

# PROVINCE-WIDE SLEEP ROUNDS EVALUATION FORM

## "Clinical Cases" 5th September 2014

**YOUR NAME:** \_\_\_\_\_

**OBJECTIVE OF THIS SLEEP ROUNDS:** Learn more about oral appliance, NREM parasomnia and prader-willi syndrome

**PRESENTOR:**                      **Dr. Tina Meisami**                      **Dr. Louis Van Zyl**                      Romain Delpech

**FORMAT: (CIRCLE NUMBER)**

	No	Average			Very	Much	No	Average			Very	Much	No	Average			Very	Much
Organized	0	1	2	3	4	5	0	1	2	3	4	5	0	1	2	3	4	5
Informative	0	1	2	3	4	5	0	1	2	3	4	5	0	1	2	3	4	5
Interesting	0	1	2	3	4	5	0	1	2	3	4	5	0	1	2	3	4	5
Time left for question/discussions	0	1	2	3	4	5	0	1	2	3	4	5	0	1	2	3	4	5

**PRESENTOR: (CIRCLE NUMBER)**

Coherent/Clear	0	1	2	3	4	5	0	1	2	3	4	5	0	1	2	3	4	5
Engaging	0	1	2	3	4	5	0	1	2	3	4	5	0	1	2	3	4	5
Creative	0	1	2	3	4	5	0	1	2	3	4	5	0	1	2	3	4	5
Responded to Questions	0	1	2	3	4	5	0	1	2	3	4	5	0	1	2	3	4	5
Encouraged Discussion	0	1	2	3	4	5	0	1	2	3	4	5	0	1	2	3	4	5

**Note:** This educational event is MAINCERT approved.

Online CME certificates, sign-in and evaluation sheets for each of the Province-Wide Rounds can be found at:  
[www.sleepontario.com](http://www.sleepontario.com) → News & Announcements → CME Certificates & Forms → 2014 Rounds

**COMMENTS:**

Did this Sleep Rounds meet its stated objectives?      \_\_\_ Yes      \_\_\_ No

If said "NO" please state the reason: \_\_\_\_\_

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