0	0.00	0.00
Poor	0	0.00	0.00
Total Valid	119	100.00	100.00

Overall Activity

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	82	68.91	68.91
Agree	33	27.73	27.73
Neutral	4	3.36	3.36
Disagree	0	0.00	0.00
Strongly Disagree	0	0.00	0.00
Total Valid	119	100.00	100.00

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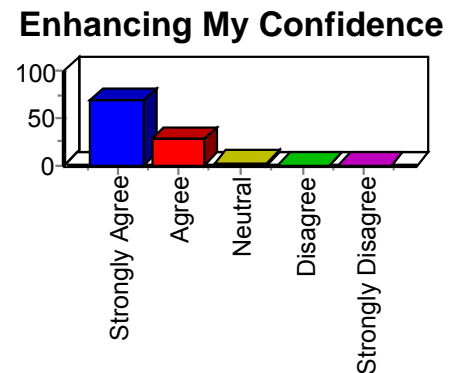
Overall, this activity was effective in improving my knowledge in the content areas presented:

Improving My Knowledge

Label	Frequency	Percent	Valid Percent
Strongly Agree	89	74.79	74.79
Agree	28	23.53	23.53
Neutral	2	1.68	1.68
Disagree	0	0.00	0.00
Strongly Disagree	0	0.00	0.00
Total Valid	119	100.00	100.00

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

Label	Frequency	Percent	Valid Percent
Strongly Agree	76	63.87	64.41
Agree	37	31.09	31.36
Neutral	5	4.20	4.24
Disagree	0	0.00	0.00
Strongly Disagree	0	0.00	0.00
Total Valid	118	99.16	100.00
Total Missing	1	0.84	
Total	119	100.00	

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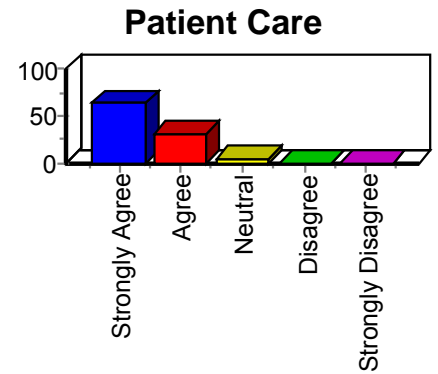
How likely are you to implement these new strategies in your practice?

Label	Frequency	Percent	Valid Percent
Very likely	64	53.78	55.65
Somewhat likely	26	21.85	22.61
Unlikely	2	1.68	1.74
Not applicable	23	19.33	20.00
Total Valid	115	96.64	100.00
Total Missing	4	3.36	
Total	119	100.00	

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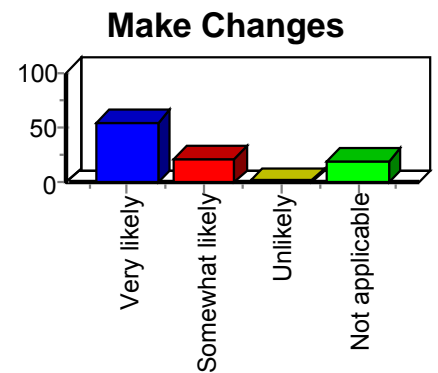
When do you intend to implement these new strategies into your practice?

Label	Frequency	Percent	Valid Percent
Within 1 month	57	47.90	50.89
1-3 months	24	20.17	21.43
4-6 months	5	4.20	4.46
Not applicable	26	21.85	23.21
Total Valid	112	94.12	100.00
Total Missing	7	5.88	
Total	119	100.00	

Implement New Strategies
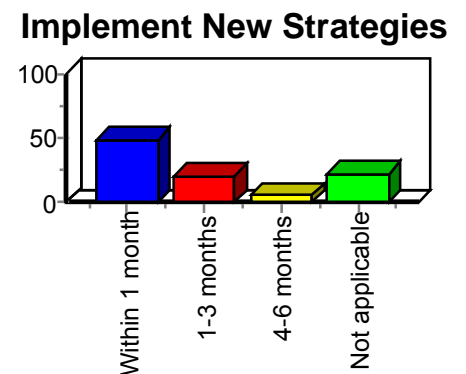
In terms of delivery of the presentation, please rate the effectiveness of the speaker: Murali Chakinala, MD, FCCP (PH):

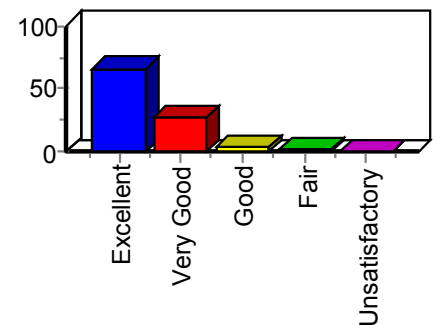| Label	Frequency	Percent	Valid Percent
Excellent	99	83.19	87.61
Very Good	13	10.92	11.50
Good	1	0.84	0.88
Fair	0	0.00	0.00
Unsatisfactory	0	0.00	0.00
Total Valid	113	94.96	100.00
Total Missing	6	5.04	
Total	119	100.00	

Murali Chakinala MD {PH}
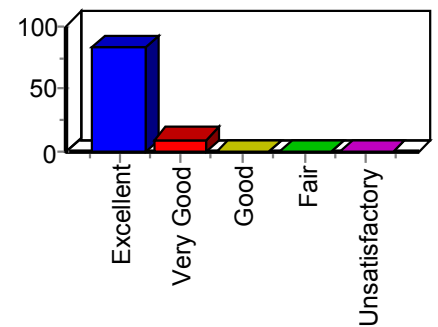
In terms of delivery of the presentation, please rate the effectiveness of the speaker: Eduardo Oliveira, MD (Bronch):

Label	Frequency	Percent	Valid Percent
Excellent	78	65.55	66.67
Very Good	32	26.89	27.35
Good	5	4.20	4.27
Fair	2	1.68	1.71
Unsatisfactory	0	0.00	0.00
Total Valid	117	98.32	100.00
Total Missing	2	1.68	
Total	119	100.00	

Eduardo Oliveira MD {Bronch}

In terms of delivery of the presentation, please rate the effectiveness of the speaker: Anas Hadeh, MD, FCCP (COPD):

Label	Frequency	Percent	Valid Percent
Excellent	89	74.79	76.72
Very Good	21	17.65	18.10
Good	5	4.20	4.31
Fair	1	0.84	0.86
Unsatisfactory	0	0.00	0.00
Total Valid	116	97.48	100.00
Total Missing	3	2.52	
Total	119	100.00	

Anas Hadeh MD {COPD}
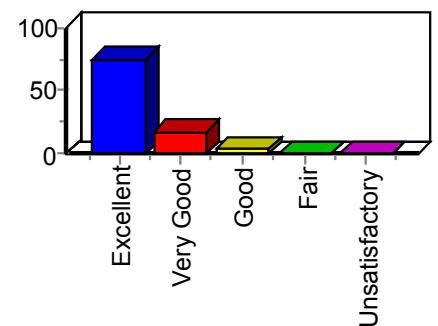
In terms of delivery of the presentation, please rate the effectiveness of the speaker: Robert Sandhaus, MD (Alpha-1):

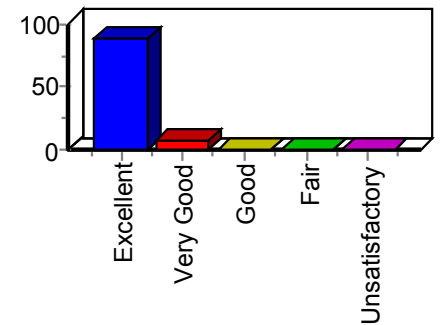| Label	Frequency	Percent	Valid Percent
Excellent	105	88.24	92.92
Very Good	8	6.72	7.08
Good	0	0.00	0.00
Fair	0	0.00	0.00
Unsatisfactory	0	0.00	0.00
Total Valid	113	94.96	100.00
Total Missing	6	5.04	
Total	119	100.00	

Robert Sandhaus MD {Alpha-1}

In terms of delivery of the presentation, please rate the effectiveness of the speaker: Charles Burger, MD (PE):

Label	Frequency	Percent	Valid Percent
Excellent	92	77.31	88.46
Very Good	11	9.24	10.58
Good	1	0.84	0.96
Fair	0	0.00	0.00
Unsatisfactory	0	0.00	0.00
Total Valid	104	87.39	100.00
Total Missing	15	12.61	
Total	119	100.00	

Charles Burger MD {PE}
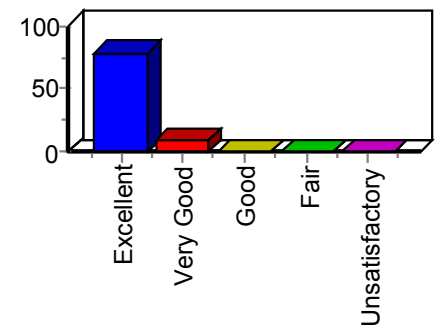
In terms of delivery of the presentation, please rate the effectiveness of the speaker: Franck Rahaghi, MD (IPF):

Label	Frequency	Percent	Valid Percent
Excellent	88	73.95	87.13
Very Good	11	9.24	10.89
Good	2	1.68	1.98
Fair	0	0.00	0.00
Unsatisfactory	0	0.00	0.00
Total Valid	101	84.87	100.00
Total Missing	18	15.13	
Total	119	100.00	

Franck Rahaghi MD {IPF}
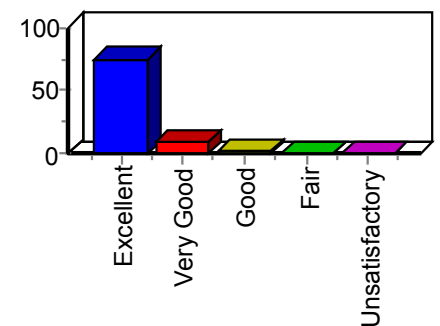
**In terms of delivery of the presentation, please rate the effectiveness of the speaker: Jinesh Mehta, MD (Lung):**

Label	Frequency	Percent	Valid Percent
Excellent	79	66.39	88.76
Very Good	8	6.72	8.99
Good	2	1.68	2.25
Fair	0	0.00	0.00
Unsatisfactory	0	0.00	0.00
Total Valid	89	74.79	100.00
Total Missing	30	25.21	
Total	119	100.00	
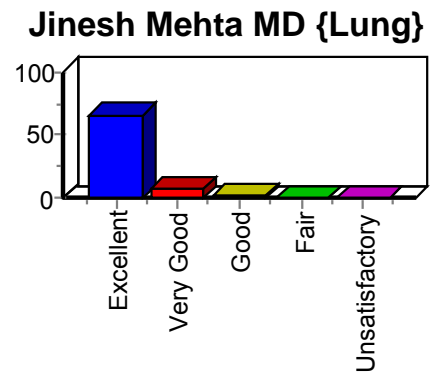
Jinesh Mehta MD {Lung}

To what degree do you believe that the subject matter was presented fair, balanced, and free of commercial bias? Murali Chakinala, MD, FCCP (PH):

Label	Frequency	Percent	Valid Percent
Excellent	104	87.39	93.69
Very Good	7	5.88	6.31
Good	0	0.00	0.00
Fair	0	0.00	0.00
Unsatisfactory	0	0.00	0.00
Total Valid	111	93.28	100.00
Total Missing	8	6.72	
Total	119	100.00	
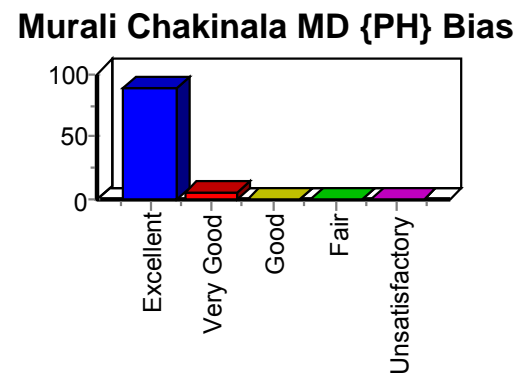
Murali Chakinala MD {PH} Bias

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

Label	Frequency	Percent	Valid Percent
Excellent	107	89.92	93.86
Very Good	7	5.88	6.14
Good	0	0.00	0.00
Fair	0	0.00	0.00
Unsatisfactory	0	0.00	0.00
Total Valid	114	95.80	100.00
Total Missing	5	4.20	
Total	119	100.00	

Eduardo Oliveira MD {Bronch} Bias

To what degree do you believe that the subject matter was presented fair, balanced, and free of commercial bias? Anas Hadeh, MD, FCCP (COPD):

Label	Frequency	Percent	Valid Percent
Excellent	107	89.92	93.86
Very Good	6	5.04	5.26
Good	1	0.84	0.88
Fair	0	0.00	0.00
Unsatisfactory	0	0.00	0.00
Total Valid	114	95.80	100.00
Total Missing	5	4.20	
Total	119	100.00	

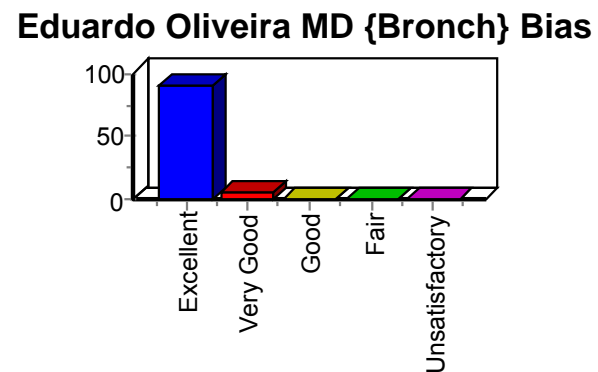### Anas Hadeh MD {COPD} Bias

To what degree do you believe that the subject matter was presented fair, balanced, and free of commercial bias? Robert Sandhaus, MD (Alpha-1):

Label	Frequency	Percent	Valid Percent
Excellent	105	88.24	93.75
Very Good	7	5.88	6.25
Good	0	0.00	0.00
Fair	0	0.00	0.00
Unsatisfactory	0	0.00	0.00
Total Valid	112	94.12	100.00
Total Missing	7	5.88	
Total	119	100.00	

Robert Sandhaus MD {Alpha-1} Bias

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

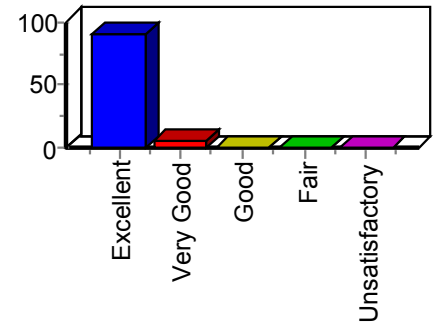| Label	Frequency	Percent	Valid Percent
Excellent	99	83.19	94.29
Very Good	6	5.04	5.71
Good	0	0.00	0.00
Fair	0	0.00	0.00
Unsatisfactory	0	0.00	0.00
Total Valid	105	88.24	100.00
Total Missing	14	11.76	
Total	119	100.00	

Charles Burger MD {PE} Bias

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

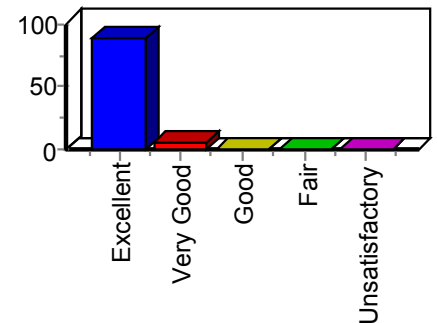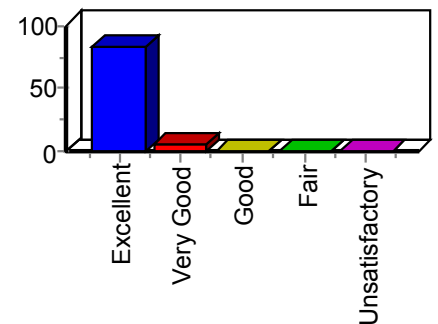| Label	Frequency	Percent	Valid Percent
Excellent	95	79.83	93.14
Very Good	6	5.04	5.88
Good	1	0.84	0.98
Fair	0	0.00	0.00
Unsatisfactory	0	0.00	0.00
Total Valid	102	85.71	100.00
Total Missing	17	14.29	
Total	119	100.00	

Franck Rahaghi MD {IPF} Bias
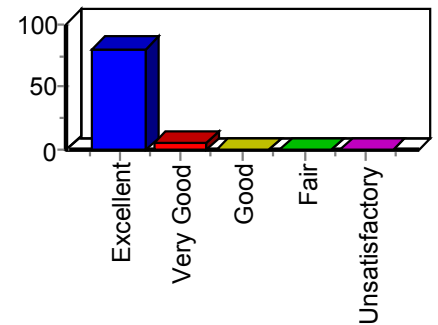
To what degree do you believe that the subject matter was presented fair, balanced, and free of commercial bias? Jinesh Mehta, MD (Lung):

Label	Frequency	Percent	Valid Percent
Excellent	87	73.11	93.55
Very Good	6	5.04	6.45
Good	0	0.00	0.00
Fair	0	0.00	0.00
Unsatisfactory	0	0.00	0.00
Total Valid	93	78.15	100.00
Total Missing	26	21.85	
Total	119	100.00	

Jinesh Mehta MD {Lung} Bias
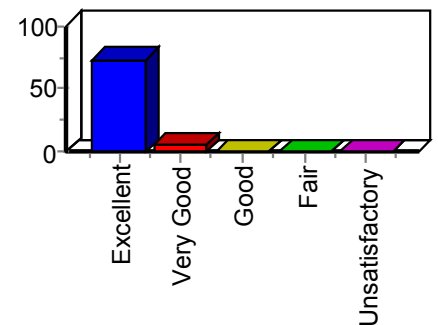
Which statement(s) best reflects your reasons for participating in this activity:

Label	Frequency	Percent	Valid Percent
Topics covered	104	87.39	87.39
Location/ease of access	87	73.11	73.11
Faculty	50	42.02	42.02
Earn CME credits	92	77.31	77.31
Total Valid	119	100.00	100.00

Reasons for Participating
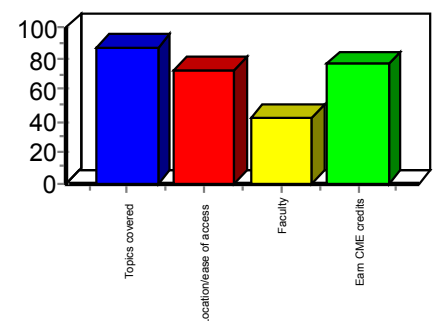
Future CME activities concerning this subject matter are necessary:

Label	Frequency	Percent	Valid Percent
Strongly agree	66	55.46	55.93
Agree	43	36.13	36.44
Neutral	9	7.56	7.63
Disagree	0	0.00	0.00
Strongly Disagree	0	0.00	0.00
Total Valid	118	99.16	100.00
Total Missing	1	0.84	
Total	119	100.00	

Future CME Activities
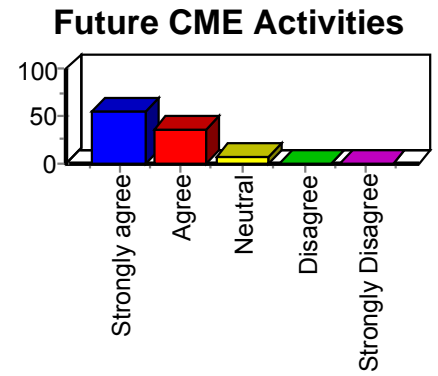
What is your professional degree?

Comment
CPCI
Geriatric
MD, PhD
RRT
(CRT) Certify Resp. Therapist
LPN
RRT
RRT
RRT
RT
RRT
RRT, MHM
RRT Respiratory

What is your specialty?

Comment
Multi-Spec
Family Medicine
Rehab (PM&R)
Emergency Medicine, Urgent Care
Doing pulmonary rehab
IR
IM/Hospitalist
Hospitalist
Correction
Emergency Medicine
Preventative Medicine doing pulmonary rehab now
Dermatology
Clinical-Anatomical Pathology
Clinical Research Fellow
Hematology/Oncology
QA/QI Coordinator
Clinical-Anatomical Pathology
Surgery
Women's Health
Thoracic Surgery
Internal Medicine
Psychiatry
Family Medicine
Pediatric, FAAP
Respiratory Care
Registered Respiratory Therapist

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

Comment
I am not treating patients - I am supervising a pulmonary rehab center - better understanding of my patients condition
I don't practice
PE management
Do mitral wal as PCP then early referral to specialist
Improved diagnostic approach and management decisions, appropriate timely referral
Improved assessment skills of patients I'm caring for
Comprehensive diag. evaluation of PM (including CATH)
Will have higher index of suspicion for PAH. Will prescribe antitropin studies for patients with cirrhosis/lung disease
Better confidence in treating and managing various lung diseases
Treat all COPD patients with AlphaOne Anti.
Checking for alpha deficiency; lung scan for chronic PS
IPH, PAH, workup and diagnosis
Management of PE, COPD, good guidelines
Enhancing knowledge allows better communication
Used the new gold guidelines for COPD treatment
Diagnosing strategies
Will consider other possibilities in diff. diagnosis for ILD. Will think more often of chronic pulmonary embolism
Complete and thorough H/P, ROS, complete diagnostic evaluation before diagnosing patient inaccurately
Diagnosing earlier at high risk patient - if CA lung; better Ro if Pulm.-HT, CURE better Rx of COPD if meds covered by insurance
More informed and able to use this knowledge to make decisions in workup; care and referrals to specialists
To start AATD testing. Individualize treatment plans. Spirometry testing at point of care in primary clinic
Pulmonary rehab/patient education
Use IVC only if contraindicative to AC. Testing for AAT DEF - finger stick. AAT Def link to liver disease. Start coumadin same day as heparin for PE. Give thrombolytic if no bleeding risk fro SBP < 90
Diagnosis and treatment
To listen
Work as a team. Clinical trials when appropriate. Education of patient and family. Office staff education
Yes, better education of pulmonary HTN and chronic CTEP
Combine Cath for PAH, never mediating/test for antitype dif. Follow the Gold guidelines. Workup IPF better
Screening for Xiaulitupin gene/deficiency; classify COPD using the guidelines to enhance treatment of COPD
Test for Alpha1 AT/Diagnosis and treatment of COPD
Better and early approach to diagnosis and treatment
Will approach and manage patients with PAH and COPD differently; improve management of PE, CTED and improve my skills on IPF diagnosis
VQ scan for CTEPH VIP Dx
Better AAT - def. screening
To improve the topics brought
Increase screening for alpha IAT deficiency - use D Dimer in F/U for patients with acute PE - to decide on stopping therapy - improve testing for patient with possible pulmonary fibrosis

Comment
Evidence based medicine
Better manage COPD and follow-up testing. Follow up after treatment trials for asthma/COPD. Recognize possibility of alpha 1 def. and to test
Bella Flum Axkan formation teslum. To verify diagnosis. Earlier referral. QA improvement
Work up
Early referral
Rx of IPF, approach to VTE. Rx of PHTN
Better understanding pul art HT therapies, interventional bronchoscopy, new criteria of Gold/Spanish guidelines on COPD. Alpha/contitrypoin def, CTEPH, IPF, Lung Cancer

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

Comment
Any in medicine
Critical care topics
Pulmonary rehab
Update in pulmonary rehab
Pneumonia
Any cardiology topics
ARDS guiding in management
Ventilation management
MOTT
Locoregional therapies on lung CA
Stroke update and management with "Golden Hour" also working with local fire response management to prevent heart damage. These two represent 80% of deaths and tissue damage that can be prevented
CAD/Infectious Disease/GI
Continue more primary care CME activities
Primary care updates
Primary care updates
Cardiovascular disease, asthma
Immunology; pain pathophysiology and management
Neurological, endocrine, infectious disease
Asthma management/bronchitis. Same in pediatrics
Hematology, cardiology, dermatology
Chronic diseases, transmittable diseases
Asthma
Any topic that adds to my medical knowledge to treat patients better
Risk management; ortho; derm; psych
Mental health and substance abuse including tobacco dependence
Excellent program
Lung transplant
Cancer, COPD
DM-II, HTN, lipids, urgent care, primary care, anemia, metabolism
Liver diseases

Comment
Dermatology, GI, Gyn
Cirf. Anemia
All diagnoses/tests
Cystic fibrosis - neuro-digenitive diseases
Sleep disorders, critical care
Osteoporosis
Management of hypertension
Neurology updates; Alzheimer's disease, Parkinson's disease, migraine, ALS, etc.
CHF
Osteoporosis, Diabetes, Prostate cancer, pre and post-op
Any
Pneumoconiosis; ARDS
ID, Hepatitis C
Lung transplant
Ultrasound techniques - EBVS
General medicine
Sleep disordered breathing/Sepsis/Hypersensitivity Pneumonity
Ventilator management
Dermatology. Pre-op evaluation
Pulmonary Rehabilitation
Critical care
Spirometry interpretation
Sleep apnea. Critical care
All of them

Additional comments:

Comment
Rheumatology, Radiation Oncology, Neurosurgery-Brain
Thank you
Generally very good presentations
Please mail me my certificate. Thank you
Add manual
Great conference
Gear to primary care - integrate patient case histories into presentation. Thanks
Excellent symposium
Excellent CME activity overall
Excellent speakers
Great CME conference overall
Thank you for another wonderful program
It was freezing in the room
Larger slide screens.
Thank you
COPD, Cancer, Infectious Disease

Comment
A very excellent activity
Larger screens needed- cannot read slides.
Very good conference
This is almost always a problem with hospital conferences - uncomfortable chairs - need tables also. Hospital staff intrusion in lunch line was very inconsiderate on their part, despite a professional conference staff informing them that lunch is for conference attendees and staff only
Please mail or fax certificate
Dr. Burger was excellent! Thank you. I am needing to report this CME prior to 12/31/2013; if possible can my certificate be emailed to me
Thank you for your efforts
Excellent
Excellent
Very good conference; good topics, food, speakers
Excellent meeting
Please mail me a paper certificate
Dr. Hadeh's presentation great
None
Very informative, time well spent
OK
Great quality presentations - excellent organization
Excellent lectures and speakers
Must stretch between lectures. Ambient temperature too cold; hot lunch appreciated
Excellent course - engaged speakers
The topics have been excellent
Great activity. Thanks
Dr. Chakinala - excellent review. COPD - more inclusive and helpful than primary Dr. Burger- loved entertain - varied tone - good comedic presentation
Thank you
Excellent conference

Item Statistics:

	Title	Specialty	Learning Objectives1	Learning Objectives2	Learning Objectives3	Learning Objectives4	Learning Objectives5
Mean	-	3.18	1.30	1.33	1.12	1.23	1.21
Variance	-	5.31	0.21	0.27	0.10	0.23	0.22
Standard Deviation	-	2.30	0.46	0.52	0.32	0.48	0.47
Standard Error	-	0.21	0.04	0.05	0.03	0.04	0.05
Minimum	-	1.00	1.00	1.00	1.00	1.00	1.00
Maximum	-	7.00	2.00	3.00	2.00	3.00	3.00

	Learning Objectives6	Learning Objectives7	Overall Activity	Enhancing My Confidence	Improving My Knowledge	Patient Care	Make Changes
Mean	1.27	1.26	1.23	1.34	1.27	1.40	1.86
Variance	0.28	0.23	0.19	0.30	0.23	0.33	1.37
Standard Deviation	0.53	0.48	0.44	0.54	0.48	0.57	1.17
Standard Error	0.05	0.05	0.04	0.05	0.04	0.05	0.11
Minimum	1.00	1.00	1.00	1.00	1.00	1.00	1.00
Maximum	3.00	3.00	3.00	3.00	3.00	3.00	4.00

	Implement New Strategies	Murali Chakinala MD {PH}	Eduardo Oliveira MD {Bronch}	Anas Hadeh MD {COPD}	Robert Sandhaus MD {Alpha-1}	Charles Burger MD {PE}	Franck Rahaghi MD {IPF}
Mean	2.00	4.87	4.59	4.71	4.93	4.88	4.85
Variance	1.50	0.13	0.43	0.35	0.07	0.13	0.17
Standard Deviation	1.22	0.37	0.66	0.59	0.26	0.36	0.41
Standard Error	0.12	0.03	0.06	0.05	0.02	0.04	0.04
Minimum	1.00	3.00	2.00	2.00	4.00	3.00	3.00
Maximum	4.00	5.00	5.00	5.00	5.00	5.00	5.00

	Jinesh Mehta MD {Lung}	Murali Chakinala MD {PH} Bias	Eduardo Oliveira MD {Bronch} Bias	Anas Hadeh MD {COPD} Bias	Robert Sandhaus MD {Alpha-1} Bias	Charles Burger MD {PE} Bias	Franck Rahaghi MD {IPF} Bias
Mean	4.87	4.94	4.94	4.93	4.94	4.94	4.92
Variance	0.16	0.06	0.06	0.08	0.06	0.05	0.09
Standard Deviation	0.40	0.24	0.24	0.29	0.24	0.23	0.30
Standard Error	0.04	0.02	0.02	0.03	0.02	0.02	0.03
Minimum	3.00	4.00	4.00	3.00	4.00	4.00	3.00
Maximum	5.00	5.00	5.00	5.00	5.00	5.00	5.00

	Jinesh Mehta MD {Lung} Bias	Reasons for Participating	Future CME Activities
Mean	4.94	-	1.52
Variance	0.06	-	0.41
Standard Deviation	0.25	-	0.64
Standard Error	0.03	-	0.06
Minimum	4.00	-	1.00
Maximum	5.00	-	3.00