

LOS ANGELES COUNTY EMERGENCY MEDICAL SERVICES AGENCY COURSE EVALUATION

TOPIC: HYPOTHERMIA, SVT, PEDIATRIC ASTHMA

NAME: _____

DATE: _____

STATE LICENSE #: _____

ACCREDITATION #: _____

Self-Study Evaluation:

Name of Instructor(s): SELF STUDY ONLINE

Circle the number that best represents your opinion

Evaluation Factor	Strongly Agree	Agree	Disagree	Strongly Disagree
The information was presented in a clear and understandable manner	4	3	2	1
The review materials were effective and facilitated my learning experience	4	3	2	1
The review materials met the stated objectives	4	3	2	1
This materials were relevant and met my professional needs	4	3	2	1
The handouts and/or audiovisual aids were appropriate	4	3	2	1
The variety of variability materials were appropriate	4	3	2	1
The web site and materials were easy to navigate	4	3	2	1
Overall, the study time allocated was:	Too short	Just right	Too long	

Describe two concepts in detail that you have learned in this course:

- 1.

- 2.

Please identify the strengths of this course:

Recommendations for improvement of this course:

Additional comments:

REMINDER: You may receive EMS CE credit by completing this evaluation, passing the quiz with 80% score or greater and signing a course roster via your department's EMS CE program.