

FACULTY

12. Faculty communicated clearly and effectively within the allotted time:

1 2 3 4 5

13. I recommend the following speaker(s) for your consideration in future planning:

Comments regarding faculty:

Name: (optional) _____

(Please Print)

**Please turn in this completed evaluation at the
end of the meeting to staff at the registration
desk. Your answers will be kept confidential.
*Thank you.***

NOTE: You will receive a request from AANS to participate in a follow-up survey at the start of the new year as to what changes you made in your practice as a result of participating in this CME activity and/or what barriers prevented you from making the changes in your practice.