

## Annual KMC CME Program Evaluation

Thank you for your support for the KMC CME Program.

Your responses to the following questions should take about two minutes and will help the KMC CME program make future plans and support the program's accreditation compliance.

1. What are your preferred formats (activity types) for receiving CME instruction?

Check all that apply.

- Lecture-discussion
- Moderated Case Studies
- Moderated Panel Discussion
- Demonstration
- Enduring Material (online activity presentation)

2. Check the following statements that are true for you.

- I rely on KMC CME activities to provide the majority of Cat.1 CME credits required for my Ohio Physician relicensure.
- I realize that of the 100 hours of CME credit required for biennial physician relicensure in Ohio, only 40 hours must be Cat.1.
- I know how to retrieve online a summary of my KMC CME Cat. 1 credit using the KMC web.
- I am aware of the types of self-documented CME that can qualify as Cat.2 relicensure credit, and that this Cat.2 credit can be cited to fulfill the balance of total credit needed for my Ohio physician relicensure.

I have attended an adequate number of KMC CME activities to respond to further questions.

- No  Thank you for your responses to the above questions.  
Yes  Please proceed to respond to the following questions.

3. After participating in KMC CME activities, I perceive that:

I have increased my medical knowledge and clinical skills leading to improved competence, performance or patient care?

Yes  No

Physicians from different specialties are better able to communicate with one another?

Yes  NO

I can counsel my patients more effectively about clinical matters outside my specialty.

Yes  No

I can better utilize hospital and community resources in health care provision.

Yes  No

I feel that challenges I have faced in my practice have been identified and addressed by the activity content of the CME program?

Yes  No

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4. Regarding the conduct of CME activities you have attended, check the following items that apply:
- Participants have adequate opportunity to ask questions of the speakers.
  - I am aware of the significant commercial relationships of speakers and planners.
  - The presentations are free of commercial and proprietary bias.
  - I have not attended an adequate number of CME activities to comment on any of the above items.

5. Do you agree with the statement of purpose in first paragraph of the attached 2011 KMC CME Mission Statement?
- Yes  No

If not, please describe briefly your reason: \_\_\_\_\_  
\_\_\_\_\_.

Thank you for this support for the KMC CME Program.