National Imaging Associates – Provider Relations Training Evaluation and Feedback Form

	Health Plans - RBM	Vanessa Caballero					
Training Session/Module		Presenter	Date				
		ine form: double click the box a	nd click "ch	ecked"	then o	k)	
The session/mod	lule was:						
☐ Informative ☐ Too Slow ☐ Elementary				Too Quiet			
Too Detailed Too Fast Advanced			Too Formal				
Too General Well Paced Appropriate			Boring				
The training env	ironment was:						
Cold	Warm Crowded	Comfortable Other					
	Waiiii Clowded						
The most outstand	ling feature(s) of this session was:						
I was trained on w	what I was expecting Yes No	o (please explain)					
1 was damed on w	That I was expecting [105 [100	(produce explain)					
Improvements I si	aggest for this training:						
Additional trainin	a an tanias that mad		.				
Additional training or topics that need further reinforcement:			s nen		_	snt	
			Needs	Fair	Good	Excellent	
			Needs Improvement		O	Exc	
Fill in the			7				
appropriate	The presenter displayed knowledge of the material The presenter was able to hold my attention		1	2	3	4	
circle				<u> </u>	<u>(3)</u>		
	-		(1)	2	3	4	
	My overall rating of the presente		①	2	3	4	
The course objectives were		ained clearly	①	2	3	4	
	The course content matched the	stated objectives	1	2	3	4	
	The materials handouts and exer	cises helped me understand better	(1)	2	3	4	
	My overall rating of the training	is	(1)	2	3	4	
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Additional Com	ments/Questions						
Wev	alue your feedback and apprec	íate you taking the time to com	plete this e	/aluatí	on.		