

EVALUATION SUMMARY

Western Section AUA

Tuesday, Oct. 28, 2008, 2:15pm - 3:00pm

Pediatrics

	Scale: = POOR / ADEQUATE / EXCELLENT				
	1	2	3	4	5
PROGRAM OBJECTIVES	Total Pts	# Returned	Total Ave Score		
Describe the evaluation and surgical management of urethral injuries in children.	667	161	4.14		
Examine the role of endoscopic surgery in combination with an extravesical open surgical approach for management of vesicoureteral reflux.	671	161	4.17		
Summarize the histological findings of undescended testes and their correlation to location of the gonad and timing of orchidopexy.	667	161	4.14		

OVERALL EVALUATION

Increased Awareness of Subject	674	161	4.19
Will Influence How I Practice	590	161	3.66
Helped Me Improve Patient Care	608	161	3.78
Was Educationally Sound and Scientifically Balanced	680	161	4.22
Avoided Commercial Bias or Influence	697	161	4.33

Points that will influence the way I will practice

Good info but I don't treat children.

I don't see a great deal of pediatrics patients but I did learn more about surgical aspects.

Appropriate use of antibiotic VUR.

I will change how I use antibiotics with VUR.

I don't do pediatrics anymore.

I don't practice any pediatric urology.

Probably not useful to me but thanks.

I'll continue to do orchidopexys.

Good review - evaluation, management and followup of urethral injuries.

New knowledge of how to manage pediatric urethral trauma.

Will perform orchidopexy at an earlier age.

Age of orchidopexy.

Surgical aspects of pediatric patients.

Not all children with VUR need antibiotic prophelaxis.

Better consulting to primary care referrals as to what they need to do.

Will incorporate information on VUR into my practice.

Delayed repair of pediatric urethral trauma is effective.

Earlier orchidopexy. 6 months old.

Provide better information to patients.

Less postop evaluation.

Think carefully about children I maintain on prophylaxis.

Cryptorchidism causes progressive testicular damage.

Encourage early referral for orchidopexy - early treatment of pyeloplasty key in preventing new scars.

Prophylaxis of reflux may not be recessive.

Scarring in reflux is congenital.

Waiting to image all treatments when necessary for recurrence.

Antoine Khoury, M.D. - State of the Art

The presenter demonstrated current knowledge of the topic.	692	161	4.30
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MODERATORS

The moderator guided and enhanced this session.	622	161	3.86
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Comments about moderators:

Good.

Great talk.

Excellent balancing of topics.

Some confusion.

More voice inflection needed but knowledgeable.

Comments about speakers/course content:

Excellent summary by Dr. Khoury.

Good.

Overtime.

Interesting.

Scientifically valid presentations.

Good selection of papers. Quality not quantity.

Very informative.

Excellent State of the Art lecture.

Knowledgeable.

Dr. Khoury talk on VUR was excellent.

VUR lecture was excellent.