



CONNECTICUT SOCIETY OF EYE PHYSICIAN'S CME EVALUATION FORM
January 9, 2015 Annual Educational Program- fax 860-567-3591

Please evaluate the following topics on a scale of 1 to 4 with the following values:

1 - poor 2 - satisfactory 3 - good 4 - excellent

- | | | | |
|--|---|------------------------------|---|
| 1. SUBJECT MATTER OF MEETING
3. AUDIOVISUAL | <u>Circle One</u>
1 2 3 4
1 2 3 4 | 2. FACILITIES
4. SPEAKERS | <u>Circle One</u>
1 2 3 4
1 2 3 4 |
|--|---|------------------------------|---|

Update on AMD Diagnosis and Treatment

William R. Freeman, M.D.

- | | |
|---|--------------|
| Degree to which objectives were met | 1 2 3 4 |
| Did speaker disclose financial interests in any product or company? | ___Yes ___No |
| Was the presentation fair and balanced? | ___Yes ___No |

Glaucomatous Damage of the Macula

Donald Hood, PhD

- | | |
|---|--------------|
| Degree to which objectives were met | 1 2 3 4 |
| Did speaker disclose financial interests in any product or company? | ___Yes ___No |
| Was the presentation fair and balanced? | ___Yes ___No |

Interesting Cases and Pitfalls; We Should Learn from the Mistakes of Others

William Freeman, M.D.

- | | |
|---|--------------|
| Degree to which objectives were met | 1 2 3 4 |
| Did speaker disclose financial interests in any product or company? | ___Yes ___No |
| Was the presentation fair and balanced? | ___Yes ___No |

Advances and New Complexities of Astigmatism Correction

Douglas D. Koch, M.D.

- | | |
|---|--------------|
| Degree to which objectives were met | 1 2 3 4 |
| Did speaker disclose financial interests in any product or company? | ___Yes ___No |
| Was the presentation fair and balanced? | ___Yes ___No |

Complex Cataract Cases: Loose Zonules and Iris Repair

Douglas D. Koch M.D.,

- | | |
|---|--------------|
| Degree to which objectives were met | 1 2 3 4 |
| Did speaker disclose financial interests in any product or company? | ___Yes ___No |
| Was the presentation fair and balanced? | ___Yes ___No |

Selective Laser Trabeculoplasty: A Journey from Benchtop to Bedside

Mark Latina, M.D.

- | | |
|---|--------------|
| Degree to which objectives were met | 1 2 3 4 |
| Did speaker disclose financial interests in any product or company? | ___Yes ___No |
| Was the presentation fair and balanced? | ___Yes ___No |

Improving the Detection of Glaucomatous Damage via Better Integration of OCT and Visual Field Information

Donald C. Hood, PhD

- | | |
|---|--------------|
| Degree to which objectives were met | 1 2 3 4 |
| Did speaker disclose financial interests in any product or company? | ___Yes ___No |
| Was the presentation fair and balanced? | ___Yes ___No |

Prescription Compounding in Connecticut

Michael Roberg, RhD

- | | |
|---|--------------|
| Degree to which objectives were met | 1 2 3 4 |
| Did speaker disclose financial interests in any product or company? | ___Yes ___No |
| Was the presentation fair and balanced? | ___Yes ___No |

Comments: _____

Connecticut Society of Eye Physicians
Semi-Annual Education Programs
Physicians Survey Form

Dear Member:

In an effort to establish procedures for identifying and analyzing the continuing medical educational needs and interests of our members, we ask that you to take a moment to fill out this form and objectively identify potential speakers and educational topics that you are interested in having at the Connecticut Society of Eye Physicians Semi-Annual Education Meetings.

CSEP will try and accommodate requests in an expeditious manner and communicate the purpose or objectives for each CME activity to our membership. Furthermore, the CT SOCIETY OF EYE PHYSICIANS shall design and implement educational activities consistent in content and method with the stated objectives and with applicable CME standards. Upon completion of each educational activity CSEP will evaluate the effectiveness of its CME activities in meeting identified educational needs and objectives. If you have any questions or comments regarding CME activities, please contact Debbie Osborn at 860-459-4377 or by email at debbieosborn36@yahoo.com or by mail: P.O. Box 854, Litchfield, CT 06759.

Name _____

Suggested Topics –

Suggested Speakers –

Please Fax back to 860-567-3591