

EVALUATION SUMMARY

Western Section AUA
 Tuesday, October 27, 2009 - 10:30am - 12:00pm
 Sexual Medicine

	Scale: = POOR / ADEQUATE / EXCELLENT				
	1	2	3	4	5
PROGRAM OBJECTIVES	Total Pts	# Returned	Total Ave Score		
Compare the success of single layer versus double layer microsurgical vasovasostomy.	913	207	4.41		
Assess the factors that are predictive of fertility success in infertile couples.	920	207	4.44		
Describe a minimally invasive technique for treatment of priapism.	938	207	4.53		

OVERALL EVALUATION

Increased My Awareness/Understanding of the Subject	924	207	4.46
Will Influence How I Practice	873	207	4.22
Helped Me Improve Patient Care	901	207	4.35
Was Educationally Sound and Scientifically Balanced	929	207	4.49
Avoided Commercial Bias or Influence	945	207	4.57

Points that will influence the way I will practice:

Availability of Testopel.

I learned about the data on single layer vasovasostomy vs. double layer procedure.

Priapism management is easier than I had recalled.

Will change my vasovasostomy technique.

I do very little infertility in my practice-so little change there. Will look into use of Testosterone pellets however.

Improved my counseling of infertility couples.

Peyronies Disease is an enigma-nice to hear about different techniques.

Balloon shunt.

Followup testosterone pellets.

Separate Rx approaches to corporal vs. urethral glanular (blood supply, etc.)

Treatment of priapism.

New techniques to minimally invasive treatment priapism.

Minimally invasive percutaneous shunt for priapism treatment.

Will strongly consider using testosterone pellets.

Will have a better idea on peyronies treatments.

The disease peyronies bothers patients.

Minimally invasive Rx for priapism is interesting.

Using a balloon to create a layer shunt in priapism.

Helps me predict fertility potential in couples who are judged to be infertile.

Use of MUSE for soft glaus syndrome.

A novel percutaneous balloon shunt could replace the winter shunt in patients with priapism.

Utilize less vitamin E in treatment of peyronies disease.

Use 10 pellets of testosterone.

Points that will influence the way I will practice: (Continued)

- Consider MUSE for soft claus sundrome.
- Balloon technique for priapism treatment=good idea.
- Will try the balloon cc shunt.
- The use of testosterone therapy for Peyronies Disease.
- Decrease use of proximal shunts.
- Double layer vasovasostomy.
- Dilation of corporotomies.
- A new technique for dealing with priapism.
- Discussion of complications.
- Another treatment option for priapism.
- Will consider percutaneous shunt for peyronies.
- Point to cycle therapy for infertility.
- Enjoyed priapism technique.
- New technique for isolating non mobile sperm.
- Treatment of soft glaus syndrome and M.U.S.E. Testopel insertion over I.M.
- M.U.S.E. helpful for soft glaus syndrome.
- More surgery or referral for pyeronies.
- Knowledge of the soft glaus syndrome and treatment.
- Balloon shunt dilation for priapism.

William O. Brant, M.D. - State of the Art			
The speaker demonstrated current knowledge of the topic.	963	207	4.65

Moderators: Dr. Thomas Walsh & Dr. Donald Crain			
The moderators guided and enhanced this session.	952	207	4.60

Comments about moderators:

- Good review.
- Good job.
- Knowledgeable.
- Good job-kept things moving.
- Great job!
- Excellent.
- Dr. Crain and Walsh were excellent.
- Good.
- Good.
- Very good job.
- Good discussion.
- Very efficient and balanced.
- Stayed on time.
- Excellent.
- On time, good discussion.
- Did a good job.
- Well-done!
- Excellent discussion.
- Excellent job. Very knowledgeable and experienced.

Comments about moderators: (Continued)

Good.

More than helpful.

Comments about speakers/course content:

Good job.

Well trained in infertility.

Throughout the meeting, speakers tend to put too much information on the slides.

Good review.

Dr. Goldstein is a very good and effective speaker.

Great review of Peyronies Disease.

Excellent.

Good.

Good.

Very good job.

Very useful and appropriate.

Excellent presentations.

For all speakers at WSAUA: abbreviations used in slides slows delivery of message.

Good.

Unfortunately, peyronies disease talk was good review but no new data in treatment really.

Presentation good.

Well-done!

Well done.

Excellent peyronies talk great!

Dr. Goldstein rocks!

Brant was boring and topic of peyronies not new.

Recommended topics for future meetings:

Anything about vasectomy-which method is "Best" medical legal issues of vas complications and failure.

Women's sexual problems.

Management of the male infertility patient.

Penile prosthetics!

Role of lifestyle factors in male infertility.

More on sexual medicine-new drugs.

Data on frequency of intercourse per week (perday!) as a variable in fertility.