

DIALOGUES

I N C O N T R A C E P T I O N TM



Evaluation Questionnaire

We would appreciate your comments.
Please return completed questionnaire to our toll-free fax number: (888) 665-8650.

1. How long did it take you to complete this CME activity? _____

2. I found the content (check appropriate boxes):

Not practical Very practical

Moderately practical

Poorly written Expertly written

Well written

Too difficult Too easy

Moderately difficult

3. The stated objectives were achieved. Yes No

4. The examination questions were:

Too difficult Too short Poorly written

Too easy Too long Well written

5. Did you find the program:

Biased for or against any particular drug? Yes No

If yes, please explain: _____

Fairly balanced in terms of treatment options? Yes No

If no, please explain: _____

Suggestions for future topics: _____

Additional comments: _____

Name (optional): _____