

EVALUATION SUMMARY

Western Section AUA

Monday, October 26, 2009 - 10:00am - 12:30pm

PREP COURSE #4 - Evidence Based Medicine in Urologic Oncology

	Scale: = POOR / ADEQUATE / EXCELLENT				
	1	2	3	4	5
PROGRAM OBJECTIVES	Total Pts	# Returned	Total Ave Score		
Apply the principles of evidence based medicine to clinical decision-making in the care of individual patients with genitourinary malignancies.	269	59	4.56		
Determine appropriate diagnostic, evaluation and monitoring techniques according to the best available evidence.	267	59	4.53		
Treat patients with prostate, bladder, kidney and testes cancers according to the current best available evidence.	275	59	4.66		

OVERALL EVALUATION

Increased My Awareness/Understanding of the Subject	270	59	4.58
Will Influence How I Practice	258	59	4.37
Helped Me Improve Patient Care	269	59	4.56
Was Educationally Sound and Scientifically Balanced	277	59	4.69
Avoided Commercial Bias or Influence	281	59	4.76

Points that will influence the way I will practice:

iMMC usage.

Medical oncologic referral @ outset of diagnosis of any TCCa pt.

Will encourage neoadjuvant treatment advanced renal cell pts.

Neoadjuvant Chemotherapy in bladder cancer.

Alkalinize urine for mito use.

Use of the new drugs.

Try to use EBM better; consider BCG maintenance.

Change way I offer neoadjuvant chemotherapy & nephroureterectomies-very helpful.

PRESENTERS

Badrinath Konety, M.D.			
presenter demonstrated current knowledge of topic	282	59	4.78
Siamak Daneshmand, M.D.			
presenter demonstrated current knowledge of topic	282	59	4.78
Philipp Dahm, M.D.			
presenter demonstrated current knowledge of topic	281	59	4.76

Comments about speakers/course content:

A little too rushed at the end.

Too much time spent reviewing principles of evidence based medicine.

Helpful.

Comments about speakers/course content: (Continued)

Too fast 2nd time constraints.

Dr. Dahm: Too much detail, too much time on EBM portion of presentation. (Good stuff, though)

All speakers spoke too fast, too much content for allotted time.

Needed more time for subject.

Konety talks too fast, needed longer for these topics.

This was incredibly helpful in sorting out which study is really showing significant data. Very good!

Have answers to questions in handout. Important for recertification/board.

More time needed. Speakers had to cover material too quickly.

Too much background on EBM given at the beginning.

Not enough time to cover material.

All were good.

Why not run the postgraduate reviews mon afternoon as well as morning?

Konety spoke too fast and information was too dense.

Excellent talks except for Dr. Konety's presentation, had too much information to absorb in 10 mins.

Dr. Konety, good talk, got short changed time wise-too bad.

Dr. Daneshmand did an outstanding review, also made up for lost time-Great talk.

Dr. Dahm had very important info. His talk went too long & lost many of us.-not fair to other presenters.

Recommended topics for future meetings:

Same as today.

EBM for post treatment flu/surveillance recommendations.

Should have broken all their info into 2 sessions. Too much for only one session.

Role of community urologist is contributing to urological literature.