

| Clinical Emergency Procedures Course | | | | | | | |
|--|------------|-----------|----------|----------|------|-----------|--|
| Winnipeg, AB - November 11-12, 2017 | | | | | | | |
| Designation: ND: 11 MD: 0 TCM: 0 DDS: 0 Student: 0 | | | | | | | |
| | Excell-ent | Very Good | Good | Fair | Poor | Very Poor | |
| 1. The facility as a whole was | 10 | 1 | | | | | |
| 2. The comfort level in the facility was | 6 | 4 | 1 | | | | |
| 3. The course as a whole was | 10 | 1 | | | | | |
| 4. The course content was | 8 | 3 | | | | | |
| 5. The instructor's contribution was | 10 | 1 | | | | | |
| 6. The effectiveness in teaching was | 7 | 4 | | | | | |
| 7. Course organization was | 8 | 1 | 2 | | | | |
| 8. Clarity of instructor's voice was | 11 | | | | | | |
| 9. Explanations were | 7 | 4 | | | | | |
| 10. Use of examples and illustrations were | 8 | 3 | | | | | |
| 11. Confidence in instructor's knowledge was | 10 | 1 | | | | | |
| 12. Qualities of problems raised were | 5 | 4 | 1 | | | | |
| 13. Instructor's enthusiasm was | 10 | 1 | | | | | |
| 14. Encouragement to express your thoughts was | 9 | 2 | | | | | |
| 15. Answers to your questions were | 7 | 4 | | | | | |
| 16. Availability of extra help when needed was | 10 | 1 | | | | | |
| 17. Use of class time was | 7 | 3 | 1 | | | | |
| 18. Opportunity for practicing what was learned | 9 | 2 | | | | | |
| 19. Amount you learned in the course was | 6 | 5 | | | | | |
| 20. Relevance and usefulness of course was | 9 | 2 | | | | | |
| 21. Clarity of your responsibilities was | 9 | 2 | | | | | |
| 22. Usefulness of Advanced IV & Chelation chart | 10 | 1 | | | | | |
| 23. Explanation of the chart was | 9 | 2 | | | | | |
| TOTALS | 195 | 52 | 5 | 0 | | | |

| | Yes | No | | | | |
|---|--|----------------|----------------|--|--|--|
| Did you feel confident using IV Therapies before the course? | 9 | 2 | | | | |
| Do you feel more confident using IV Therapies after the course? | 11 | | | | | |
| Will you be using IV Therapies in the future? | 11 | | | | | |
| Would you recommend this course to other ND's? | 11 | | | | | |
| Have you used IV therapies in your practice prior to coming here? | 10 | 1 | | | | |
| If yes how long have you been using IV's in your practice? | 0-2 years 4 | 2-5 years 1 | 5 + years 6 | | | |
| How long have you been a licensed professional? | 5 | | 6 | | | |
| Why would you recommend/not recommend this course? | It was comforting rather than fear creating, role playing was effective | | | | | |
| | Good lots of practice with hands on equipment, instructor to participant ratio, instructor very knowledgeable and ex Hands on. Makes you feel more confident, comfortable and calm in emergency situations | | | | | |
| | I am much more confident with Golden Rules and how to remain calm and follow the steps on the chart! | | | | | |
| | Very much appreciated the hands on approach | | | | | |
| | Love the hands on aspect of the course and great chart! | | | | | |
| | Clear, concise information that is directly pertinent to practice | | | | | |
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| What would you change about this course? | Add extra few hours to teach CPR so we can use this course for our annual re-certification | | | | | |
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| Would you like to take further courses given by Michael A. Prytula ND? | Yes 9 | Maybe 1 | No 1 | | | |
| What course(s) would you be interested in attending? Please check ALL that apply: | | | | | | |
| E. A. T. (Eliminate Allergy Technique) | 6 | 1 | | | | |