

CHI/OPTIMA WEBINAR-EDUCATION

SIGN-IN SHEET

“URFO Practice Guidance: A 3 Study Review”

October 24, 2019

10:00 – 11:00 am (Pacific Time)

Facility _____

E-mail certificates to (name + email address): _____

PLEASE PRINT LEGIBLY!!

N A M E	RN LICENSE # <i>(Nurses only)</i>	T I T L E

BRN Provider #12205

Please return sign-in sheets AND evaluation forms to:

Jenny Sula @ jsula@optimahealthcare.com
Optima Healthcare Insurance Services
9229 Sierra College Boulevard, Roseville, CA 95661

CHI/OPTIMA WEBINAR EVALUATION

“URFO Practice Guidance: A 3 Study Review”
October 24, 2019 – CHI/Optima Webinar

Faculty:
Victoria Steelman, PhD, RN, CNOR, FAAN

Your Title/Position: _____

Objectives: At the end of the presentation, the participant should be able to: 1) review findings from 3 unintentionally retained foreign objects (URFOs) studies; 2) discuss challenges to URFO prevention; and 3) describe targeted strategies to reduce URFOs.

<i>Please check appropriate box</i>	<u>Excellent</u>	<u>Very Good</u>	<u>Average</u>	<u>Fair</u>	<u>Poor</u>
Overall Rating					
Objectives Met					
Practical					
Clear					
Interesting					
Informative					
Speaker’s Mastery of Subject					
Course Mechanics (ease of webinar, handouts, etc.)					

1. WHAT PART OF THIS PROGRAM DID YOU FIND MOST VALUABLE?

2. HOW WILL THIS PROGRAM BE ABLE TO HELP YOU?

3. HOW DO YOU THINK THIS PROGRAM COULD HAVE BEEN IMPROVED?

4. ADDITIONAL COMMENTS OR SUGGESTIONS FOR FUTURE EDUCATION PROGRAMS: