Program Evaluation Summary

94 program evaluations returned, 283 speaker and content evaluation forms returned

What was your reason for enrollment? (more than one selection could be made)
- 19% – Program topics
- 23% – Location of the program
- 44% – Desire to broaden knowledge
- 67% – Needed CME hours
- 15% – Other

In general, do you base your decision to attend a CME program on: (more than one selection could be made)
- 44% – Program content
- 62% – Program location
- 62% – Need for CME hours

Were you interested in a specific speaker?
- 42% – Yes (see chart below)
- 58% – No

Have you previously attended an AOCD CME program?
- 94% – Yes
- 6% – No
What is the population of the city in which you practice?

- Under 10,000: 4%
- 10,000 - 30,000: 12%
- 30,000 - 50,000: 13%
- 50,000 - 100,000: 19%
- Over 100,000: 52%

In which type of practice are you currently engaged?

- Group: 48%
- Solo: 38%
- Military: 2%
- Hospital: 12%

Which subjects were the most valuable to you?

- Dermoscopy (29)
- Psoriasis (21)
- CTCL (9)
- Dermatologic surgery (8)
- Inpatient dermatology (8)
- Skin cancer (8)
- University of Pennsylvania Symposium (8)
- All subjects were valuable (7)
- Pruritus (7)
- Acne/Rosacea (5)
- Clinical dermatology (4)
- Mohs (4)
- Resident cases (4)
- Great cases (3)
- Cosmetic dermatology (2)
- Hospital cases/consultations (2)
- Mycosis fungoides (2)
- Practice management (2)
- Basic dermatology (1)
- Case presentations (1)
- CLIA (1)
- Co-morbidities (1)
- Discussions by attendings (1)
- Hair dye (1)
- NMSC (1)
- None (1)
- Tinea capitis in children (1)
- Vasculitis (1)
Which subjects do you feel could have been omitted?
- Cosmetic dermatopathology (11)
- Resident lectures (8)
- Dermoscopy (3)
- Acne/Rosacea update (2)
- Great cases (1)
- GVHD lecture (1)
- Mohs update (1)
- Telemmedicine (1)
- Topical psoriasis treatments (1)

Please comment on what ways you think the course could be improved:

Location
- All was satisfactory (11)
- Different location (7)
- Lecture room too cold (4)
- Provide lunch/snacks (2)
- Better acoustics (1)
- Larger lecture room (1)
- Better weather (1)
- Special seating for derm residents and directors, so derm applicants know (1)

Time of Lectures
- All was satisfactory (8)
- Lectures should begin later (3)
- Don’t schedule over Halloween (2)
- Meeting/Lectures should be held on the weekend (2)
- Include participatory activities, live patients, etc. (1)
- Lectures should begin earlier (1)
- Too much time spent on dermoscopy (1)

Breaks
- All was satisfactory (10)
- Provide decaf (1)
- Schedule longer breaks (1)

If you could choose one location to attend a CME program, where would it be?
- Las Vegas, NV (9)
- New York, NY (9)
- Orlando, FL (7)
- San Diego, CA (5)
- San Francisco, CA (5)
- Florida (3)
- Miami, FL (3)
- Washington D.C. (3)
- Charlotte, NC (2)
- Chicago, IL (2)
- Denver, CO (2)
- Hawaii (2)
- Hilton Head, SC (2)
- Phoenix, AZ (2)
- Tampa, FL (2)
- Amelia Island, FL (1)
- Arizona (1)
- Banff, Alberta, Canada (1)
- Boston, MA (1)
- Branson, MO (1)
- Charleston, SC (1)
- City with direct airport and inexpensive lodging (1)
- Ft. Lauderdale, FL (1)
- Ft. Worth, TX (1)
- Key West, FL (1)
- Monterey Peninsula (1)
- Napa, CA (1)
- Nashville, TN (1)
- New Orleans, LA (1)
- Portland, OR (1)
- Salt Lake City, UT (1)
- Santa Fe, NM (1)
- Somewhere warm (1)
- Southern California (1)
- Telluride, CO (1)
- West coast (1)

What topics would you like to see addressed at future meetings?
- Skin cancer updates (7)
- Pediatric dermatology (6)
- Cosmetic dermatology (5)
- Laser treatments (5)
- Billing/Coding (4)
- Electronic records (4)
- Acne/Rosacea (3)
- Business management (3)
- Dermoscopy (3)
- Psoriasis (3)
- Tropical dermatology (3)
- Alopecia (2)
- Autoimmune disease (2)
- Clinical dermatology (2)
- Connective tissue diseases (2)
- Actinic keratosis (1)
- Best practices or developments in research (1)
- Body piercing/tattoos (1)
- Challenging rash cases (1)
- Complementary and alternative therapies in dermatology (1)
- Complicated surgical closures (1)
- Controversial topics and treatments (dysplastic nevi, spitzoid melanoma, thin melanomas, etc.)
- CTCL (1)
- Current treatment modalities – practical use and evidence (1)
- Dermatology emergencies (1)
- EHR (1)
- Facial rejuvenation (1)
- General dermatology (1)
- Hospital-based dermatology (1)

What was the best part of your experience at this meeting?
- Social activities (21)
- Lectures (13)
- University of Pennsylvania Symposium (10)
- Location (6)
- Dermoscopy (5)
- Resident lectures (4)
- Guest Lectures (3)
- Melanoma lectures (2)
- Dr. James’s lecture (1)

What was the worst part of your experience at this meeting?
- Cold room temperature (6)
- No food provided (5)
- Lack of seating for lectures (4)
- Too many resident lectures (3)
- Business meeting (2)
- Resident meeting (2)
- Ameriderm advertising job opening (1)
- Being away from home (1)
- Dermoscopy ran a little long (1)
- Did not receive thumb drive for lecture notes (1)
- Elections of new board members (1)
- Having to meet with the AOA (1)
- In-Training Exam (1)

- Impending changes in disease therapy (1)
- Insurance contract negotiations (1)
- Inpatient dermatology (1)
- Leadership development courses (1)
- Live patient workshops (1)
- Melanocytic lesions (1)
- Mohs (1)
- More training topics that teach a skill or examination technique (1)
- Motivational speaker providing advice for getting more members involved (1)
- New drugs to treat dermatological diseases (1)
- New targeted therapies (1)
- Non-surgical dermatology (1)
- Papilomatosis (1)
- Pharmacology (1)
- Phototherapy (1)
- Role of radiation in dermatology (1)
- Scientifically relevant topics (1)
- Sun screen (1)
- Surgical pearls (1)
- Systemic disease, medications, adverse effects, and monitoring guidelines (1)
- Treatment pearls (1)
- Wound care and management (1)

- Dr. Menter’s lecture (1)
- Dr. Rosenbach’s lecture (1)
- Great Cases (1)
- Monday’s session (1)
- Psoriasis lectures (1)
- Q & A opportunities (1)
- Seeing the attendance increase exponentially over the last five years (1)

- Some Powerpoint presentations unavailable on thumb drive (1)
- Lectures started too early (1)
- Long days (1)
- Meeting took place during Halloween (1)
- Confusion over changes in resident requirements (1)
- Poor acoustics/sound system (1)
- Poor weather (1)
- Subpar Powerpoint presentations (1)
- Tight seating (1)
- Too few CME credits available (1)
- Too many non-members taking up limited space (1)
- Wild meetings (1)
**General Program Evaluation**

- Program content: 4.5
- Scheduling: 4.5
- Length of program: 4.4
- Program Publicity: 4.3
- Facilities: 4.4
- Overall Rating: 4.6

**Speaker Evaluation Averages**

- Average Ratings: 4.6, 4.4, 4.6, 4.4, 4.5, 4.5
**Evaluation of Program Content**

- **Presentation met your needs**
- **Presentation provided usable ideas and/or techniques**
- **Program will improve professional effectiveness**
- **Time for questions & answers was sufficient**
- **Handouts were useful**
- **Seminar met your expectations**
- **Format and organization were effective**

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<th>Date</th>
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**Evaluation of Program Content**

Did these lectures meet the objectives of the CME program?

- **October 31, 2011**
  - 100% - Yes
  - 0% - No

- **November 1, 2011**
  - 100% - Yes
  - 0% - No

- **November 2, 2011**
  - 100% - Yes
  - 0% - No

Would you attend a similar conference next year?

- **October 31, 2011**
  - 100% - Yes
  - 0% - No

- **November 1, 2011**
  - 100% - Yes
  - 0% - No

- **November 2, 2011**
  - 100% - Yes
  - 0% - N

**Was the activity commercially biased?**

- **Oct 31, 2011**
  - Yes 11%
  - No 89%

- **Nov 1, 2011**
  - Yes 15%
  - No 85%

- **Nov 2, 2011**
  - Yes 15%
  - No 85%
Comments

- All residents should provide a handout.
- Best conference in the last three years.
- Dermoscopy course was interesting. I thought that all of the resident speakers did an excellent job; however, the panel of speakers should really be full-fledged dermatologists, not residents.
- Dermoscopy lectures were excellent.
- Dr. Baum was commercially biased.
- Dr. Rabinovitz was commercially biased.
- Everything was very well organized and lectures began promptly. This was my third AOCD meeting and was by far the most informative.
- I really enjoyed all the speakers from Penn, as well as Dr. Rosen. I think it’s very important for speakers to present new and useful information to us at this conference – not just reciting information that we already know. Overall, I’m underwhelmed and disappointed with the speakers this year.
- If you limit it [resident lectures] to Koprince winners, you can have more quality lectures, increase attendance by MD derms and mid-level derm providers, thus increasing revenue!
- Inservice exam—why do we even take it if it’s not similar to the real test. I mean they even have microscopes and slides in the building, so why not let us look at slides the way we are to be tested? It can be done after the real boards are administered, the following day, whatever. And can we please make the real boards more appropriate? Everyone (every year) complains how the information tested is unrealistic and not a true measure of what they learned in their residency.
- No handouts!
- No microphone for audience questions.
- Only a few had handouts.
- Overall, not impressed in the least by the meeting this year. Last year’s meeting was much better—lecture and location-wise.
- Please have all Powerpoint presentations presented by all lecturers on the drives in the future.
- Thank you for inviting Dr. Menter. Great lecture!
- The University of Pennsylvania panel was fantastic.
- Would like handouts from all presenters.
- Would like to have had a list of journal/text references and/or content or email of presenters.