

Please send the evaluation form and the follow up evaluation form to your attendees.

The memo can be something along the lines of"

**For activity Evaluation:**

**An evaluation should be completed immediately after the activity, say within a week.**

Hello,

Thank you for attending the \_\_\_\_\_ (for eg: **Faculty Annual Retreat**)!

Thank you for attending the -----(**name of the program and date**, for eg: **"Faculty Retreat" on August 18<sup>th</sup>**) In an effort to determine the educational benefits and professional impact of the CME activity, we ask you to kindly complete the speaker/program evaluation.

The completion of the evaluation is required to receive the Continuing Medical Education (CME) credit and should be completed before (**Tuesday, September 7<sup>th</sup>**).

**Give the link to the evaluation google form** (for eg: <https://forms.evaluation.google.com>)

If you have questions or concerns, please contact (enter the CME coordinator's name and email. For eg: Elsa Kurien at [elsa.kurien@rosalindfranklin.edu](mailto:elsa.kurien@rosalindfranklin.edu).)

Sincerely,

Elsa Kurien

*(for Michael Zdon, MD, Associate Dean for CME)*

**For Follow-up Evaluation:**

**(For regularly Scheduled activities (like Grand Rounds and Tumor Board, have the attendees complete a follow up evaluation every six months for example, in May-June and later in the year (Nov-Dec).**

**For live courses, seminars and symposiums/stand-alone activities, ask the attendees to complete the follow up evaluation after 2-4 months after the activity.**

**Memo to the attendees:**

In an effort to determine the educational benefits and professional impact of the CME activity, we ask if you would kindly answer the questions below, based on your actual experience since the conference.

**This follow up survey is intended to help evaluate the effectiveness of CME activities in meeting educational needs. Please identify the following:**

1. Did the activity clarified or reinforced principles and concepts underlying current handling of patients?
2. How did this activity change your current practice?
3. What was the impact of the activity on your performance and patient care?
4. **Give the link to the evaluation form** (for eg: <https://forms.evaluation.google.com>)