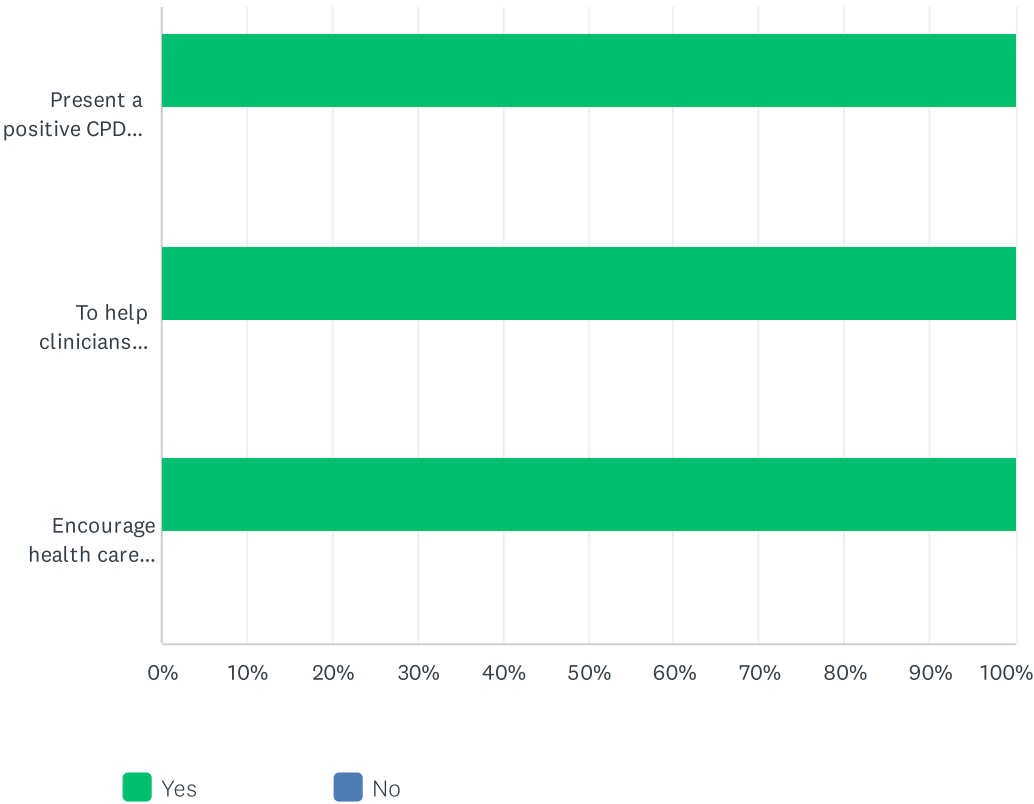


Q1 Did the conference meet the below objectives?

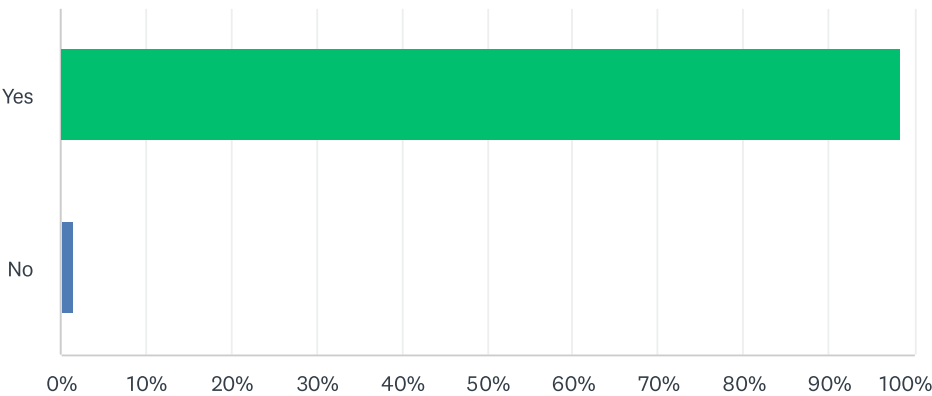
Answered: 269 Skipped: 1



	YES	NO	TOTAL
Present a positive CPD event experience through an interactive forum (including focused reviews that combine evidence, experience, and patient values): Collaborator, Family Medicine Expert, Leader, Scholar Communicator, Health Advocate.	100.00% 268	0.00% 0	268
To help clinicians understand the evidence pertaining to clinical decisions/diseases commonly seen in primary care, promoting patient-orientated outcomes.	100.00% 268	0.00% 0	268
Encourage health care professionals to know where to find up-to-date, bias-free information on common clinically relevant topics.	100.00% 267	0.00% 0	267

Q2 Was there sufficient time for audience participation?

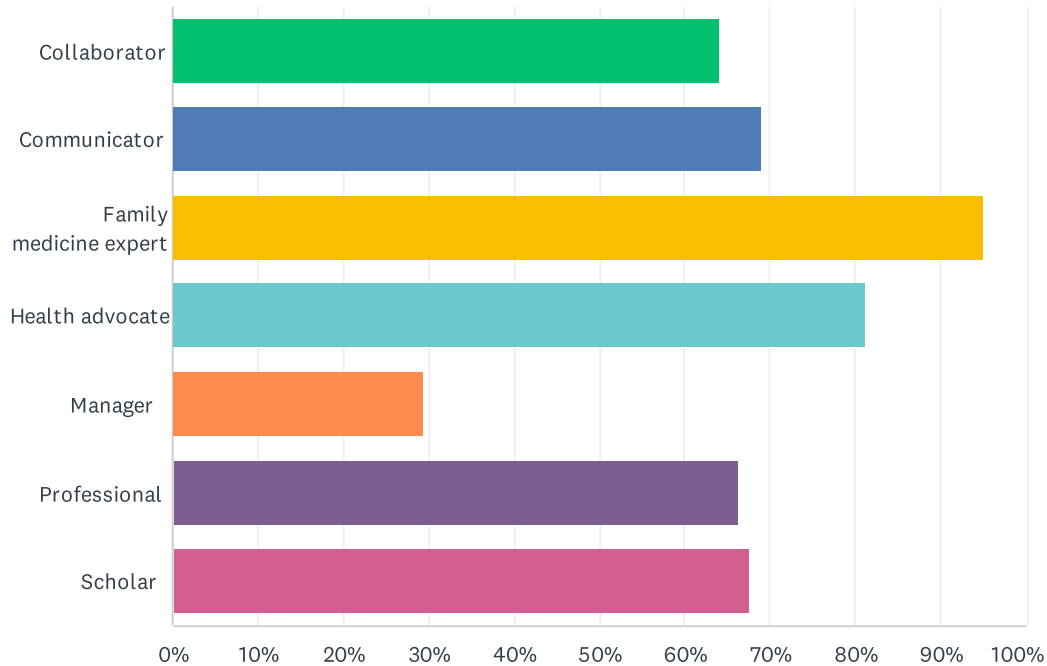
Answered: 270 Skipped: 0



ANSWER CHOICES		RESPONSES	
Yes		98.52%	266
No		1.48%	4
TOTAL			270

Q3 Please indicate which CanMEDS-FM Roles you felt were addressed during this educational activity: (select all that apply)

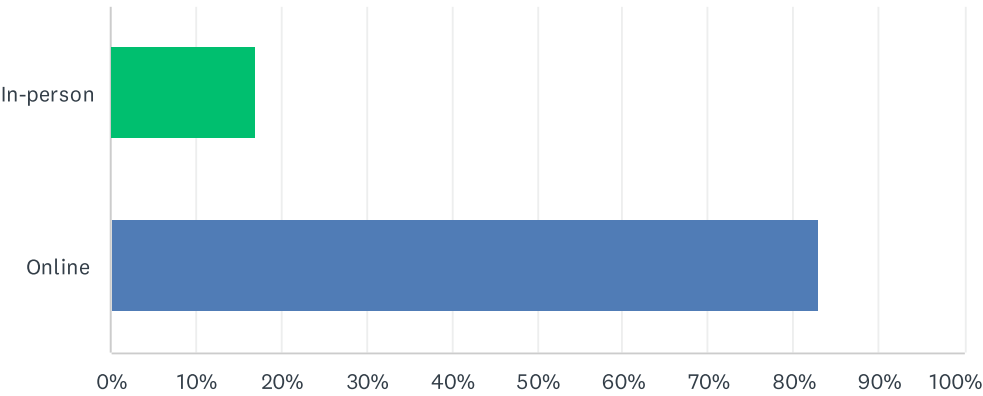
Answered: 262 Skipped: 8



ANSWER CHOICES	RESPONSES	
Collaborator	64.12%	168
Communicator	69.08%	181
Family medicine expert	95.04%	249
Health advocate	81.30%	213
Manager	29.39%	77
Professional	66.41%	174
Scholar	67.56%	177
Total Respondents: 262		

Q4 How did you attend the conference?

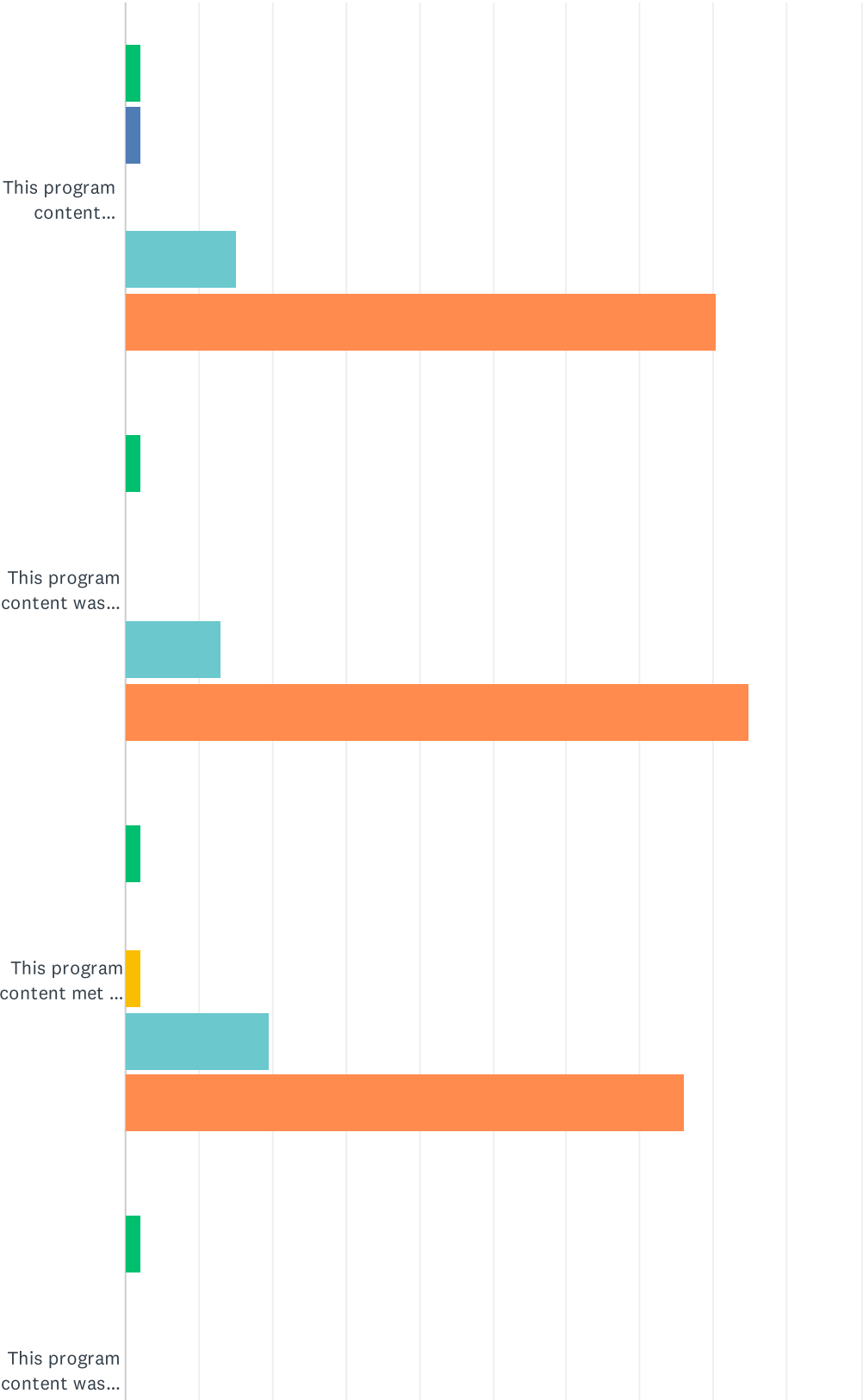
Answered: 269 Skipped: 1



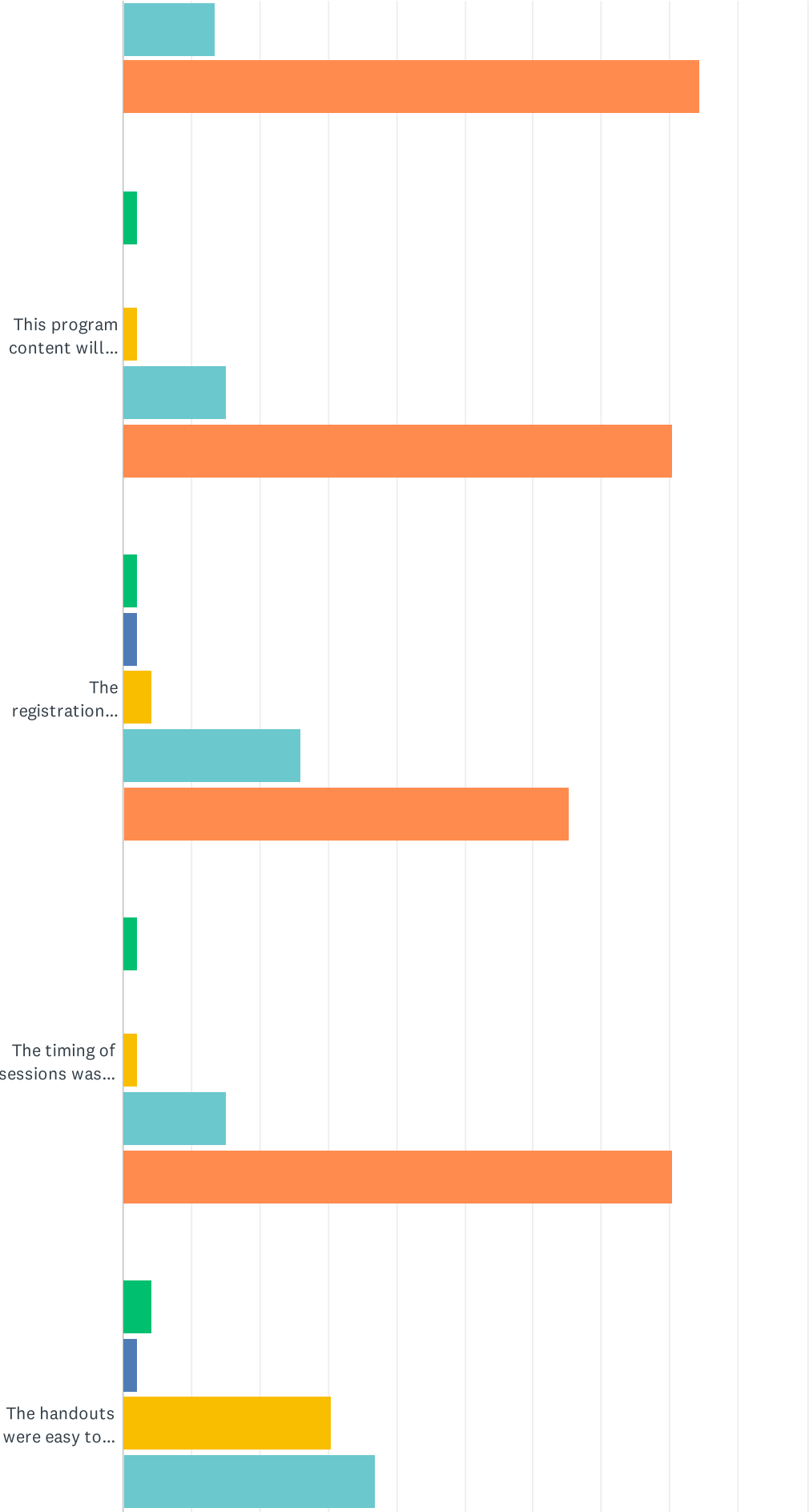
ANSWER CHOICES	RESPONSES	
In-person	17.10%	46
Online	82.90%	223
TOTAL		269

Q5 Please rate the degree to which you agree with the following statements.

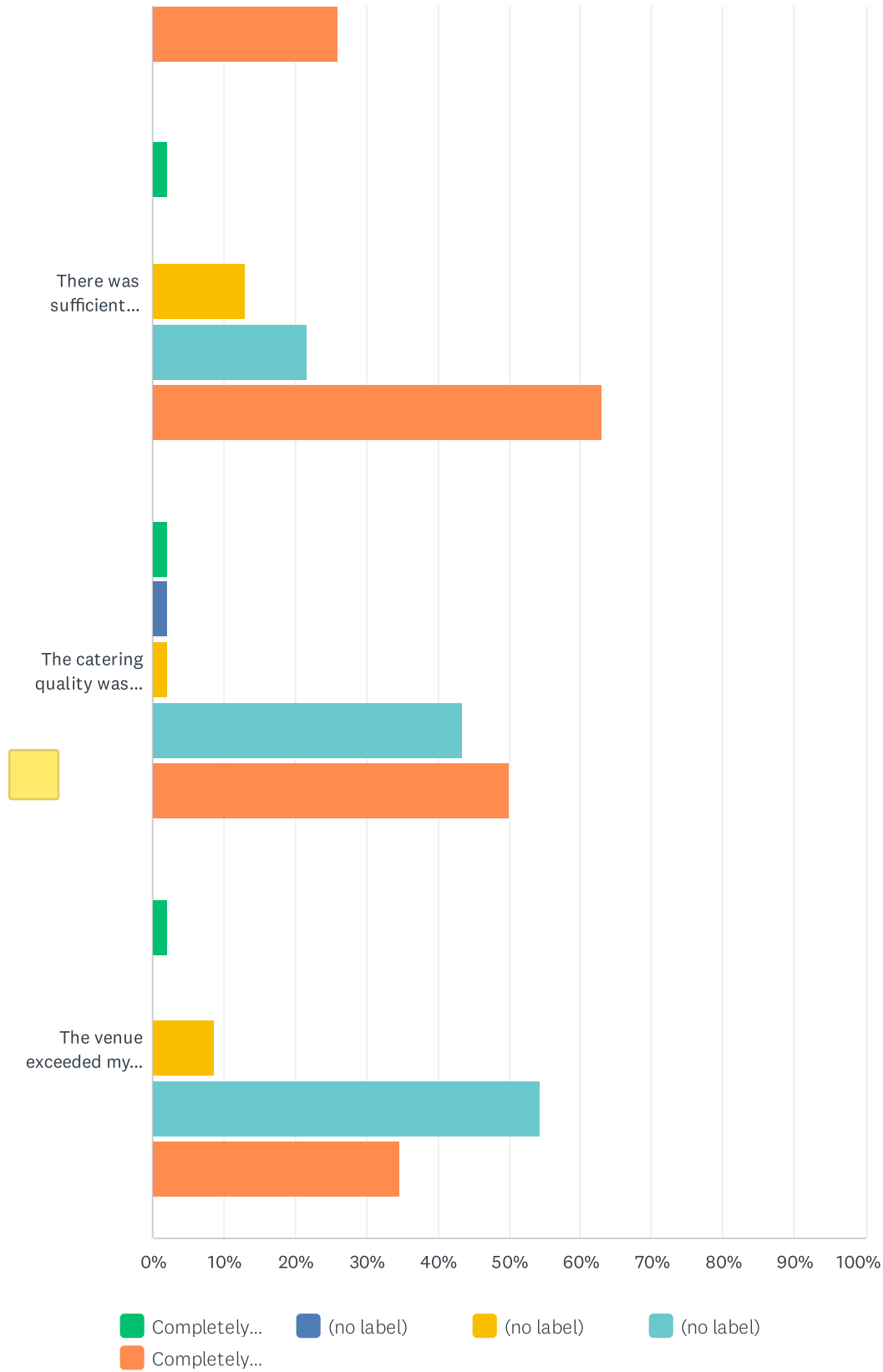
Answered: 46 Skipped: 224



2022 PEIP Overall Conference Evaluation



2022 PEIP Overall Conference Evaluation



	COMPLETELY DISAGREE	(NO LABEL)	(NO LABEL)	(NO LABEL)	COMPLETELY AGREE	TOTAL	WEIGHTED AVERAGE
This program content enhanced my knowledge.	2.17% 1	2.17% 1	0.00% 0	15.22% 7	80.43% 37	46	4.70
This program content was relevant to primary care.	2.17% 1	0.00% 0	0.00% 0	13.04% 6	84.78% 39	46	4.78
This program content met my expectations.	2.17% 1	0.00% 0	2.17% 1	19.57% 9	76.09% 35	46	4.67
This program content was well organized.	2.22% 1	0.00% 0	0.00% 0	13.33% 6	84.44% 38	45	4.78
This program content will be used in my future practice.	2.17% 1	0.00% 0	2.17% 1	15.22% 7	80.43% 37	46	4.72
The registration cost was reasonable.	2.17% 1	2.17% 1	4.35% 2	26.09% 12	65.22% 30	46	4.50
The timing of sessions was well managed.	2.17% 1	0.00% 0	2.17% 1	15.22% 7	80.43% 37	46	4.72
The handouts were easy to access.	4.35% 2	2.17% 1	30.43% 14	36.96% 17	26.09% 12	46	3.78
There was sufficient opportunity to network with fellow attendees.	2.17% 1	0.00% 0	13.04% 6	21.74% 10	63.04% 29	46	4.43
The catering quality was excellent.	2.17% 1	2.17% 1	2.17% 1	43.48% 20	50.00% 23	46	4.37
The venue exceeded my expectations.	2.17% 1	0.00% 0	8.70% 4	54.35% 25	34.78% 16	46	4.20

#	PLEASE FEEL FREE TO ADD ANY ADDITIONAL COMMENTS FOR SUGGESTIONS.	DATE
1	I will perish if I can't buy a t-shirt that says "We Don't Care and Nothing Works" next year	10/31/2022 9:10 AM
2	I greatly appreciated how the food was handled by the venue, felt good and safe!	10/24/2022 7:50 AM
3	More breaks between sessions, esp Friday afternoon	10/24/2022 6:28 AM
4	In person was really great, definitely got more out of it than if when virtual	10/23/2022 2:42 PM
5	PheedLoopGo! app is a bit slow, even when using at home.	10/23/2022 10:54 AM
6	Very well done, looking forward to future events	10/23/2022 8:19 AM
7	Some excellent speakers like the haematologist , obviously the Irish paediatrician was the best as I'm also Irish , the sports medicine talk was so applicable and easy to follow . Obviously Mike K, Tina, Adrienne and Mike A were great. Found the cardiology talk from pharmacist excellent also. Great to actually be in person and meet people again. Looking forward to peip 2023. Wifi was not good and found it hard to get evaluations for day one	10/22/2022 5:45 PM
8	Well done!	10/22/2022 4:19 PM
9	Make the individual feedback forms for the sessions shorter	10/22/2022 3:41 PM

Q6 What was the most valuable part of this program for you?

Answered: 36 Skipped: 234

#	RESPONSES	DATE
1	Content for time. Multiple relevant topics that all have ready to apply strategies	10/31/2022 12:18 PM
2	the what's new, true and poo section is my favorite!	10/30/2022 8:31 PM
3	The content was excellent this year	10/27/2022 12:05 PM
4	everything esp challenging the "status quo"	10/27/2022 10:48 AM
5	The bottom lines and learning about how simple is often better	10/27/2022 10:43 AM
6	Practical pearls	10/26/2022 11:50 AM
7	Subject matter	10/24/2022 3:40 PM
8	Presenting evidence based information. I don't have time to sort this out. I rely on experts. I want family medicine experts as they know what is relevant to my practice	10/24/2022 9:42 AM
9	trustworthy practical relevant information	10/24/2022 7:56 AM
10	Learning with fellow physicians	10/24/2022 7:55 AM
11	Good review of evidence on chronic disease management	10/24/2022 6:33 AM
12	high yield impactful evidence based medicine delivered rapidly	10/23/2022 6:52 PM
13	The content was good for needs off family physician	10/23/2022 4:13 PM
14	Fantastic that you had attendees focus on the 3 takeaways - facilitated me focussing on "factoids" that I will use in my practice	10/23/2022 2:45 PM
15	Although I enjoyed all the presentations the Newborn presentation was absolutely remarkable.	10/23/2022 2:39 PM
16	Evidence based knowledge, great PEIP team	10/23/2022 11:14 AM
17	Practice take home tips.	10/23/2022 10:56 AM
18	HF, insulin	10/23/2022 8:33 AM
19	Reviewing current evidence and debunking "myths"	10/23/2022 8:30 AM
20	Reaffirmed that I am doing the best I can for my folks when I follow EBM and take the time to do Shared Decision making with them. Very much appreciate all the tools and resources to help me in this.	10/23/2022 8:06 AM
21	Networking	10/23/2022 6:09 AM
22	Seeing old friends and colleagues again. Great content, relevant and useful.	10/22/2022 9:08 PM
23	All	10/22/2022 7:31 PM
24	So many Pearl's, hard to pick...	10/22/2022 7:09 PM
25	Free from industry bias, primary care focus, short talks with well spaced breaks, entertaining presenters	10/22/2022 6:04 PM
26	The content Msk talk excellent . Anemia talk also . Paeds excellent .	10/22/2022 5:47 PM
27	Paeds, MSK presentations	10/22/2022 5:26 PM
28	up to date info	10/22/2022 5:14 PM
29	Dr keough Dr Pierse	10/22/2022 5:05 PM
30	Family Docs providing best and practical simple evidence for Family Docs	10/22/2022 4:46 PM

2022 PEIP Overall Conference Evaluation

31	The right way to stop a nosebleed.	10/22/2022 4:28 PM
32	Myths debunked	10/22/2022 4:26 PM
33	Numerous useful tips for practice Chance to network in person	10/22/2022 4:20 PM
34	Practical tips to take back to practice	10/22/2022 4:19 PM
35	Everything	10/22/2022 3:43 PM
36	UTIs, anemia	10/22/2022 3:23 PM

Q7 What was the least valuable part of this program for you?

Answered: 32 Skipped: 238

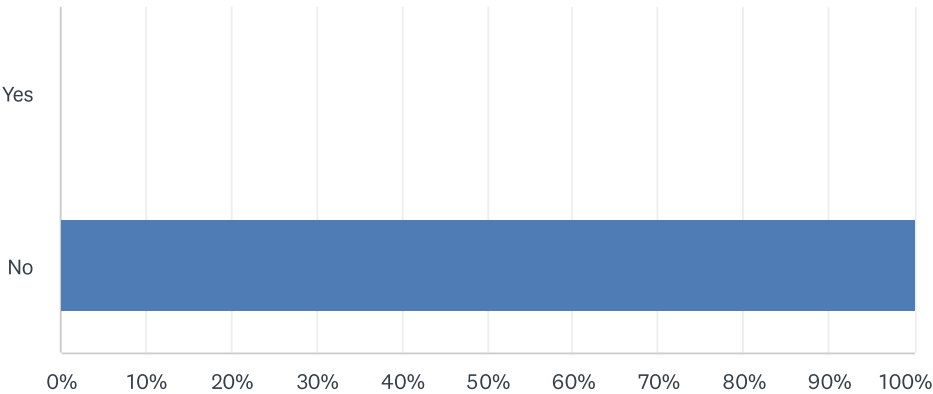
#	RESPONSES	DATE
1	Some of the more specialized topics (MSK/neonatal). Still found them enjoyable, just less applicable to my practice.	10/31/2022 12:18 PM
2	occasional speaker who is a little too serious	10/30/2022 8:31 PM
3	Research part was less valuable for me personally but I think it's still important to include	10/27/2022 12:05 PM
4	nothing	10/27/2022 10:48 AM
5	Although the Talk from Patrick the pediatrician was extremely interesting- the physical assessment of infants has no place in my practice	10/27/2022 10:43 AM
6	Nothing	10/26/2022 11:50 AM
7	None	10/24/2022 3:40 PM
8	Big topics with little time dedicated	10/24/2022 9:42 AM
9	not being able to access all the handouts, and having to download to phone and email to laptop to be able to make notes on the ones we had.	10/24/2022 7:56 AM
10	That part on advice to change patients minds	10/24/2022 7:55 AM
11	n/a	10/24/2022 6:33 AM
12	?networking- was nervous to make too many introductions.	10/23/2022 6:52 PM
13	The discussion on meds that need special authorization	10/23/2022 4:13 PM
14	Surprisingly, except for the vit D part, didn't get as much out of "what's new what's poo" both days	10/23/2022 2:45 PM
15	Newborn	10/23/2022 8:33 AM
16	when it came to an end	10/23/2022 8:30 AM
17	Can't say. It was all informative and valuable!	10/23/2022 8:06 AM
18	Not sure	10/23/2022 6:09 AM
19	N/A	10/22/2022 7:31 PM
20	I loved it so much this year I wished it was longer.	10/22/2022 6:04 PM
21	Drug coverage talk	10/22/2022 5:47 PM
22	Obesity	10/22/2022 5:26 PM
23	n/a	10/22/2022 5:14 PM
24	Nil	10/22/2022 5:05 PM
25	None	10/22/2022 4:46 PM
26	Forms. I personally am not involved in this area.	10/22/2022 4:28 PM
27	Nothing	10/22/2022 4:26 PM
28	Was all valuable	10/22/2022 4:20 PM
29	Difficult to think of practicing outside of guidelines even if evidence is poor in some situations given accountability to practice choices.	10/22/2022 4:19 PM
30	None	10/22/2022 4:15 PM

2022 PEIP Overall Conference Evaluation

31	Nothing	10/22/2022 3:43 PM
32	Peds newborn exam/ issues	10/22/2022 3:23 PM

Q8 Did you perceive any degree of bias in any part of this program?

Answered: 45 Skipped: 225



ANSWER CHOICES		RESPONSES	
Yes		0.00%	0
No		100.00%	45
TOTAL			45

#	IF YES, PLEASE COMMENT.	DATE
	There are no responses.	

Q9 Describe three ways in which you will change your practice as a result of attending this program.

Answered: 33 Skipped: 237

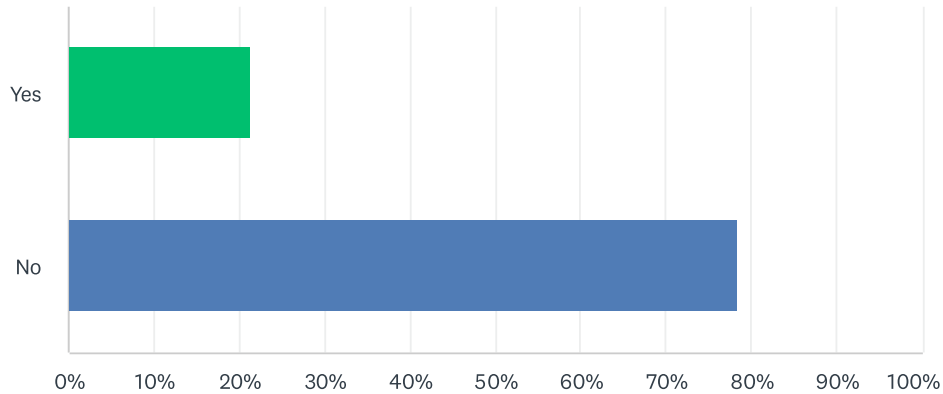
#	RESPONSES	DATE
1	Linking ICS and relievers in asthma, more confident approach to anemia management recognizing unexplained anemia of the elderly as a potential diagnosis, utilize osteoporosisdecisionaid.mayoclinic for helping discuss risk/benefits of OP management	10/31/2022 12:18 PM
2	order less lipid panels to check levels on statins, stop encouraging patients to take their BP meds at bedtime until we get the answer about times,	10/30/2022 8:31 PM
3	-change how I approach obesity & weight management -improve my approach to the newborn exam -change how I assess UTIs	10/27/2022 12:05 PM
4	Recommendations for iron/vitamin d are going to significantly change	10/27/2022 10:43 AM
5	Vitamins Weight loss Constipation	10/26/2022 11:50 AM
6	Reduce Rx in geriatric population Use more tools for practice Reduce Insulin usage	10/24/2022 3:40 PM
7	No more dipsticks and cultures for uncomplicated utis. No vitamins! Dedicate more time to chronic care and less to screening	10/24/2022 9:42 AM
8	Acquire a time turner so I can spend the 26+ hours I need in a day to do meet the expectations of my job. Extra encourage my post MI patients to get their flu shots. No BP meds for glaucoma pts at night. Not sweat over asymptomatic low ferritin/hgb when other causes ruled out. add some extra exam points to my shoulder exams and refer to the ahs resources for starter exercises. kirkwood substance question watch my spoons closely and a bunch of other stuff	10/24/2022 7:56 AM
9	Check for "drop signs" on my shoulder exam first, if none, don't order US right away Loosen my target for control of HbA1C and focus on weight + activity, BP and lipids 4 drops of vinegar in my kids ears after swimming	10/24/2022 6:33 AM
10	Less focus on A1c, more focus on meds with CVD improvement, more exercise less vitamins, deprescribing, less urinalysis	10/23/2022 6:52 PM
11	De prescribing meds Approach to ent problems	10/23/2022 4:13 PM
12	Sheesh! Everyone of those 3 points from each speaker. Zero vit D recommendations in healthy individuals. Better awareness of SGLP for HF patients	10/23/2022 2:45 PM
13	Shoulder exam was a nice refresher Can't wait to try the 'palm reflex' I'm going to make more use of the peer evidence guidelines	10/23/2022 2:39 PM
14	I wil consider discontinuing ASA in patient who are on anticoagulant for non valvular AF	10/23/2022 11:14 AM
15	Apply practice tips to patient care. Use the links provided (ex: for medication cascades and deprescribing)	10/23/2022 10:56 AM
16	Change tylenol prescribing Less rigid on HBA1C and monitoring Check out the deprescribing website	10/23/2022 8:33 AM
17	I will manage BP in pregnancy better Will no longer recommend Vitamin D as strongly as I did in the past For patients with nose bleeds, I will teach them how to properly pinch their nose(s)	10/23/2022 8:30 AM
18	Use Antibigrams Use more Mayo Clinic antibigrams Look for medication cascades and ramp up de-prescribing and medication minimizing efforts	10/23/2022 8:06 AM
19	Group Practical QI	10/23/2022 6:09 AM
20	CBC/anemia w/u and management. Shoulder approach. Debunk: start w fact, make is as simple and clear as possible (sticky), avoid talking about the myth, repeat the fact in a simple	10/22/2022 9:08 PM

2022 PEIP Overall Conference Evaluation

	way	
21	Use of decision aids, reframing weight discussions, shortening DAPT	10/22/2022 7:09 PM
22	I have an entirely new approach to diabetes, I want to focus on deprescribing, I feel relief that newer isn't always better, I want to empower my patients to know the truth as we know it, not as we are told by the media and special interest groups.	10/22/2022 6:04 PM
23	Better approach to anemia Don't order ultrasound for every rotator cuff tear Re consider insulin in diabetes higher hba1c threshold	10/22/2022 5:47 PM
24	Changed perception of vit D Clear pathway for managing anaemia Reducing time frame for dual anti platelet therapy	10/22/2022 5:26 PM
25	informed advice for use of supplements. better approach to infant heart murmurs. approach to glycemic targets for T2 DM.	10/22/2022 5:14 PM
26	Introducing deprescribing into my long term practice. Screening my patients for fracture risk rather relying on BMD Adding SGLT2 Rx for Heart Failure management	10/22/2022 4:46 PM
27	I was completely unaware that acetaminophen increases bp. I will be even LESS likely to order it. I've never believed that it works. I have a better understanding of how to address the patients who don't believe in science. But I'm actually very sympathetic... we've just found out that eliminating plaque Alzheimer's brains is not the be all and end all. And how'bout those SSRIs and depression?	10/22/2022 4:28 PM
28	Looking more critically at evidence UTI rx and management MSS tips for exam very helpful	10/22/2022 4:26 PM
29	Review notes and implement changes I decided to make based on each topic. Eg. Consider more often the cascade of meds and potential to deprescribe, don't actively promote vit D, watch for pathol comments in lab results showing decreased Hb.	10/22/2022 4:20 PM
30	1) Less push for Vit D! 2) No longer recommended HS HTN treatment. 3) Monitoring of infant GER with a higher threshold before considering interventions.	10/22/2022 4:19 PM
31	-work more on deprescribing -more confident to discuss to have discussion with patients about myths and misinformation in family medicine -identify common variations in newborns	10/22/2022 4:15 PM
32	No vitamin d recommendation in primary prevention Suggest massage for constipation Trust patient concerns for UTI and decrease reliance on dip stick results	10/22/2022 3:43 PM
33	Reassess SSRIs for benefit earlier, rely less on urine culture for UTI, add extra labs for normocytic anemia	10/22/2022 3:23 PM

Q10 Do you anticipate barriers that might prevent you from making these changes?

Answered: 42 Skipped: 228

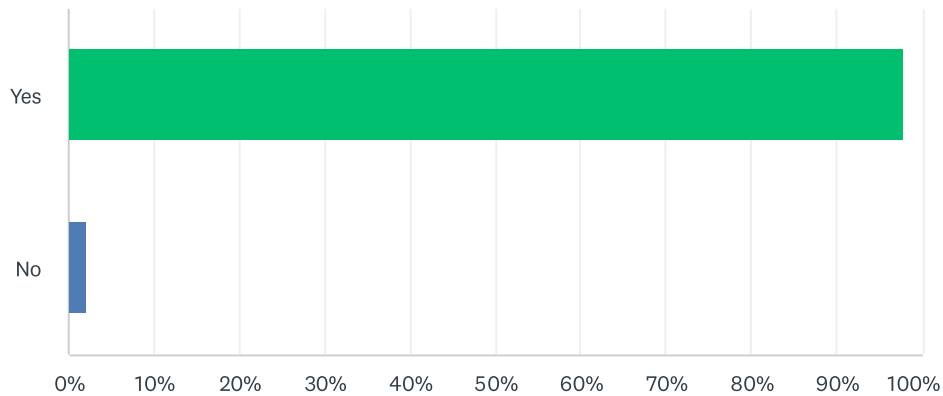


ANSWER CHOICES	RESPONSES
Yes	21.43% 9
No	78.57% 33
TOTAL	42

#	IF YES, PLEASE COMMENT.	DATE
1	patients demand testing at times	10/30/2022 8:31 PM
2	Physician resistance	10/27/2022 10:43 AM
3	My own beliefs and how my practice runs and staff beliefs	10/24/2022 9:42 AM
4	remembering all of them , time, patients not interested in our evidence over Gwentyth	10/24/2022 7:56 AM
5	De-prescribing BDZ's - I have yet to have anyone actually do CBT for sleep. So much resistance to trying to get off these. I feel like this is a lost cause for the Baby Boomers and my main goal is to prevent the next generation from becoming reliant on these for sleep...	10/23/2022 8:06 AM
6	Time	10/23/2022 6:09 AM
7	Making changes is always hard, especially battling misinformation. I hope to have the energy to keep going!	10/22/2022 6:04 PM
8	Some specialists may not approve of my deprescribing	10/22/2022 4:20 PM
9	Patient preferences	10/22/2022 4:19 PM

Q11 Do you plan to attend PEIP next year?

Answered: 45 Skipped: 225



ANSWER CHOICES		RESPONSES	
Yes		97.78%	44
No		2.22%	1

TOTAL		45	
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#	IF NO, PLEASE COMMENT.	DATE
	There are no responses.	

Q12 What topics would you like to see in next year's program?

Answered: 29 Skipped: 241


#	RESPONSES	DATE
1	Practical pearls for deprescribing (opioids/benzos), psych/bipolar/ADHD	10/31/2022 12:18 PM
2	treatment of pediatric mental health, get our pediatric speaker back to do the exam of the next age group!	10/30/2022 8:31 PM
3	-any updates on how to manage various mental health issues: borderline PD/cluster B traits, depression, anxiety, etc.? There is little to no Psychiatry support available in Alberta anymore, so we really need more information on this as Family Doctors	10/27/2022 12:05 PM
4	CV protection in diabetes, BPH treatment, refractory constipation , palliative care	10/27/2022 10:43 AM
5	General psychiatry Antimicrobial stewardship	10/26/2022 11:50 AM
6	Micro biome research	10/24/2022 3:40 PM
7	Appropriate ordering for echos Chronic disease management tick box style	10/24/2022 9:42 AM
8	shockwave ultrasound for erectile dysfunction physician life coaching for burnout	10/24/2022 7:56 AM
9	Incontinence Chronic GERD/longterm PPI use Menopause	10/24/2022 6:33 AM
10	Osteoporosis time line for treatment and follow up including drug holidays. PrEP.	10/23/2022 6:52 PM
11	Headaches diagnosis and treatment	10/23/2022 4:13 PM
12	more - LOT more - on deprescribing.	10/23/2022 2:45 PM
13	Birth control (pills/patch/ring/sub dermal implant/mirena/?depoprovera) when why who how long. ACR when to refer headaches motivational interview	10/23/2022 2:39 PM
14	Tinitis (ENT), infertility, Bronchiectasis (Pulmonology) , Lipid guideline (interpretation)	10/23/2022 11:14 AM
15	Review of different classes of diabetic meds.	10/23/2022 10:56 AM
16	Fatty liver - evidence (if any) around regular surveillance ultrasounds/fibroscans. Updates to CBD/THC - any new "evidence"?	10/23/2022 8:30 AM
17	Vaccine review - evidence for the new Prevnar20 and where it fits in vs Prevnar13 - and whether good evidence to use either on top of the usual public Pneumovax. Also please ask Dr. Adam K. back to do more MSK. He was great!	10/23/2022 8:06 AM
18	Migraine management Alcoholic liver disease	10/23/2022 6:09 AM
19	-Overview of all the mental health questionnaires: which to use, evidence behind them, how they contribute to management, etc. -keep the what's new/true/poo and Alan's practical cases w the EBM thrown in (case study like presentation).	10/22/2022 9:08 PM
20	Depression, update regarding antibiotics, more details regarding osteoporosis	10/22/2022 7:09 PM
21	I can't think of things right now but I'd love it if you emailed me in 3 or 6 months! Perhaps an overview of health screening in general? This breast cancer stuff has me so stressed.	10/22/2022 6:04 PM
22	Contraception and what to do with btb weight gain etc Copd which inhaler Hypertension which drug is best etc	10/22/2022 5:47 PM
23	Migraine	10/22/2022 5:14 PM
24	1. Palliative Care Overview and Symptoms Management. 2. Laboratory-Utility of BNP and other Cardiac Surrogates.	10/22/2022 4:46 PM
25	SSRIs and depression. New Alzheimer's treatments.	10/22/2022 4:28 PM

2022 PEIP Overall Conference Evaluation

26	Really practical approach to motivating patients to make changes eg, eat Mediterranean diet, do rehab exercises. How to cope with all the demands put on family docs given spotty inconsistent "team support" - eg in Calgary our PCN provided pharmacist team member for a while, then withdrew the service. Tips on virtual care. And how to train MOAs to determine who to book for virtual vs in-person. How can family docs work better with community pharmacists given some are great and some seem to do the bare minimum, but patients choose their pharmacist based on many factors.	10/22/2022 4:20 PM
27	1) update on Osteoporosis evaluation and treatment - broken down into the simplest possible flow chart PLEEEAAASSEE! 2) Same as above with the new CCS lipid guidelines - so confusing!	10/22/2022 4:19 PM
28	Prenatal care of high risk pregnancy Back pain Common eye problems	10/22/2022 4:15 PM
29	Basics of biologics (interactions, SE to monitor for, etc), Prep therapy	10/22/2022 3:23 PM

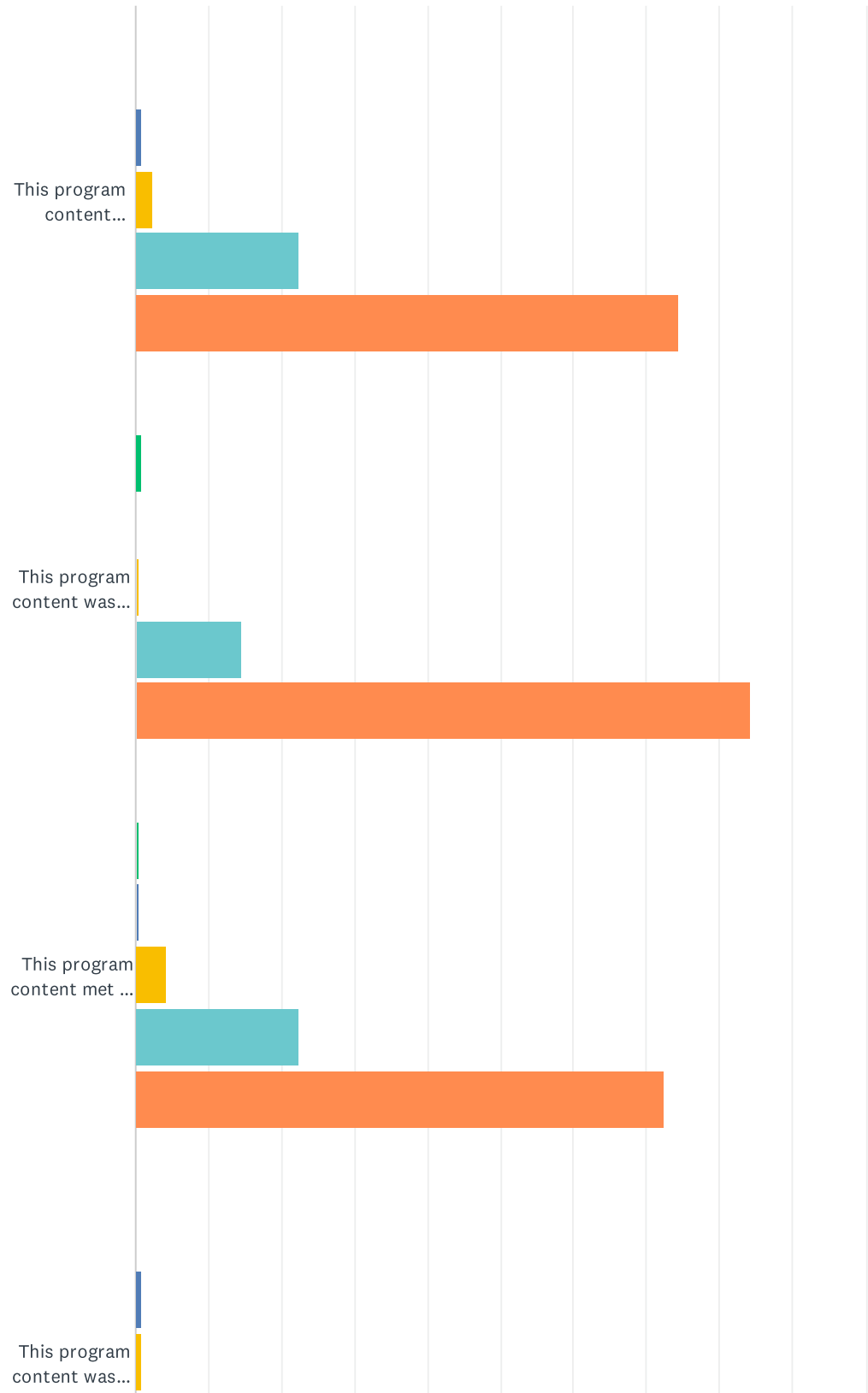
Q13 Please feel free to provide additional comments.

Answered: 9 Skipped: 261

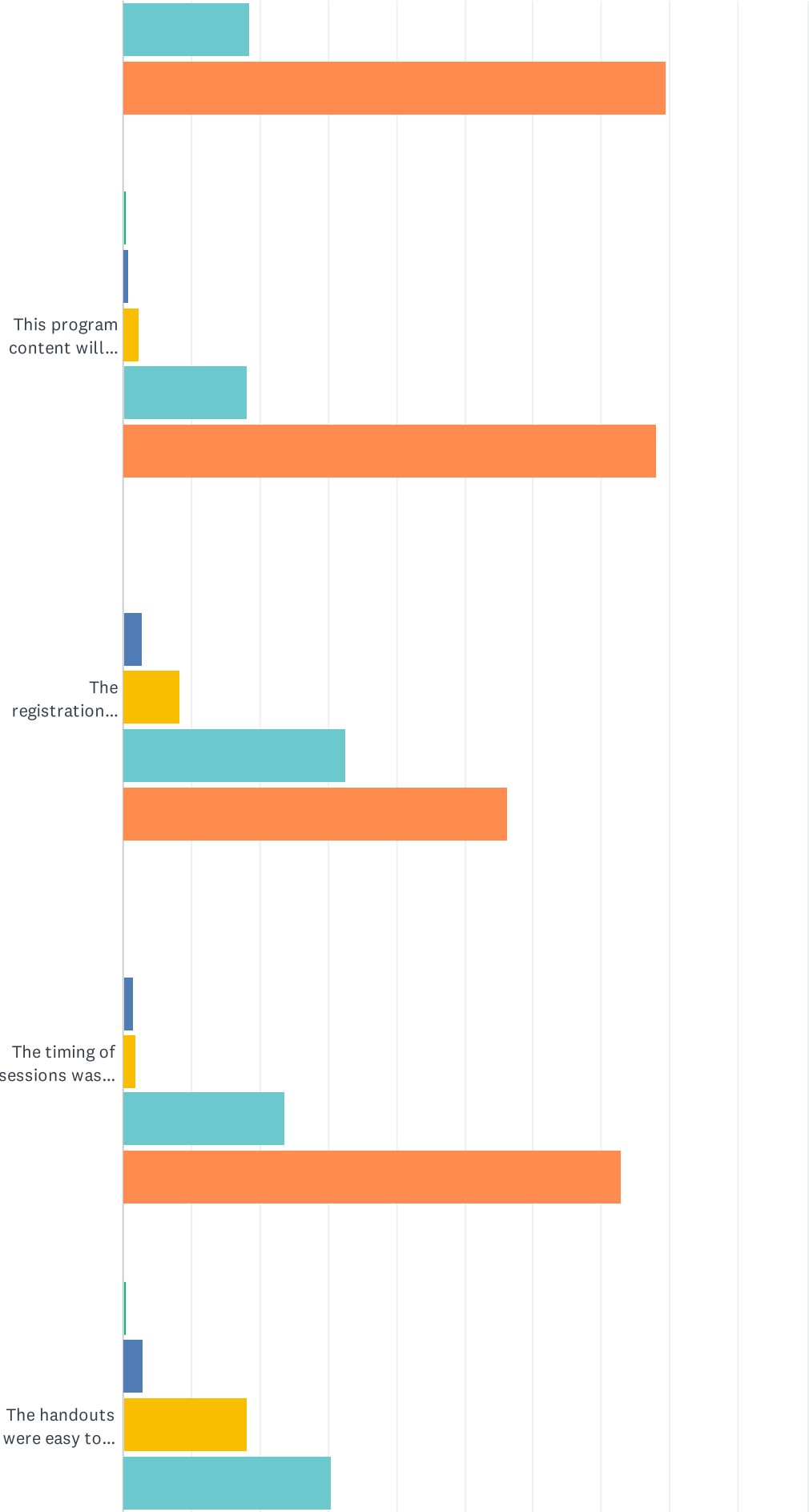
#	RESPONSES	DATE
1	Just wondering if slide not yet on the app will be provided: new,true,poo 2, Insulins, choose your own adventure	10/31/2022 12:18 PM
2	 better overall conference than last year	10/30/2022 8:31 PM
3	thank you thank you thank you for the best conference out there!	10/24/2022 7:56 AM
4	Incredible conference. I'm an r2 calgary, and this was 10x more high yield than our academic half days!	10/23/2022 6:52 PM
5	Excellent team and presentations	10/23/2022 11:14 AM
6	SO glad could attend in person again. SO much better to learn and interact in person again. Needed this. Definitely worth the drive from Calgary. Thanks so much!	10/23/2022 8:06 AM
7	Thanks for another great conference!	10/22/2022 9:08 PM
8	Thank you for another excellent conference!!	10/22/2022 6:04 PM
9	Excellent as usual Wifi an issue	10/22/2022 5:47 PM

Q14 Please rate the degree to which you agree with the following statements.

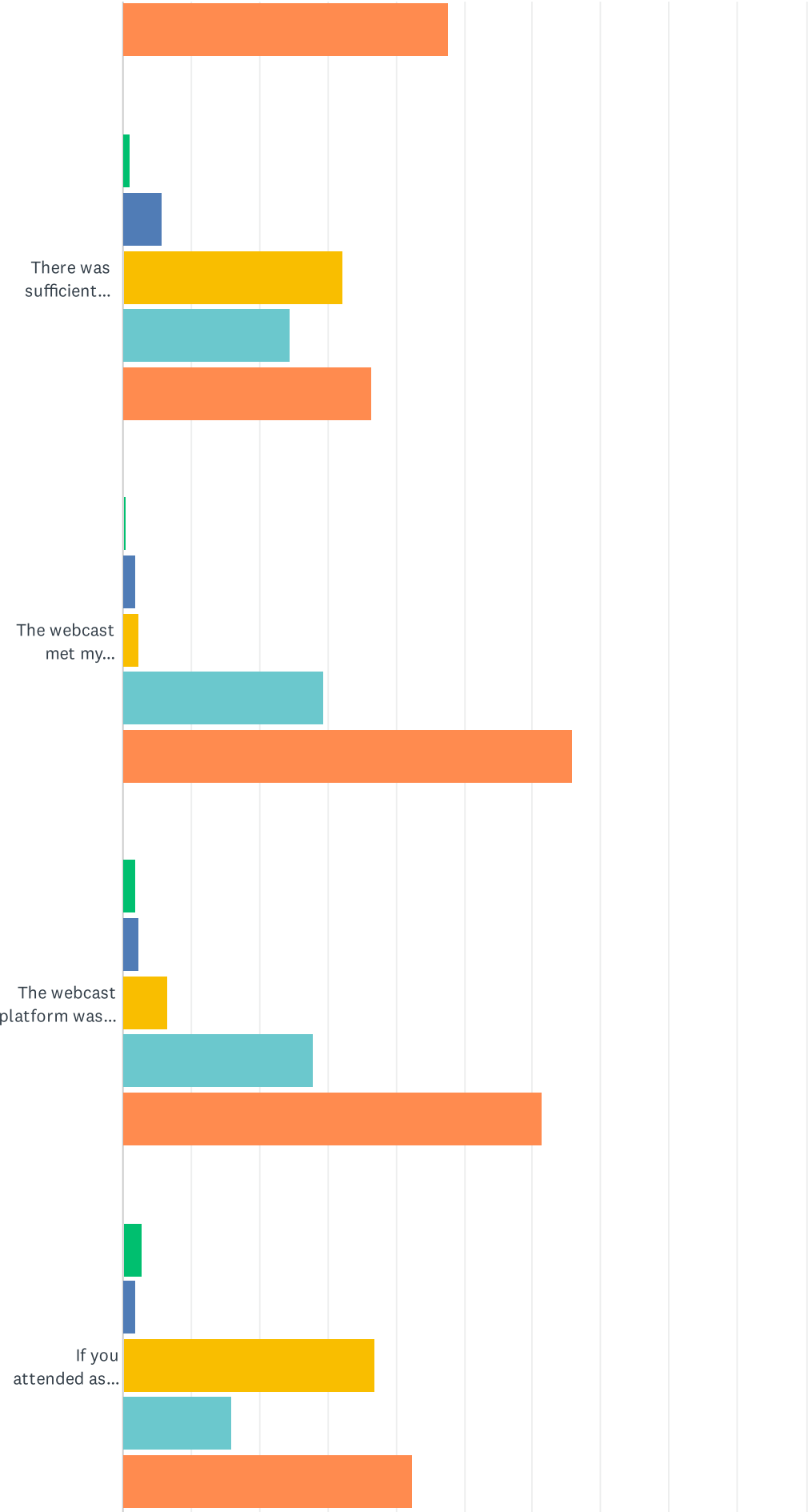
Answered: 215 Skipped: 55



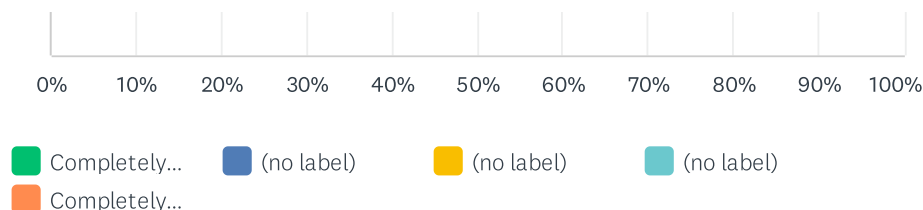
2022 PEIP Overall Conference Evaluation



2022 PEIP Overall Conference Evaluation



2022 PEIP Overall Conference Evaluation



	COMPLETELY DISAGREE	(NO LABEL)	(NO LABEL)	(NO LABEL)	COMPLETELY AGREE	TOTAL	WEIGHTED AVERAGE
This program content enhanced my knowledge.	0.00% 0	0.93% 2	2.33% 5	22.33% 48	74.42% 160	215	4.70
This program content was relevant to family medicine.	0.93% 2	0.00% 0	0.47% 1	14.42% 31	84.19% 181	215	4.81
This program content met my expectations.	0.47% 1	0.47% 1	4.19% 9	22.33% 48	72.56% 156	215	4.66
This program content was well organized.	0.00% 0	0.93% 2	0.93% 2	18.60% 40	79.53% 171	215	4.77
This program content will be used in my future practice.	0.47% 1	0.93% 2	2.34% 5	18.22% 39	78.04% 167	214	4.72
The registration cost was reasonable.	0.00% 0	2.79% 6	8.37% 18	32.56% 70	56.28% 121	215	4.42
The timing of sessions was well managed.	0.00% 0	1.40% 3	1.86% 4	23.72% 51	73.02% 157	215	4.68
The handouts were easy to access.	0.49% 1	2.96% 6	18.23% 37	30.54% 62	47.78% 97	203	4.22
There was sufficient opportunity to network with fellow attendees.	1.04% 2	5.73% 11	32.29% 62	24.48% 47	36.46% 70	192	3.90
The webcast met my expectations.	0.47% 1	1.87% 4	2.34% 5	29.44% 63	65.89% 141	214	4.58
The webcast platform was easy to use and navigate.	1.86% 4	2.33% 5	6.51% 14	27.91% 60	61.40% 132	215	4.45
If you attended as part of a clinic, learning as a group enhanced your overall learning and discussion.	2.83% 3	1.89% 2	36.79% 39	16.04% 17	42.45% 45	106	3.93

#	PLEASE FEEL FREE TO ADD ANY ADDITIONAL COMMENTS FOR SUGGESTIONS.	DATE
1	1. reduce cost, esp if attending virtually as one person (PBSGL, Mt. Sinai, St. Paul's all most cost effective/hr CME). 2. have slide handouts available for all speakers for the conference. 3. earlier access to review recordings after the conference. 4. try to streamline time ? all in one day.	10/30/2022 9:27 AM
2	The webcast was good but I have seen better. Not all presenter provided handouts at the time of the presentation. Time for questions was very, very short.	10/28/2022 5:54 PM
3	web platform was glitchy and annoying compared with past years	10/28/2022 9:49 AM
4	n/a	10/28/2022 6:32 AM
5	the video images kept going out of focus - very annoying	10/27/2022 7:34 PM
6	Excellent overall	10/27/2022 3:48 PM
7	When viewing the online version, one could only get the video to be medium sized so sometimes hard to view the slides.	10/27/2022 11:33 AM

2022 PEIP Overall Conference Evaluation

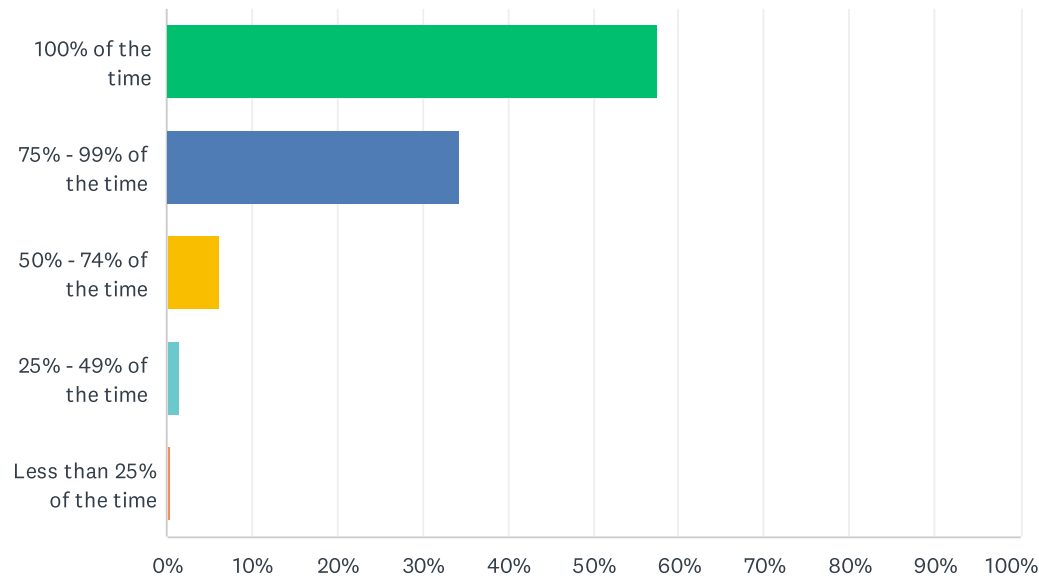
8	Overall wonderful, loved the length of each topic as well	10/27/2022 8:52 AM
9	Best conference of the year!	10/25/2022 4:45 PM
10	Overall enjoyed this format. Quick sessions feels more engaging.	10/25/2022 3:03 PM
11	tech difficulties caused some grief	10/24/2022 5:33 PM
12	Last question: I attended as a clinic, but each of us was on a personal home computer. We did not have the chance to 'learn as a group'.	10/24/2022 11:34 AM
13	I feel silly because I didnt realize that the sessions werent recorded immediately - I had to work saturday and so planned to watch monday and now I realize they arent available for a few weeks. Maybe make this REALLY obvious for us dolts like me.	10/24/2022 9:10 AM
14	Please include slides of all presentations. Some were missing.	10/24/2022 9:09 AM
15	Always my favourite conference! Love the humourous approach combined with the serious appraisal of evidence. All of the topics are common/practical issues we face every day. A real pleasure and a great learning opportunity.	10/23/2022 11:43 AM
16	For networking, it would've been nice to have one 10min break in the morning and one in the afternoon as it was almost too much back-to-back content	10/23/2022 11:26 AM
17	Didn't like having to log into each session separately but got the hang of it.	10/23/2022 11:08 AM
18	Would appreciate lower cost for residents!	10/23/2022 10:48 AM
19	The speakers this year were fantastic, and the topics very applicable to family medicine.	10/23/2022 10:19 AM
20	Great experience	10/23/2022 8:43 AM
21	Thank you to all involved..... best CME conference in North America	10/23/2022 8:41 AM
22	webcast platform was difficult to navigate, at times the video feed was blurry	10/23/2022 7:23 AM
23	Surpassed my expectations! All the information was useful and it was entertaining. Amazing!	10/23/2022 6:32 AM
24	The webcast was not easy to navigate	10/23/2022 6:16 AM
25	The online evaluations of each session were very faint on the screen and there was no submit button so I was not certain they saved. Also you had to leave the video and miss the introduction of the next talk to fill them out. The video would cut out at the end of each time period and you had to click on the next session to get back in....annoying. The sessions were great. I appreciated being able to download the speakers presentations.	10/22/2022 10:47 PM
26	sound did stall out during several presentations, usually for less than a second but occasionally for several. I found the switching modules really odd - the speaker is talking then suddenly she isn't and I have to change modules and by the time it reconnects, Ive missed what she was saying - UBC handled it much better. The feedback is positively bizarre, with no obvious way to access it till someone said, then having to access a new survey for each talk, never mind module, then windows staying open in surveymonkey - UBC has a single survey and you are asked did you attend this speaker, and if so then the questions pop up. For several of the sets of questions, they were terrible and totally generic and didn't even remind you of which talk they referred to - thats just lazy. I say all of this but have to put it in perspective - you run a great course and the evidence based, critical and sceptical point of view you take along with the no nonsense, lets be real about all these guidelines attitude is exactly what we need to hear - to reassure us, to streamline our overly busy practices and Ive never been disappointed with the presentations at PEIP.	10/22/2022 8:09 PM
27	Online provider not as good as in past. Organization and information prior to conference not as good as in past	10/22/2022 6:01 PM
28	Loved the summary slides at the end of the presentations	10/22/2022 5:43 PM
29	The second part of the registration process was convoluted and difficult to navigate. Actually had to call your help desk to get started! Room for streamlining!	10/22/2022 4:56 PM
30	Please when emailing give start and end time with reminders for folks like me.Auto caption had some weird text.Synagogues whining, cops tortoise etc	10/22/2022 4:13 PM

2022 PEIP Overall Conference Evaluation

31	It was difficult to find the handouts.	10/22/2022 4:08 PM
32	Virtual option is amazing to have and I hope it continues doing forward!	10/22/2022 4:04 PM
33	The online platform that was used in previous years was much better and easier to use than the one used this year	10/22/2022 3:57 PM
34	There was reasonable time allotted for questions, however there never seems to be enough time for all questions to be answered. The online platform was great. I really like to accessibility options available. Things move very quickly and a lot of information is presented so I am very grateful to have the recordings to go back to later on. It would be helpful if presenters could pause during the presentation just for a very short bit and repeat the most important concept, point or key idea at the time it is presented, just to give a chance for the idea to sink in a bit more. The summary at the end is very helpful but at the time, just a very short bit of pause to enable the main idea to resonate would be helpful. (I sometimes miss parts because I am taking notes about the key ideas.) Even though every session isn't directly relevant to my practice, I feel I can take away something from each presentation to enhance my provision of care. Excellent speakers --so knowledgeable and great presenters. None of them were boring --and that's unusual!! Overall another excellent conference!	10/22/2022 3:46 PM
35	Individual evaluations were too faint to be confident of questions. Your organization presents the most trustworthy tools and information for family doctors. Relevant, practical and timely	10/22/2022 3:45 PM
36	This was a fabulous conference my second year and loving it!!! Thank you	10/22/2022 3:34 PM
37	should be a longer conference. would consider travelling to in-person if worth more credits	10/22/2022 3:22 PM

Q15 I was able to "attend: the live webcast:

Answered: 210 Skipped: 60



ANSWER CHOICES		RESPONSES	
100% of the time		57.62%	121
75% - 99% of the time		34.29%	72
50% - 74% of the time		6.19%	13
25% - 49% of the time		1.43%	3
Less than 25% of the time		0.48%	1
TOTAL			210

Q16 What was the most valuable part of this program for you?

Answered: 178 Skipped: 92

#	RESPONSES	DATE
1	Learning new studies to be the most up to date with my knowledge.	10/30/2022 9:03 PM
2	Update in cardiology	10/30/2022 10:35 AM
3	industry-free, evidence-based	10/30/2022 9:37 AM
4	The pearls, as well as the panel discussions after three topics. It was great to have as much time to answer audience questions.	10/29/2022 11:03 AM
5	Presenters are all sensitive to providing a family practice point of view.	10/28/2022 6:37 PM
6	The quality of the speakers that help practitioners to know what's the bottom line, in efficacy/safety practice, when we are all so busy.	10/28/2022 6:18 PM
7	Being able to attend online	10/28/2022 6:10 PM
8	"What's new, what's true, what's poo" and any time speakers included a bottom line that can easily be integrated into daily clinical work.	10/28/2022 12:34 PM
9	Pediatric and hematology lectures	10/28/2022 11:48 AM
10	review of anemia	10/28/2022 6:34 AM
11	the bottom line	10/27/2022 7:38 PM
12	The presentations	10/27/2022 7:26 PM
13	Freedom from pharma influence Evidence based Knowing my job takes 26.7 hrs/ day	10/27/2022 6:18 PM
14	Practical evidence to aid in patient education	10/27/2022 5:22 PM
15	Relevance	10/27/2022 3:53 PM
16	What's new, true, and poo!	10/27/2022 2:42 PM
17	new data that I was unaware of	10/27/2022 1:37 PM
18	UTI talk. Anemia talk.	10/27/2022 1:21 PM
19	Updates in information.	10/27/2022 11:35 AM
20	Evidence updates	10/27/2022 10:48 AM
21	Practical tips	10/27/2022 10:31 AM
22	As always the info provided in the talks.	10/27/2022 10:28 AM
23	Anemia presentation	10/27/2022 10:25 AM
24	Clinical pearls	10/27/2022 8:55 AM
25	A1c review (metformin + SGLT2 and DPP4 for prevention) MSK talk was good	10/26/2022 3:22 PM
26	up to date evidence. presenting studies in an easy to understand way.	10/26/2022 6:12 AM
27	I found this conference one of the best with just about all topics relevant to my practice	10/26/2022 12:09 AM
28	what is new	10/25/2022 8:42 PM
29	The second day	10/25/2022 4:55 PM
30	Collegiality in an otherwise isolated time.	10/25/2022 4:46 PM
31	Updated info	10/25/2022 4:36 PM

2022 PEIP Overall Conference Evaluation

32	future recordings so I can watch	10/25/2022 3:17 PM
33	Being able to do it at home, good platform - clear connection.	10/25/2022 3:04 PM
34	Up to date information, best evidence, relevant	10/24/2022 7:51 PM
35	having great summaries fo papers that I don't have time to read, free of industry support	10/24/2022 6:33 PM
36	all	10/24/2022 6:32 PM
37	content, especially the whats new, etc	10/24/2022 5:38 PM
38	Quick review of latest evidence that was really applicable to my clinical practice. Lots of topics covered in short snappers, took away lots of pearls for clinical practice - excellent bang for your buck and for the time!	10/24/2022 4:20 PM
39	Opportunity to understand the evidence	10/24/2022 3:55 PM
40	What is new and what is Poo	10/24/2022 2:47 PM
41	short snappers	10/24/2022 1:00 PM
42	anemia update, BMD info	10/24/2022 12:52 PM
43	Newborn and sports Med sessions were very high yield	10/24/2022 12:00 PM
44	Practical suggestions	10/24/2022 11:37 AM
45	Learning more about PEER and tools for Practice. I signed up for the newsletter and have accessed the tools for practice which I am sure I will become more familiar with.	10/24/2022 11:00 AM
46	Values clearly stated, and reflected in the discussions. Concise, evidence, fun, practical	10/24/2022 10:16 AM
47	Reviews of the new studies and what the bottom line is	10/24/2022 10:03 AM
48	the practical approach to the evidence. How to discuss with patients and what strategies to use when shared decision making with patients	10/24/2022 9:25 AM
49	Extrapolating evidence and applying it to patient cases. Also the time for asking questions was very valuable.	10/24/2022 9:15 AM
50	Dr. Pierse.	10/24/2022 9:11 AM
51	I really enjoyed all the speakers and the questions periods. And I think it definitely was great having each speaker only present for the short period of time they did so that the attention of the audience was not lost	10/24/2022 8:28 AM
52	Succinct, practice changing information	10/24/2022 7:05 AM
53	High yield evidence based snappers - UTI, paediatrics, diabetes & obesity, gestational hypertension	10/24/2022 1:09 AM
54	the bottom line	10/23/2022 11:45 PM
55	love New True, Poo	10/23/2022 11:16 PM
56	The talk on newborns	10/23/2022 10:37 PM
57	Learning about new developments in medical literature/studies	10/23/2022 10:18 PM
58	Learning, re-learning, reviewing	10/23/2022 8:58 PM
59	Short and efficient sessions. Really enjoyed the weight/obesity sessions, as well as Dr Kirkwoods meth/OD session, and the deprescribing talk	10/23/2022 7:52 PM
60	All of it!	10/23/2022 7:51 PM
61	I was unable to attend the Saturday, so for me the most valuable part will be the ability to review the program for Saturday on my own time.	10/23/2022 6:50 PM
62	Being able to attend virtually	10/23/2022 5:42 PM
63	The expert speakers	10/23/2022 5:36 PM

2022 PEIP Overall Conference Evaluation

64	practical and free of bias	10/23/2022 4:47 PM
65	1. summarizing research in a relevant to family practice way 2. Virtual option	10/23/2022 4:12 PM
66	.	10/23/2022 4:09 PM
67	The sessions were all amazing this year. I appreciated that the topics were all very relevant to family medicine practices.	10/23/2022 4:03 PM
68	Cardiology update, review of new AB breast ca screening "guideline", MSK session	10/23/2022 2:20 PM
69	reviewing the presentations with colleagues	10/23/2022 1:46 PM
70	learning	10/23/2022 1:42 PM
71	Anemia talk All the EBM pearls Pediatric review	10/23/2022 1:30 PM
72	The most resent, relevant research updates	10/23/2022 12:13 PM
73	I love the what's new and what's poo content	10/23/2022 12:02 PM
74	Critical appraisal of evidence	10/23/2022 11:45 AM
75	The short relevant updates for practice	10/23/2022 11:38 AM
76	clinical pearls, short concise practice tips	10/23/2022 11:34 AM
77	Obesity management	10/23/2022 11:34 AM
78	Presentations	10/23/2022 11:17 AM
79	Review of the evidence on key conditions including weight management , heart failure and diabetes.	10/23/2022 10:58 AM
80	anemia talk	10/23/2022 10:48 AM
81	Pearls received	10/23/2022 10:46 AM
82	Anemia talk, lots of little useful pieces of information from other presentations	10/23/2022 10:37 AM
83	the new cardiac trials out by Ricky what's new, what's poo	10/23/2022 9:10 AM
84	Topics were all relevant to family med.	10/23/2022 9:08 AM
85	sports med and paedts talk	10/23/2022 8:51 AM
86	It is all so valauble -	10/23/2022 8:47 AM
87	Paediatric presentation, anemia, deprescribing, sports med,	10/23/2022 8:44 AM
88	I love what's new, true, and poo. Anemia talk was excellent	10/23/2022 8:42 AM
89	applicable info like diabetes treatment cascades and ortho exams	10/23/2022 8:20 AM
90	all the sessions were very valuable	10/23/2022 8:14 AM
91	The internal medicine related to family practice	10/23/2022 8:08 AM
92	What's new true poo - this makes research easily accessible!	10/23/2022 7:39 AM
93	all the topics!	10/23/2022 7:26 AM
94	Everything was very valuable!	10/23/2022 6:36 AM
95	Up to date informstion	10/23/2022 6:23 AM
96	Confirming things that I'm doing are evidence based.	10/23/2022 6:23 AM
97	Presentation of new research	10/23/2022 4:58 AM
98	Newborn care, uti management	10/22/2022 11:31 PM
99	All of it was valuable.	10/22/2022 10:55 PM
100	Ironing out anemia management	10/22/2022 10:16 PM

2022 PEIP Overall Conference Evaluation

101	Anemia review	10/22/2022 9:43 PM
102	the evidence based approach to problems I see everyday	10/22/2022 8:54 PM
103	Having access to the recording afterwards as I could not attend all sessions	10/22/2022 8:54 PM
104	everything	10/22/2022 8:53 PM
105	ENT, sports medicine, cardiac	10/22/2022 8:51 PM
106	My practice is limited to mental health so much of it didn't apply - but parts that didn't hone in on one subject - like reviewing unnecessary and poss. conflicting meds was useful. The lecture on stimulant abuse was relevant as I do get asked to manage adhd in people who have abused stimulants in the past.	10/22/2022 8:16 PM
107	The content was so relevant to the questions I have right now.	10/22/2022 7:41 PM
108	peds talk anemia talk	10/22/2022 7:17 PM
109	All of it	10/22/2022 6:39 PM
110	New true and poo	10/22/2022 6:34 PM
111	Clinical pearls on UTI, newborn care and MSK exam	10/22/2022 6:09 PM
112	Ent session msk session	10/22/2022 6:05 PM
113	Being able to do this from home, and learning about some new research in a pre-chewed format so it's easier to swallow.	10/22/2022 5:50 PM
114	The wide array of topics covered.	10/22/2022 5:47 PM
115	Summary slides	10/22/2022 5:46 PM
116	sometimes, even if you don't learn something new, you get confirmation that what you are doing is correct, or at least in line with what your peers are doing. its really great to hear from other family doctors and knowing that what I struggle with is similar to what others are.	10/22/2022 5:46 PM
117	Reviewing evidence for our practices	10/22/2022 5:40 PM
118	the new evidence	10/22/2022 5:38 PM
119	Vitamin D might not be indicated for most individuals	10/22/2022 5:25 PM
120	The "bottom line" for multiple pertinent and practical topics for family medicine.	10/22/2022 5:22 PM
121	HF, myths, quick hits, insulin, med approvals	10/22/2022 5:20 PM
122	New and true Anemia	10/22/2022 5:16 PM
123	The weight sessions, the shoulder/achilles tendonitis session and the anemia one	10/22/2022 5:09 PM
124	reinforcing the idea of "less is more"	10/22/2022 5:02 PM
125	The density of evidence base, clinically relevant information that is immediately implementable for Family Medicine	10/22/2022 5:00 PM
126	Quick updates	10/22/2022 4:59 PM
127	The sessions from the pharmaceutical team and the specialists	10/22/2022 4:58 PM
128	Talk: anemia Presentation: well timed breaks and hours of presentation. Quality of speakers	10/22/2022 4:58 PM
129	All of it was very useful	10/22/2022 4:39 PM
130	Clinical pearls, "bottom line" statements	10/22/2022 4:37 PM
131	Prescribing cascades / deprescribing	10/22/2022 4:34 PM
132	Most Uptodate information snd great speakers	10/22/2022 4:32 PM
133	Varied topics, shorter but practical presentations of things we use every day	10/22/2022 4:30 PM
134	MSK, Peds, weight talks	10/22/2022 4:26 PM

2022 PEIP Overall Conference Evaluation

135	All speakers	10/22/2022 4:22 PM
136	Virtual - made it reasonable and minimized the cost. Topics - overall well chosen. Speakers - also well chosen. Effective and at times even humorous. Platform - easy to navigate.	10/22/2022 4:21 PM
137	Dr Pierse - amazing!	10/22/2022 4:17 PM
138	Being reminded about the shoulder exam, and the pediatric wisdom.	10/22/2022 4:16 PM
139	sessions	10/22/2022 4:13 PM
140	Evidence based updates	10/22/2022 4:06 PM
141	Flexibility to attend online and access to the sessions after. I was able to attend everything in real time but there was a possibility that I might have been pulled away. I might not have attended the conference if I knew I might miss parts of the day. Next most valuable: availability of slides prior to the sessions (days before). It allowed me to pay more attention to the speaker and my notes will be more coherent when I go back to them.	10/22/2022 4:02 PM
142	Summary of relevant up to date evidence for family physicians	10/22/2022 4:01 PM
143	Evidence reviews	10/22/2022 3:59 PM
144	Information I can apply in my medical practice.	10/22/2022 3:56 PM
145	The length of time for each presentation was optimal. Gave time to digest the content.	10/22/2022 3:53 PM
146	Overall all the program was valuable	10/22/2022 3:53 PM
147	evidence based practical information	10/22/2022 3:52 PM
148	kick ass evidence	10/22/2022 3:50 PM
149	reflective approach to evidence for common conditions and making it simple, practical but somewhat lighthearted and respectful of colleagues and patient centred (shared decision making)	10/22/2022 3:50 PM
150	De-prescribing	10/22/2022 3:42 PM
151	All of the "bottom line" and quick reviews	10/22/2022 3:41 PM
152	the Peads talk and the ENT talk were the most informative as those areas I have the least amount of experience	10/22/2022 3:41 PM
153	It is both fun and easily digestible information that can actually change practice.	10/22/2022 3:41 PM
154	deprescribing, anemia, weight loss meds etc	10/22/2022 3:41 PM
155	Session on weight, shoulder exam, insulins, deprescribing	10/22/2022 3:40 PM
156	MSK and pediatrics talks	10/22/2022 3:40 PM
157	The quality of the speakers and the generally evidence-based approach in the topics - I trust the information I got.	10/22/2022 3:40 PM
158	candid real life clinical pearls	10/22/2022 3:36 PM
159	The pearls that i can incorporate into practice	10/22/2022 3:36 PM
160	Deprescribing	10/22/2022 3:36 PM
161	The questions	10/22/2022 3:36 PM
162	the option to watch the talks I had to miss while in clinic on Friday at a later date	10/22/2022 3:35 PM
163	First time attending - as a pharmacist it is was extremely relevant as to our supporting role to physicians in team based approach to patient care. Not absolutely all were totally relevant, but seeing it from the primary care physician perspective was extremely helpful to me.	10/22/2022 3:34 PM
164	I thought the UTI talk provided the most info that will change my practice.	10/22/2022 3:29 PM
165	evidence based presentation	10/22/2022 3:27 PM
166	Virtual aspect	10/22/2022 3:27 PM

2022 PEIP Overall Conference Evaluation

167	Anemia talk Peds presentation Rotator cuff and Achilles' tendon talk	10/22/2022 3:27 PM
168	specific treatments/myths addressed	10/22/2022 3:26 PM
169	The short snappers (short presentations of the evidence for common topics with bottom lines) Love myth busting	10/22/2022 3:26 PM
170	the session on deprescribing and the newborn talk	10/22/2022 3:25 PM
171	HARD TO PICK A FAVORITE, THIS WAS ONE OF THE MOST (USEFUL) INFO -LOADED YEARS YET	10/22/2022 3:23 PM
172	Succinct, relevant, to-the-point presentations with excellent speakers	10/22/2022 3:23 PM
173	key take home points about bread & butter family medicine topics	10/22/2022 3:21 PM
174	Wide variety of applicable topics	10/22/2022 3:19 PM
175	Concise evidence based	10/22/2022 3:18 PM
176	Clinical relevance	10/22/2022 3:16 PM
177	Deprescribing talk was great, Pat Pierce was great, insulin talk good reminder	10/22/2022 3:15 PM
178	Clinical Pearls that were succinct and to the point	10/22/2022 3:15 PM

Q17 What was the least valuable part of this program for you?

Answered: 138 Skipped: 132

#	RESPONSES	DATE
1	None- all was valuable.	10/30/2022 9:03 PM
2	Na	10/30/2022 10:35 AM
3	drawn out a bit longer, ? tighten timeline to have it all in one day? Drug approval session was informative, but could have been shorter.	10/30/2022 9:37 AM
4	Nil	10/28/2022 6:37 PM
5	Not being able to immediately watch video recordings or replays. I got called away on Saturday and missed 1&1/2 sessions. Would have been helpful to watch them right away. The length of time between the live event and recordings is disappointing and it ruins the flow of learning.	10/28/2022 6:10 PM
6	Hard to say...I found it all super helpful.	10/28/2022 12:34 PM
7	n/a	10/28/2022 6:34 AM
8	nil comes to mind	10/27/2022 7:38 PM
9	Networking	10/27/2022 7:26 PM
10	Clinical diagnostic issues, not part of my scope of practice	10/27/2022 5:22 PM
11	The jokes	10/27/2022 3:53 PM
12	Information more specific to those practicing in Alberta	10/27/2022 2:42 PM
13	networking	10/27/2022 1:37 PM
14	Update on HTN studies. Talk on drug approvals. Newborn talk - too much info too fast.	10/27/2022 1:21 PM
15	What's poo, but they were funny.	10/27/2022 11:35 AM
16	some of the Keynote lectures like anemia, ENT, MSK - they honestly seemed almost too basic. Medical school level lectures. Don't feel like they added a lot to my current level of knowledge/understanding	10/27/2022 10:48 AM
17	Can't say. All topics were relevant and useful	10/27/2022 10:31 AM
18	All of the program was valuable	10/27/2022 10:28 AM
19	when no slides were provided afterwards	10/27/2022 10:25 AM
20	The section on newborn didn't apply to my practice but was entertaining nonetheless	10/27/2022 8:55 AM
21	I have to admit that Saturday afternoon sessions of medication approval procedures etc and the medication "cascades" re: poly prescribing not as interesting nor very informative	10/26/2022 12:09 AM
22	nutrition	10/25/2022 8:42 PM
23	The first day	10/25/2022 4:55 PM
24	Nothing	10/25/2022 4:46 PM
25	none	10/24/2022 6:32 PM
26	Nothing... I found it all useful and educational! Loved attending from my home.	10/24/2022 4:20 PM
27	none	10/24/2022 3:55 PM
28	All valuable	10/24/2022 2:47 PM
29	little new/practice changing information	10/24/2022 1:00 PM

2022 PEIP Overall Conference Evaluation

30	Citing of statistics	10/24/2022 11:37 AM
31	limitations in implementation/application with a ton of information coming my way, agreement, but gaps in understanding the details and exactly what I will change and how.	10/24/2022 10:16 AM
32	Sports medicine section	10/24/2022 10:03 AM
33	NA	10/24/2022 9:15 AM
34	Obesity management	10/24/2022 9:11 AM
35	Nothing.	10/24/2022 8:28 AM
36	Nil	10/24/2022 7:05 AM
37	Vitamin D research	10/24/2022 1:09 AM
38	all useful	10/23/2022 11:45 PM
39	Medication approval process	10/23/2022 10:37 PM
40	Alot of things I already knew	10/23/2022 10:18 PM
41	The special authorization session	10/23/2022 8:58 PM
42	-	10/23/2022 7:51 PM
43	Alberta -centric discussions are less valuable to me as I don't live in that province, although very interesting to hear what is going in Alta.	10/23/2022 6:50 PM
44	in person activities: meals, snacks, events	10/23/2022 4:12 PM
45	.	10/23/2022 4:09 PM
46	ENT talk	10/23/2022 1:30 PM
47	The ultra busy slides	10/23/2022 12:13 PM
48	Can't sau	10/23/2022 12:02 PM
49	The research study talk and the medication approval strategies talk	10/23/2022 11:38 AM
50	areas of research that do not directly affect my daily practice	10/23/2022 11:34 AM
51	There was value in all of the content	10/23/2022 11:34 AM
52	Q & A but still good	10/23/2022 11:17 AM
53	drug addiction talk	10/23/2022 10:48 AM
54	UTI talk - didn't off a lot of new information	10/23/2022 10:37 AM
55	the assessments of MSK injuries	10/23/2022 9:10 AM
56	Had to miss a bit of the conference and would be nice if this was available soon after (e.g. the same evening).	10/23/2022 9:08 AM
57	BP study	10/23/2022 8:51 AM
58	It is so much info and I would like to implement it all	10/23/2022 8:47 AM
59	med cascades, myths and misinformation	10/23/2022 8:42 AM
60	less clinically applicable info like drug approval processes and detailed analysis of pharmaceuticals	10/23/2022 8:20 AM
61	Halloween studies but it was fun!	10/23/2022 8:14 AM
62	All was good	10/23/2022 8:08 AM
63	Everything was really great!	10/23/2022 7:39 AM
64	nil	10/23/2022 7:26 AM
65	See above	10/23/2022 6:36 AM

2022 PEIP Overall Conference Evaluation

66	Online socializing	10/23/2022 6:23 AM
67	Listening to sports medicine without evidence and neonatal evaluation without evidence(sure, he has the experience, but nothing evidence based).	10/23/2022 6:23 AM
68	It was all great!	10/22/2022 11:31 PM
69	None of it	10/22/2022 10:55 PM
70	New, true and poop	10/22/2022 9:43 PM
71	thought it was all pretty good	10/22/2022 8:54 PM
72	nothing	10/22/2022 8:53 PM
73	I don't do much peds.	10/22/2022 8:51 PM
74	Doesn't compute.	10/22/2022 8:16 PM
75	Statistics	10/22/2022 7:41 PM
76	None.	10/22/2022 7:41 PM
77	weight as a predictor of outcomes	10/22/2022 7:17 PM
78	Repeated questions	10/22/2022 6:39 PM
79	Obesity	10/22/2022 6:34 PM
80	Info about on going studies although it was still interesting	10/22/2022 6:09 PM
81	Diet/weight loss. It has been done numerous times	10/22/2022 6:05 PM
82	A couple of the presenters spoke on topics I feel I already know well or didn't provide pearls that would give me anything I shouldn't have already learned, such as the MSK talk.	10/22/2022 5:50 PM
83	No really practice changing information was presented.	10/22/2022 5:47 PM
84	Somethings like weight loss, drug approvals etc I don't deal with in my scope of practice but were interesting.	10/22/2022 5:46 PM
85	having attended the webcase, i do miss the in person networking.	10/22/2022 5:46 PM
86	How drugs are approved	10/22/2022 5:40 PM
87	drug application process	10/22/2022 5:38 PM
88	Everything was great	10/22/2022 5:25 PM
89	The "nitty-gritty" of the studies (but I still feel this is important to include!)	10/22/2022 5:22 PM
90	Newborns, MSK (but interesting and well done)	10/22/2022 5:20 PM
91	None	10/22/2022 5:16 PM
92	Mostly just a bit hard to stay focused online!	10/22/2022 5:09 PM
93	Peds session, felt below level of current training and had no new pearls	10/22/2022 4:59 PM
94	The insulin presentation	10/22/2022 4:58 PM
95	Discussion on the scientific evidence was at times excessive	10/22/2022 4:58 PM
96	Nil	10/22/2022 4:39 PM
97	There was no rural family medicine representation	10/22/2022 4:37 PM
98	Wokeness	10/22/2022 4:34 PM
99	None	10/22/2022 4:32 PM
100	Nothing	10/22/2022 4:30 PM
101	None	10/22/2022 4:22 PM
102	I found it quick and snappy which was good but as a note-taker it was hard to keep up. 20	10/22/2022 4:21 PM

2022 PEIP Overall Conference Evaluation

minutes is not much time for a presenter for some of these topics. Some topics were not as relevant to my practice. Also suggesting pharmacists are able to fill out special auth'n forms was annoying and felt out of touch with reality (compared to what I know of most community or hospital practices).

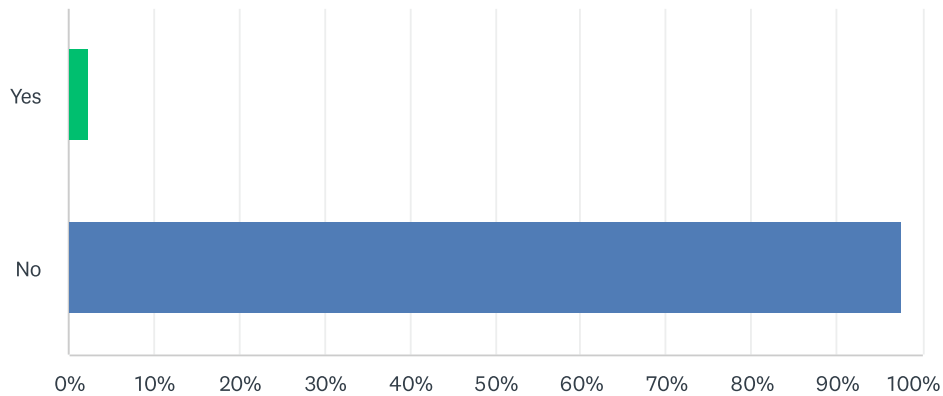
103	honestly everything had value - don't want to select one for this	10/22/2022 4:17 PM
104	None	10/22/2022 4:16 PM
105	Sometimes connection cut out	10/22/2022 4:13 PM
106	The newborn talk	10/22/2022 4:06 PM
107	That's hard to answer. I think it's very well organized and flowed well. I can't think of an answer to this right now.	10/22/2022 4:02 PM
108	The talk on suggestions for getting meds approved did not live up to its billing - no real practical suggestions.	10/22/2022 4:01 PM
109	Topic reviews that lacked evidence based focus	10/22/2022 3:59 PM
110	Nothing	10/22/2022 3:56 PM
111	Everything was valuable.	10/22/2022 3:53 PM
112	I wish most of GPs attend it	10/22/2022 3:50 PM
113	nothing	10/22/2022 3:50 PM
114	Drug access barriers	10/22/2022 3:42 PM
115	Canadian pharmaceutical costs	10/22/2022 3:41 PM
116	the talk on the drug coverage - was a difficult topic to cover, but was not practical and focused on the clinical setting.	10/22/2022 3:41 PM
117	Anything with graphs	10/22/2022 3:41 PM
118	ENT	10/22/2022 3:41 PM
119	the what's poo (but it is humorous)	10/22/2022 3:40 PM
120	Update on new guidelines. I felt speakers we biased.	10/22/2022 3:40 PM
121	Nothing specific wasn't valuable.	10/22/2022 3:40 PM
122	none	10/22/2022 3:36 PM
123	Nada	10/22/2022 3:36 PM
124	Newborn exam. (Adult only practice) but I love Dr Pierce and hadn't seen him since I was a student	10/22/2022 3:36 PM
125	when poor internet connection by the virtual speakers we missed some of their comments	10/22/2022 3:35 PM
126	Not even sure I have such an opinion - as mentioned, not all exactly relevant, but all extremely interesting none the less.	10/22/2022 3:34 PM
127	none	10/22/2022 3:27 PM
128	Not applicable	10/22/2022 3:27 PM
129	All topics were relevant	10/22/2022 3:27 PM
130	Alberta-specific resources since do not practice in Alberta	10/22/2022 3:26 PM
131	The newborn talk was nothing new, but reinforced knowledge- so that is OK. I didnt' find the ENT talk or the MSK talk as evidence based as some of the others	10/22/2022 3:26 PM
132	It was all great!	10/22/2022 3:25 PM
133	THE BREAKS	10/22/2022 3:23 PM
134	networking	10/22/2022 3:21 PM

2022 PEIP Overall Conference Evaluation

135	N/A	10/22/2022 3:18 PM
136	Nothing really, all good	10/22/2022 3:16 PM
137	All great	10/22/2022 3:15 PM
138	The music choice	10/22/2022 3:15 PM

Q18 Did you perceive any degree of bias in any part of this program?

Answered: 207 Skipped: 63



ANSWER CHOICES	RESPONSES
Yes	2.42% 5
No	97.58% 202
TOTAL	207

#	IF YES, PLEASE COMMENT.	DATE
1	n/a	10/25/2022 4:46 PM
2	Thank you so much for this.	10/23/2022 11:17 AM
3	Plugging personal books and apps.	10/23/2022 6:23 AM
4	the idea of a pharmacist stopping a medication on one of my patients without discussing it with me should be grounds for being fired,	10/22/2022 8:16 PM
5	only with podcast and book mentions	10/22/2022 3:52 PM
6	Some speakers discrediting new guidelines seemed biased and suggested that certain specialists cannot be trusted that seemed in bad taste and undermined their own trustworthiness	10/22/2022 3:40 PM

Q19 Describe three ways in which you will change your practice as a result of attending this program.

Answered: 169 Skipped: 101

#	RESPONSES	DATE
1	stop recommending vitamin D, try to de-prescribe, find source of iron deficiency	10/30/2022 9:03 PM
2	- question the role of vitamin d for primary prevention - Tylenol may cause hypertension -	10/30/2022 10:35 AM
3	1. approach for debunking myths with pts. 2. strengthening exercises for Achilles tendinopathy (not just stretching). 3. more likely to take high risk of bleeding pts off of DAPT post PCI if cardiologist agrees. 4. OST for assessing risk of fractures. 5. some approaches to use with SUD pts.	10/30/2022 9:37 AM
4	pearls expert talks on relevant topics	10/29/2022 11:03 AM
5	Our practice is in complete upheaval right now as we had to close our doors at the end of September. Haven't had time to really think about this. Will see if I am still in practice in 3 months.	10/28/2022 6:37 PM
6	1-Long acting insulins have no evidence for hard outcomes or severe hypoglycemia. 2- Be mindful of prescribing cascades. 3-The importance of heal rises.	10/28/2022 6:18 PM
7	Reading studies Med reduction Bias reviews	10/28/2022 6:10 PM
8	It made me realize that I can focus on helping patients manage acute and chronic health concerns and don't need to feel as guilty if their screening isn't all perfectly up to date, since we tend to have less reliable evidence for our screening. I will look for alternative causes for an elderly patient presenting with delirium before assuming urine must be the culprit! HbA1c - does anyone really care? Vs focusing on a patient's goals for their own health and outcomes in managing DM. De-prescribe before new prescribes!	10/28/2022 12:34 PM
9	New born exam , CBC evaluations, Medication cascade	10/28/2022 11:48 AM
10	apply updated knowledge to daily practice.	10/28/2022 6:34 AM
11	- not testing u/a and c&s for presumed UTI in women - considering stopping multiple antiplatelet agents post stent - advocate more for Mediterranean diet	10/27/2022 7:38 PM
12	See individual lecture surveys	10/27/2022 6:18 PM
13	Flu vaccination promotion Deprescribing, especially Vit D !! Screening info	10/27/2022 5:22 PM
14	Newest info Practical tips Tools	10/27/2022 3:53 PM
15	recommend vitamin D less, consider closely before advising Tylenol for pain, be aware of facts regarding colonoscopy and mammogram screening	10/27/2022 1:37 PM
16	1. No longer do urines on women who call saying they have a UTI - and just have a phone appt. 2. Really push flushot after an MI. 3. Stop PPI in many of my patients on anticoagulants.	10/27/2022 1:21 PM
17	Introduce more exercise to patients Stop with vitamins and watch the amount of Vitamin D More deprescribing	10/27/2022 11:35 AM
18	Improved diabetes management, counsel patients better around antidepressants, better counselling around weight loss medications	10/27/2022 10:48 AM
19	..	10/27/2022 10:31 AM
20	I picked up some helpful tips for assessing cbcd results.	10/27/2022 10:28 AM
21	enhanced understanding of lab work as it pertains to iron deficiency anemia and therefore better ability to recommend go forward plan from data greater understanding of optimal vitamin	10/27/2022 10:25 AM

2022 PEIP Overall Conference Evaluation

B12 levels and when to treat and continue treatment greater understanding of lack of evidence for vitamin d. So I will be less keen to ensure Fosamax patients are on vitamin d

22	Anemia management Loved the little snippets In what's new... Myths in primary care	10/27/2022 8:55 AM
23	no longer dip urines consider higher a1c targets in certain populations no longer borrow workplace teaspoons	10/26/2022 6:07 PM
24	Better achilles treatment, fewer labs, more evidence, may start OAT treatment	10/26/2022 3:22 PM
25	re-think nighttime BP med dosing macrocytosis workups	10/26/2022 6:12 AM
26	1. Glad to hear all preparations of iron are effective/I've heard so much different conflicting information in the past 2. Exam of shoulder for ? issues of rotator cuff 3. RE: treating UTI's while in will not change my practice because I confess that is how I have been practicing but now I feel supported with actual evidence	10/26/2022 12:09 AM
27	The use of iron and investigation of anemia, treatment of CHF diabetic control	10/25/2022 8:42 PM
28	Change conversations about Vitamin D, approach to UTIs, and deprescribing!	10/25/2022 4:46 PM
29	Order fewer tests when possible Prescribe less hopefully Deprescribe when possible	10/25/2022 4:36 PM
30	Try to deprescribe: multivitamin, vitamin d	10/25/2022 3:17 PM
31	Anemia management, newborn exam, applying studies practically.	10/25/2022 3:04 PM
32	better attention to evidence for a variety of therapeutic and preventative interventions	10/24/2022 7:51 PM
33	awareness of my own prescribing cascades, how to deprescribe, rethinking vitamin D recommendations	10/24/2022 6:33 PM
34	keep things simple treat the patient , not the numbers run with what is available now and have the enthusiasm to keep searching for newer facts to better manage patients in an evidence based fashion adequately	10/24/2022 6:32 PM
35	no more urine dips stop dual platelet tx sooner use the abntibx table, and especially the myth busters	10/24/2022 5:38 PM
36	There are so many!! 1) Will decrease how much imaging I order for rotator cuff assessment, if it won't change management then don't order it unless they are unresponsive to rehab or have red flags or other comorbidities. 2) UTI management - I will rely less on urine dip and culture to inform my treatment. Let presenting symptoms guide my treatment for uncomplicated UTIs. 3) Fe deficiency anemia pearls - treat the patient not the labs!	10/24/2022 4:20 PM
37	1. More confident looking at the literature to answer my own clinical questions 2. Healthy skepticism about certain long standing practices, confidence to explain to patients risk/benefit as a result 3. lots of clinical pearls	10/24/2022 3:55 PM
38	Less emphasis of Vitamin D- Flu shot after MI - Better approach to anemia /	10/24/2022 2:47 PM
39	Little practice-changing information was available.	10/24/2022 1:00 PM
40	better shoulder exam, stepwise anemia workup, BMD online decision tool	10/24/2022 12:52 PM
41	-use of ortho COMET program -improved shoulder physical exam skills -better knowledge around obesity and overweight	10/24/2022 12:00 PM
42	More aware of SGLT2 inhibitors for HFpEF Weight loss strategies for those who ask (info on Contrave was appreciated) Watching more closely for medication cascades	10/24/2022 11:37 AM
43	Advise patients about taking BP and statin medications at whatever time of day is best for them, better advise pts with obesity re: medications/bariatric surgery and access Best Science Medicine podcast and Tools for Practice to further broaden my knowledge.	10/24/2022 11:00 AM
44	higher threshold for acting on BMI lean away from evening/hs dosing of BP meds as well as statins consider bisphosphonate 5yr holiday, followed by restart	10/24/2022 10:16 AM
45	Stop Vit D, knowledge of HFpEF meds, deprescribing resources	10/24/2022 10:03 AM
46	- osteoporosis management - tylenol and BP - not recommending vitamin D :)	10/24/2022 9:25 AM

2022 PEIP Overall Conference Evaluation

47	Use caution/monitor when adding acetaminophen to a pt with HTN. Reasonable target of 2g NaCl per day, no benefit from going below that. Taking BP meds at bedtime, no effect on vascular death, hospitalization but will have more conclusive results from Alberta randomized trial.	10/24/2022 9:15 AM
48	HTN in pregnancy guidelines as presented by the first pharmacist .	10/24/2022 9:11 AM
49	- How I assess patients for UTI - How to properly assess iron anemia in patients and what the comments mean provided by lab - The different medications available for opioid use disorder and how we can help make a difference with our patients in regards to harm reduction	10/24/2022 8:28 AM
50	My approach to UTIs, looking for pharmacological cascades, use of vitamin D	10/24/2022 7:05 AM
51	I will reconsider urine cultures for patients with uncomplicated UTI symptoms & further reduce. I will emphasize more physical activity & positive outcomes. I will likely reduce the number of bone density tests I am ordering g & just recalculate the FRAX scores.	10/24/2022 1:09 AM
52	make use of sglt-2 more	10/23/2022 11:45 PM
53	Make sure to offer flu shot in MI patients. Be clearer in expectations that urine not be collected for institutionalized patients. Consider recommending prune juice more often	10/23/2022 11:16 PM
54	Less prescribing PPI for infants, inform patients that Alberta recommends mammograms at age 45 now, focus more on patients level of physical activity	10/23/2022 10:18 PM
55	1) Use antibiogram 2) Pay more attention to the words on the CBCD 3) Trying nitro patch for tendinopathy	10/23/2022 8:58 PM
56	Work on deprescribing! Changing my practice on using ventolin for post viral cough	10/23/2022 7:52 PM
57	Study more re: opioid agonist therapy Sublocade Check to see if we have Xylocaine 12% spray Implement an osteoporosis screening tool	10/23/2022 6:50 PM
58	stick to the truth recommend exercise more ask pharmacist	10/23/2022 4:47 PM
59	So, this was asked in every single evaluation for each speaker and I filled it out to the best of my ability, even when it was a stretch to find 3 things. So I would like you to refer to those evaluations please.	10/23/2022 4:12 PM
60	.	10/23/2022 4:09 PM
61	1. Always treat the patient, not the numbers. 2. Review wording of communication / signs in the clinic with a focus on being positive and kind. 3. Review practises around UTI's (make it easier for patients to receive treatment, reduce ER visits for UTI's). + many other new ideas!!	10/23/2022 4:03 PM
62	order fewer BMDs/use OST more consistently, continue to use the CTFPH info graphic on mammo screening for 40-49yr average risk patients, tell glaucoma patients to take their BP meds in the morning!	10/23/2022 2:20 PM
63	MSK injuries Diabetic management Not stealing spoons	10/23/2022 1:42 PM
64	Read pathology comments on lab reports related to anemia work up More reassurance of parents with concerns about their infants - better knowledge of the range of normal What to look for in shoulder s that might indicate an acute surgical referral	10/23/2022 1:30 PM
65	Treat all symptomatic pt for uti. Monitor BP when recommending Tylenol. Will recommend to use steroids inhalers when using ventolin.	10/23/2022 12:13 PM
66	I will stop worrying that I don't have babies on meds for GERD. I will treat low ferritins even if the Hgb is normal. Will advise people that most baby formulas are all the same.	10/23/2022 12:02 PM
67	So many! I work with postpartum moms so the trick about squeezing a baby's hand to get them to open their mouth was genius. Better understanding of evidence around weight loss. Better understanding of how fitness can benefit people even if they are overweight.	10/23/2022 11:45 AM
68	Prune juice for constipation and FODMAP really does work Flu shot after MI! Use ozempic over contrave (due to side effects)	10/23/2022 11:38 AM
69	engage in shared decision making for cancer screening become more mindful of cascading prescriptions	10/23/2022 11:34 AM
70	improved communication re: obesity, I found the deprescribing content particularly helpful and	10/23/2022 11:34 AM

2022 PEIP Overall Conference Evaluation

have already downloaded patient handouts, special authorization form management.

71	I will have more confidence describing GERD in healthy growing newborns as a physiologic and not feel so inclined to medicate them! I will work on my approach to weight management and consider meds I may have not considered in the past. I am going to do a search in my EMR and look for more opportunities to de-prescribe. Personally, I am going to stop taking Vit D (once this bottle is done) but I will miss the gummies once a week!	10/23/2022 11:17 AM
72	(1) Be careful prescribing insulin unless there is a clear benefit and not substitute newer longer acting insulins again unless a clear benefit for that patient, (2) focus discussions on weight around health and not label an issue unless the weight is a problem for those patients, esp if BMI 25-29 (3) use a headlight for nasal exams and procedures like cautery!	10/23/2022 10:58 AM
73	metformin can cause B12 deficiency order less SPE and do creatinine and Calcium first B12<200 is deficient	10/23/2022 10:48 AM
74	1. MSK management of Acute on Chronic Rotator Cuff tear: to refer earlier to surgery 2. Re-assess rule 7 5 3 with patient before referring for Tonsillectomy. 3. Use the handout summarizing Iron pills to clarify all the iron pills to patient	10/23/2022 10:46 AM
75	1. Antidepressants = f/u at 2 wks where possible because may actually see some benefit at 1 wk (not 6-8) 2. Otitis Externa = dry and acidify 3. Anemia = TSAT next up after ferritin and unexplained anemia of elderly is a thing (monitor and won't be causing sx > 100)	10/23/2022 10:37 AM
76	-how approach discussions with patients when want to take supplements that really don't do anything - DAPT duration if a patient comes in with a GI bleed -use shared decision making tools more	10/23/2022 9:10 AM
77	Watch for hypomagnesemia and prescribing cascades Go for IV iron sooner if in an inflammatory state Make sure patients do good physio for rotator cuff disease	10/23/2022 9:08 AM
78	how to promote healthy lifestyle vs weight loss emphasize physical exam esp in sports med there is more than A1c in DM control	10/23/2022 8:51 AM
79	better shoulder exam not using growth charts for newborns, GER not GERD encourage HAES	10/23/2022 8:47 AM
80	Paediatric murmur pearl of increasing valsalva manoeuvre, the three drop signs , gabapentin causing edema, the prescribing cascade	10/23/2022 8:44 AM
81	1. managing iron deficiency anemia (some pearls there) 2. don't perform UA in the elderly if looking for uti 3. using antibiotic ointment for recurrent nose bleeds/prevention	10/23/2022 8:42 AM
82	improved ortho exam of shoulder less keen on insulin heightened awareness of drug side-effects and prescribing cascades	10/23/2022 8:20 AM
83	1. Stop recommending Vit D 2. Attempt to de-prescribe meds especially in my older patients 3. Work harder on encouraging flu shot and exercise	10/23/2022 8:14 AM
84	Engage pt in management plan. Focus on non pharmacological treatment.	10/23/2022 8:08 AM
85	The weight loss lectures were super helpful and I will change the convo I have with patients about the drugs.	10/23/2022 7:39 AM
86	deprescribing, management of shoulder issues, management of anemia	10/23/2022 7:26 AM
87	Much more skeptical about drug approval process, focus on what goals we are trying to achieve with treatment, be more confident about not prescribing reflux meds to babies	10/23/2022 6:36 AM
88	1. Watch for cardiologists switching to DAPT for 1mo only post stent. 2. Focus on exercise/fitness more than weight; use softer language talking about weight 3. Monitor bp and review with patient possible SE of increase bp with Acetaminophen	10/23/2022 6:23 AM
89	1. I will reassure moms with babies with colic. 2. Insulins all work so use the cheapest. 3. Don't believe drugs that are approved are fine.	10/23/2022 6:23 AM
90	Deprescribing medications ?shorter dual anti platelet use after stenting (although this depends on cardiologist) Less strict targeting A1C	10/22/2022 11:35 PM
91	I won't feel guilty about not ordering a urine culture. I'll know how to better manage anemia. I'll have a better approach to meth addiction.	10/22/2022 11:31 PM

2022 PEIP Overall Conference Evaluation

92	Discuss current AB mammogram guidelines with pts before ordering. Discuss actual benefit of meds with pts and let them decide if they want to start them. Prescribe less for GER in babies	10/22/2022 10:55 PM
93	treat the patient and not the number ideal weight is the one you reach when living your healthiest awareness of medication cascade and commons symptoms / meds involved	10/22/2022 10:16 PM
94	Des-prescribing more, referring for IV iron more often, questioning Vit D recommendations	10/22/2022 9:43 PM
95	new information supports for patients simpler approach to UTI's improved approach to anemia	10/22/2022 8:54 PM
96	Deprescribing, Stress importance of flu shot after MI, Reassure new parents	10/22/2022 8:54 PM
97	use the mayo clinic score archinlis tendonosis, encourage patient to do strengthening exercises along side PT Anemia work up: pay attention to the lab medicine comments abouts fragments, spherocytes balsts etc.	10/22/2022 8:51 PM
98	Probably none other than an overall awareness of continues skepticism of small short poorly done studies.	10/22/2022 8:16 PM
99	I described 8 x 3 changes in the previous reviews.	10/22/2022 7:41 PM
100	more confidence looking at CBC/managing anemia less rx of peds GERD not test urine for UTI if classic symptoms	10/22/2022 7:17 PM
101	Approach to Weight, Hypertension and Newborns	10/22/2022 6:39 PM
102	Rely more on pt symptoms to treat uti, better shoulder exam and assessment to determine referral and imaging, loved the talk on newborn and child heart murmurs and using Valsalva to examine	10/22/2022 6:09 PM
103	Deprescribe more Bp meds when suits patients Utilize shoulder exam techniques	10/22/2022 6:05 PM
104	I will look into prescribing SGLT-2 more, including in heart failure even when someone isn't diabetic. I will have an easier time talking to parents about some of the things they can get overly concerned about, like an open fontanelle past one year. I will get people off of twice daily Lantus.	10/22/2022 5:50 PM
105	Little.	10/22/2022 5:47 PM
106	Great pt resources for physiotherapy exercises, good review of shoulder exam, Interesting DM review	10/22/2022 5:46 PM
107	1. be cognizant of prescribing cascades. 2 newborn pearls re murmurs, GER (not D). 3. epistaxis - how to manage. hold pressure longer. apply silver nitrate longer.	10/22/2022 5:46 PM
108	Less vitamin d, more IV iron, deprescribing	10/22/2022 5:40 PM
109	less stringent on aic improved shoulder exam have to rethink tylenol	10/22/2022 5:38 PM
110	- Will be more aware of prescribing cascades - reconsider not recommending vitamin D - only consider insulin if other oral antiglycemics are ineffective in T2DM	10/22/2022 5:25 PM
111	Change my discussion with patients around oral iron supplementation (ie no best iron supplement). Share the definition of "Best Weight". Reassure, reassure, reassure, and HUG MOM.	10/22/2022 5:22 PM
112	Approach to special auth medication Explanation re risk/benefit to patients re sglt2 and re semaglutide	10/22/2022 5:20 PM
113	Anemia/iron Utis Rotator cuff less imaging	10/22/2022 5:16 PM
114	UTI MANAGEMENT AND LESS URINE DIPS BETTER SHOULDER EXAM AND LESS ULTRASOUNDS BETTER ANEMIA TREATMENT	10/22/2022 5:09 PM
115	I feel better informed to work with pts to make decisions together	10/22/2022 5:02 PM
116	see the session evaluations	10/22/2022 5:00 PM
117	Continue to use tfp Add alberta web page for physio diagrams Buy Dr.mccormaks book	10/22/2022 4:59 PM
118	Involvement of pharmacists, attention to deprescribing, how to debunk myths, Acetominophen harms,	10/22/2022 4:58 PM

2022 PEIP Overall Conference Evaluation

119	1] Able to present my rationale for Rx to patients better 2] Refer to scientific articles 3] Valuable tips and tools	10/22/2022 4:58 PM
120	Re Shoulder resource for physio Re iron therapy no more IM injections Re weight loss GLP1 inhibitors	10/22/2022 4:39 PM
121	Reduce to singular antiplatelet agent De-prescribing Stop recommending vitamin D supplements to everyone	10/22/2022 4:37 PM
122	More care re: prescribing cascades. I'll be more restrained with new prescriptions. Better knowledge about what is normal and abnormal in neonatal examination and when to refer. Hopefully, I will therefore make less unnecessary referral requests. Better understanding of managing various addictions and enhanced confidence with adjunctive Rx.	10/22/2022 4:34 PM
123	Deprescribe in the elderly Be vigilant on monitoring side effects Compliance more important than timing of medication intake	10/22/2022 4:32 PM
124	Treat uti's without cultures; more use of SLGT2s, less insulin; deprescribing	10/22/2022 4:30 PM
125	Hematology manegement	10/22/2022 4:22 PM
126	1) Become a deprescribing champion (or work toward this). Be aware of the prescribing cascade. More frequent med reviews with this in mind. 2) Be a more involved champion for antimicrobial stewardship re: ASB. 3) Review hematology results with a more focused lens (including the patient's symptoms or lack thereof).	10/22/2022 4:21 PM
127	I filled out the survey monkey and have already ;isted numerous changes, not doing that again here	10/22/2022 4:17 PM
128	I will examine the shoulder better. I will be more confident in supporting mothers of infants Will be less concerned about glucose targets in diabetes	10/22/2022 4:16 PM
129	Stop Vit D Change advice re senokot and flagyl/ETOH	10/22/2022 4:13 PM
130	- look for prescribing cascades - refer to sather arthritis exercise videos - keep trialling ozempic and trying to jump through coverage hoops	10/22/2022 4:06 PM
131	-Look more closely at possible causes of blood loss (that might be less obvious) as reason for anemia, particularly when iron supplementation has been ongoing -reexamine calcium & vit D supplementation (to reduce pill burden and exercise deprescribing principals) - engage patient for their preference based on relative risk -review BP admin times to promote adhearance (and reduce risk for patients with glaucoma!) -catch DAPT that goes longer than one month (and recommend discontinuing ASA while on the DOAC as an option if cardiologist really wants the DOAC)	10/22/2022 4:02 PM
132	Stop doing urinalysis Look at deprescribing meds more often Continue to focus on healthy diet and regular physical activity instead of weight	10/22/2022 4:01 PM
133	1. A1C targets in elderly 2. Slgt2 in HFpEF 3. No vitamin D	10/22/2022 3:59 PM
134	I will counsel my patients with evidence-based information learned on this program; improve treatment and de-prescribe as needed.	10/22/2022 3:56 PM
135	Hard to say as my work is consulting in disability. I'm usually asked for opinion on treatment and these sessions are invaluable in preparing comments on treatment and possibly symptoms causing impairment due to iatrogenic factors.	10/22/2022 3:53 PM
136	Don't forget to review meds when prescribing new ones Acetaminophen can cause high blood pressure Reassuring parents in cases of GE	10/22/2022 3:53 PM
137	-not urine testing if straight forward UTI -not giving in to the pressure to treat infant GER if infant is otherwise thriving -use of deprescribing tools	10/22/2022 3:52 PM
138	uti treatment obesity management	10/22/2022 3:50 PM
139	look at deprescribing more closely, put indication and duration on prescriptions, most effective diet is one that can be adhered to	10/22/2022 3:50 PM
140	Hopefully prescribe and de-prescribe more thoughtfully, consider symptoms to be possible side effects of meds. No longer concerned about using senokot	10/22/2022 3:42 PM

2022 PEIP Overall Conference Evaluation

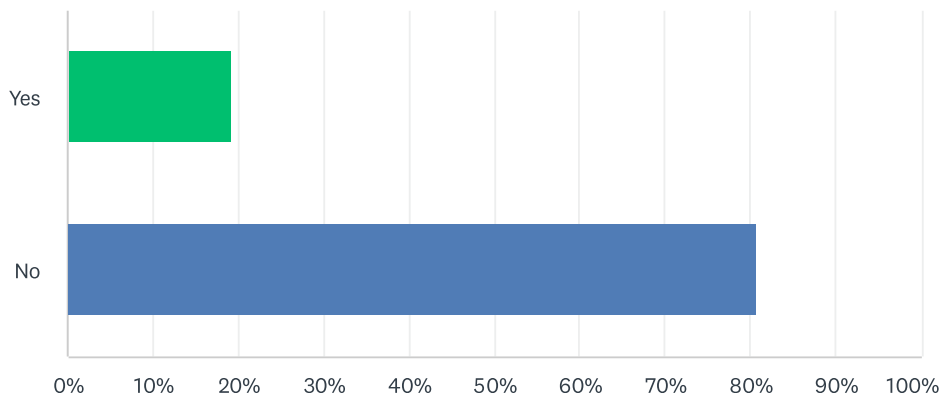
141	UTI treatment, flu shot after MI, SGLT2 for HFpEF	10/22/2022 3:41 PM
142	- engage patients in a discussion about mammograms instead of just following the guidelines starting at age 45. - close attention to deprescribing and seeing if this can happen with most consults - use the antibiogram for Alberta and Calgary	10/22/2022 3:41 PM
143	1. Consider to screen for ATC Tylenol use with pts with HTN 2. Write indication on all prescriptions 3. Trial in front of chest subscapularis testing	10/22/2022 3:41 PM
144	will review my elderly patient meds list, will review my diabetic pts to see who might benefit from GLP1	10/22/2022 3:41 PM
145	I will try to focus less on actual weights with patients I will use the shoulder exam that was presented I will try to deprescribe more	10/22/2022 3:40 PM
146	MSK shoulder exam GER management in children De prescribing meds	10/22/2022 3:40 PM
147	Approach to ENT problems has improved - epistaxis management, OE management, swimmer's ear. I will have a higher radar for medication side effects and deprescribing in my patients with polypharmacy. I will encourage flu shots in patients with CAD as a CV risk reduction measure.	10/22/2022 3:40 PM
148	lots of information to try and develop an in house de prescribing QI	10/22/2022 3:36 PM
149	Vit d Obesity Opioid Addiction	10/22/2022 3:36 PM
150	Dapt Peripheral edema Better way to discuss health risks of being overweight	10/22/2022 3:36 PM
151	This has been covered in the session evaluations. And I think three per session is a bit high. I'll have to reflect in order to answer this.	10/22/2022 3:36 PM
152	continue to balance NNT and NNH pause before you prescribe deprescribe!	10/22/2022 3:35 PM
153	Look again at how we approach deprescribing in the institutional environment as team based approach. Review my processes in assessing lab values for inpatients when dealing with anemia. Change m approach to metronidazole/alcohol interaction.	10/22/2022 3:34 PM
154	Wii prefer in person	10/22/2022 3:27 PM
155	Management of anemia Management of rotator cuff pathology Management of Achilles tendon pathology	10/22/2022 3:27 PM
156	Review meds before prescribing new one Deprescribing cascade Tools for practice- use more often	10/22/2022 3:27 PM
157	better prescribing choices more confidence in not prescribing using different decision aides discussed	10/22/2022 3:26 PM
158	I am not going to worry about waist circumference and feel more comfortable recommending "a diet you can stick to" Will push the flu shot more with my post MI patients Likely will order fewer SPEP's if a patient w anemia has normal calcium and renal function (nice pearl)	10/22/2022 3:26 PM
159	1. I will commit to de-prescribing in patients or at least keeping it in mind for my elderly patients 2. I will not be overly excited about newer therapies since many will not prove to be helpful in the long run 3.I will normalize colic and GER for my infant patients- provide support, but not make them diseases that need medication	10/22/2022 3:25 PM
160	Think about adverse drug reaction causing symptoms Talk about healthy lifestyle, diet and exercise instead of 'weight' Stop taking vitamin D :)	10/22/2022 3:23 PM
161	COUNSELLING PATIENTS, FURTHER READING, NO MORE URINE CULTURES (FOR SSX OF UTI AND CONFUSED PTS)	10/22/2022 3:23 PM
162	More attention to deprescribing practices, improved newborn/infant exam, epistaxis management	10/22/2022 3:23 PM
163	medication cascades and focussing more on deprescribing re-evaluating role of PPI especially longterm helped me fine tune my approach to weight loss with patients will continue to start breast cancer screening at 50yo despite change to guideline in Alberta	10/22/2022 3:21 PM
164	More rational med choices Avoidance of SE and unnecessary meds Improved time alocation for screening and Rx	10/22/2022 3:19 PM

2022 PEIP Overall Conference Evaluation

165	so many ways.	10/22/2022 3:18 PM
166	Info for patients. info for collaborators ,practice around deprecirbing	10/22/2022 3:18 PM
167	Deprescribing, insulin use,	10/22/2022 3:16 PM
168	Only 3?	10/22/2022 3:15 PM
169	See previous surveys	10/22/2022 3:15 PM

Q20 Do you anticipate barriers that might prevent you from making these changes?

Answered: 197 Skipped: 73



ANSWER CHOICES	RESPONSES	
Yes	19.29%	38
No	80.71%	159
TOTAL		197

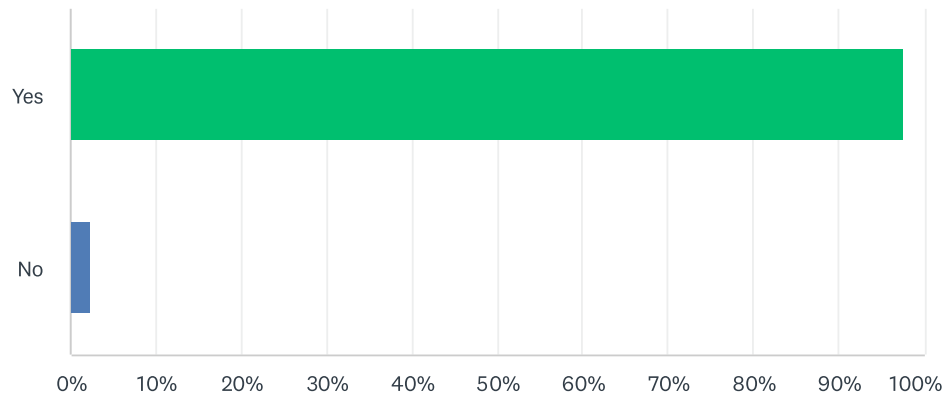
#	IF YES, PLEASE COMMENT.	DATE
1	SUD pts will take several visits.	10/30/2022 9:37 AM
2	time	10/29/2022 11:03 AM
3	Lack of practice sustainability. Economic challenges and trying to find additional doctors dominate our focus right now. Trying to stay in practice is the most important thing right now.	10/28/2022 6:37 PM
4	Long-held/persistent attitudes about screening, working in a power differential (I am currently a resident) with staff/older physicians who do not agree or have other reasons for doing the things they do.	10/28/2022 12:34 PM
5	Time and resources	10/27/2022 6:18 PM
6	I'm a creature of habit. My memory.	10/27/2022 1:21 PM
7	slides missing from some talks.	10/27/2022 10:25 AM
8	time	10/25/2022 4:36 PM
9	physician attitude	10/25/2022 3:17 PM
10	Perhaps some patient push back, but will explain why and offer them option of testing down the road if things do not respond as expected.	10/24/2022 4:20 PM
11	Time..... as always.	10/24/2022 11:37 AM
12	navigaging specialists/colleagues views on bisphosphonate holiday	10/24/2022 10:16 AM
13	Patient satisfaction/expectations....	10/23/2022 7:52 PM
14	time is my biggest barrier	10/23/2022 6:50 PM
15	Please read each speaker evaluation for these comments	10/23/2022 4:12 PM

2022 PEIP Overall Conference Evaluation

16	Physicians and their way of thinking at times and not liking change	10/23/2022 12:23 PM
17	Time/scheduling	10/23/2022 10:37 AM
18	Time and habits	10/23/2022 8:47 AM
19	often in LTC, LPNs send for UA without consulting us, esp if any signs of delirium	10/23/2022 8:42 AM
20	Patient and specialist buy in	10/22/2022 11:35 PM
21	how to retain all this information. it would be helpful to get a 'remember' summary in , say, 3 months time, that has the top 3 learning points from each top in a bullet format.	10/22/2022 5:46 PM
22	Time, pt bias	10/22/2022 5:40 PM
23	Time - many clinics are limiting their practice and we have a hard time accommodating the overflow.	10/22/2022 4:58 PM
24	Drug coverage/special authorization	10/22/2022 4:30 PM
25	Challenges finding indications for meds when not documented. Collaborative obstacles with colleagues - lack of buy in from them. Time.	10/22/2022 4:21 PM
26	Time	10/22/2022 4:06 PM
27	Push back from specialists (e.g. cardiologists)who are the "experts" and resistance from patients who are convinced about their therapy (or lack of therapy) - but I now have some valuable new skills & ideas to tackle the misinformation ;)	10/22/2022 4:02 PM
28	patient expectations	10/22/2022 3:52 PM
29	specisalists	10/22/2022 3:50 PM
30	always time and pressing concerns	10/22/2022 3:41 PM
31	Mainly re deprescribing - it takes time in a day, the patients that this applies to are complex, and I sometimes don't have the space to accommodate a long appointment	10/22/2022 3:40 PM
32	time available in patient encounters	10/22/2022 3:26 PM
33	I have to remember them	10/22/2022 3:26 PM
34	Old habits die hard, but I'm trying to follow evidence-based therapies as much as possible	10/22/2022 3:25 PM
35	my memory and time.	10/22/2022 3:18 PM

Q21 Do you plan to attend PEIP next year?

Answered: 205 Skipped: 65

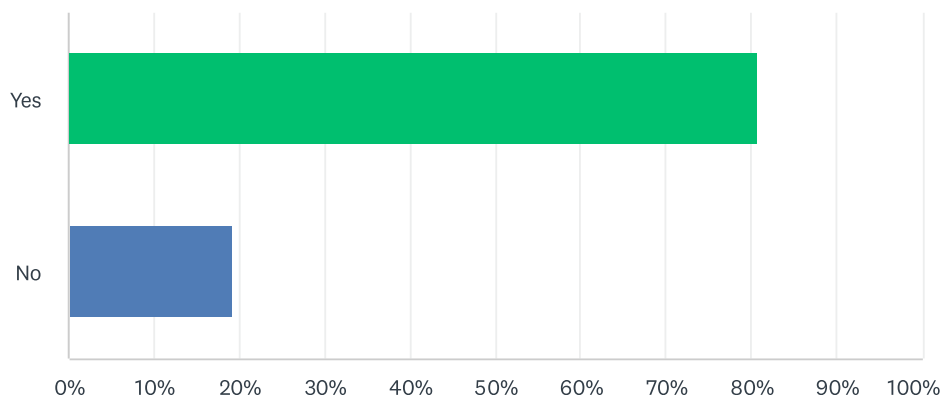


ANSWER CHOICES	RESPONSES	
Yes	97.56%	200
No	2.44%	5
TOTAL		205

#	IF NO, PLEASE COMMENT.	DATE
1	possibly. depends upon topics, time and cost.	10/30/2022 9:37 AM
2	I may be travelling as I plan to be retired	10/27/2022 11:35 AM
3	I have attended many and find not enough new.	10/23/2022 10:48 AM
4	It did not fulfill my learning expectations	10/22/2022 9:43 PM
5	Retiring	10/22/2022 6:34 PM
6	I don't know	10/22/2022 4:26 PM
7	Retiring	10/22/2022 3:23 PM

Q22 If you attended as part of a clinic, would you consider participating as part of a group again?

Answered: 89 Skipped: 181



ANSWER CHOICES	RESPONSES	
Yes	80.90%	72
No	19.10%	17
TOTAL		89

#	IF NO, PLEASE COMMENT.	DATE
1	n/a	10/30/2022 9:03 PM
2	N/A	10/30/2022 9:37 AM
3	I work by myself. Not in a group practice.	10/28/2022 6:34 AM
4	Some have to work. There is work to do and it is getting worse	10/27/2022 3:53 PM
5	n/a	10/27/2022 10:48 AM
6	will like to next time	10/24/2022 6:32 PM
7	only if tech glitches can be worked out	10/24/2022 5:38 PM
8	n/a	10/24/2022 9:25 AM
9	not applicable	10/23/2022 4:12 PM
10	Last year we attended as a group but I find it hard to motivate my colleagues. They all like to go to St. Paul's and we are often not on the same page.	10/23/2022 11:17 AM
11	work in a solo practice	10/23/2022 8:14 AM
12	Did not attend as part of a clinic	10/23/2022 8:03 AM
13	N/A	10/22/2022 8:13 PM
14	We cannot all be present. Some have to work.	10/22/2022 4:58 PM
15	Not applicable	10/22/2022 4:39 PM
16	I am an independent consultant not in clinical practice. Was very involved with CFPC, taught many residents out of U of T	10/22/2022 3:53 PM

2022 PEIP Overall Conference Evaluation

17	na	10/22/2022 3:50 PM
18	I LIKE WATCHING ALONE AT HOME, LESS DISTRACTION	10/22/2022 3:23 PM

Q23 What topics would you like to see in next year's program?

Answered: 112 Skipped: 158

#	RESPONSES	DATE
1	HTN, Asthma/COPD, osteoporosis, new relevant studies	10/30/2022 9:03 PM
2	topics were relevant, I would leave it up to the committee.	10/30/2022 9:37 AM
3	Anyone daring enough to speak to how family practitioners can survive as small business owners? How do we encourage the upcoming generation to actually take on a panel of patients?	10/28/2022 6:37 PM
4	1- Mental health. Suicide prevention!!! Help monitoring of therapy when no psychiatrist is helping our patients. How to switch antidepressants. 2- Significant/most common Drug interactions management. 3- Medication awareness in the elderly (>80 yr old). 4- Dermatology-common skin condition management. 5- lipomas 6 Management of important medications around surgery. 7- Crohn's and ulcerative colitis. 8- Generics-what we need to know.	10/28/2022 6:18 PM
5	Antidepressant/antipsychotics in elderly. Chronic urticaria. Review of the studies that show masks have either some or no effect.	10/28/2022 6:10 PM
6	Vaccines: the evidence and how to explain it simply More harm reduction info ADHD diagnosis and medication management in primary care	10/28/2022 12:34 PM
7	Osteoporosis	10/28/2022 6:34 AM
8	vaccines / covid/ shingles/ flu shots ec auto-immune disorders food intolerance/ gut health/ IBS - all types etc	10/27/2022 7:38 PM
9	Maybe more soft psychiatry such as sexual counselling	10/27/2022 3:53 PM
10	any new information	10/27/2022 1:37 PM
11	Fatty liver update.	10/27/2022 1:21 PM
12	ADHD in adults	10/27/2022 10:48 AM
13	I really enjoyed the MSK topics. More of those would be helpful with management tips. How to manage common fractures in the office.	10/27/2022 10:28 AM
14	Warfarin management HTN ADHD	10/27/2022 8:55 AM
15	New, true, and poo	10/26/2022 3:22 PM
16	Some suggestions for future conferences: assessment of back pain and knee pain. General review of human virus classification and characteristics(but no need to go into COVID into great detail unless there is something incredibly new that is relevant !!!!!)	10/26/2022 12:09 AM
17	Rhinitis IBS	10/25/2022 4:55 PM
18	Quick hitting what's new/poo is always great.	10/25/2022 4:46 PM
19	Are there any studies showing the effectiveness of NPs working as full scope PCPs?	10/25/2022 4:36 PM
20	More practical workflow suggestions for common office topics.	10/25/2022 3:04 PM
21	answered on the first attempt at completing this	10/24/2022 7:51 PM
22	more of same re busting myths and changing practice	10/24/2022 5:38 PM
23	1) I really would like to see a continuation of addressing the Myths of Family Practice - this session was really eye opening and high yield! 2) Review of evidence on psilocybin, MDMA, etc for various conditions (I feel like this is the new cannabis cure-all that patients are asking more and more about!). 3) Fatty Liver... what is the evidence on screening and management of these patients (becoming quite common in my practice)	10/24/2022 4:20 PM

2022 PEIP Overall Conference Evaluation

24	continued diabetes reviews - always helpful Continued deprescribing	10/24/2022 11:37 AM
25	buprenorphine-naloxone: 1) alternative initiation options, 2) use for pain management cannabinoids - update on CBD high ratio products/evidence anxiety management evidence learnings from covid	10/24/2022 10:16 AM
26	more of the same. All topics were very relevant to family practice	10/24/2022 9:25 AM
27	These topics were great with updates on the evidence.	10/24/2022 9:15 AM
28	Topics on dizziness, chronic pain, obstetrics topics	10/24/2022 7:05 AM
29	Breastfeeding,	10/24/2022 1:09 AM
30	sleep meds review of evidence	10/23/2022 11:16 PM
31	Management of fatigue	10/23/2022 10:37 PM
32	Dermatology, long covid?, ?after effects of the pandemic including on family physicians	10/23/2022 10:18 PM
33	1) What to do about all those eGFR < 60 2) What to do about all those persistently low WBC 3) Do we call all those with an A1c >5.5 and < 5.9 with their "at risk for diabetes"?	10/23/2022 8:58 PM
34	Utility of IgE testing in allergies such as Penicillin/How to address patients with penicillin "allergies" from years ago with non specific history of 'rash'/risk of anaphylactic - can you give them a penicillin rx as an outpatient or does it need to be supervised ingestion/monitoring? - It sounds like Vitamin D doesn't make a difference to osteoporosis, so does Calcium make a difference?	10/23/2022 7:51 PM
35	More psychiatry topics	10/23/2022 5:42 PM
36	mental health	10/23/2022 4:47 PM
37	Management of long covid Advice on return to play or work post covid How to work up vague GI complaints that you suspect are IBS or post covid and how to convince and manage the patient	10/23/2022 4:12 PM
38	.	10/23/2022 4:09 PM
39	More MSK - this year's topics and speaker were excellent. Next year do another MSK session but on a different issue (other tendonopathy - wrist, elbow etc). review of new guidelines coming out (lipids, osteoporosis). Another cardiology session - what to do with ECG findings, when to refer for which test (EST vs mibi, etc).	10/23/2022 2:20 PM
40	breast lumps and bumps	10/23/2022 1:46 PM
41	More ear stuff!	10/23/2022 1:42 PM
42	STI treatment. Treating transgender patients, best practice. Pregnancy in transgender patients. Treating young patients who are seeking the opposite gender.	10/23/2022 12:13 PM
43	As session on diagnoses and surveillance of non-alcoholic liver disease would be useful.	10/23/2022 12:02 PM
44	A review of updated pregnancy guidelines- maybe focus on genetic screening options More evidence based paediatric updates Some neurology talks- radiculopathy, dizziness, weakness workups	10/23/2022 11:38 AM
45	Tongue Tie - that wasn't covered this year but comes up ALL the time. More on effective strategies for shared decision making. Cost cutting strategies we could be using to help our patients - what pills can be split, what doses can be reduced, what the cheapest options are for common issues. When is treating to target NOT needed in primary care and how do we have those conversations - with patients, with learners and with our specialist colleagues. Palliative care talk.	10/23/2022 11:17 AM
46	osteoporosis	10/23/2022 10:48 AM
47	The evidence for routine "annual labs" by age, such as CBC , for otherwise asymptomatic healthy patient.	10/23/2022 10:46 AM
48	ENT again, ADHD (especially adult dx of ADHD and the meds and the special authority/cost of meds)	10/23/2022 10:37 AM

2022 PEIP Overall Conference Evaluation

49	-any new cardiac trials as always new practice changing ones -evidence for duration of antimicrobial in common outpatient and inpatient infections (CAP outpt/hospitalized, HAP, cellulitis, UTI, etc) - common to see longer duration than required OR any type of infectious disease topic -evidence for indications of low dose ASA (many patients on without indication)	10/23/2022 9:10 AM
50	A short snapper on hypomagnesemia and magnesium supplements would be useful. I am not sure of cost/availability in Canada.	10/23/2022 9:08 AM
51	cream vs lotion vs salb vs gel (when to use what) acne treatment	10/23/2022 8:47 AM
52	1. low testosterone treatment/update 2. lower urinary tract symptoms/dx/mgmt 3. sports medicine hip symptoms/impingement, etc..	10/23/2022 8:42 AM
53	alcohol addiction and management review of evidence insomnia	10/23/2022 8:14 AM
54	Management of comorbidity with healthy diet.	10/23/2022 8:08 AM
55	Bring back the MSK Guy - he should come every year and do new subjects! I work in Ortho and everything he taught was absolutely accurate and what I wish more family docs knew!!	10/23/2022 7:39 AM
56	Fibromyalgia Use of Marijuana for medical purposes Geriatrics	10/23/2022 6:59 AM
57	Vaccines are pushed for everything now and kids get vaccines double what use to be given. What is actually working and needed???	10/23/2022 6:23 AM
58	More sports medicine topics. I loved the demonstration of the shoulder exam! Topics on Cbt or Dbt and/or motivational interviewing. Continue to talk about Opioid Use disorder and new treatments. Alcohol use disorder treatment	10/22/2022 11:31 PM
59	Resistant hypertension - how to treat When to refer pts for cardiac stress tests Holter monitors - what is abnormal and normal Prenatal care- evidence for ASA during pregnancy and who should get it, does it work. Progesterone for preventing preterm labor- what is the evidence.	10/22/2022 10:55 PM
60	review routine prenatal care adhd	10/22/2022 10:16 PM
61	HIV and primary care	10/22/2022 9:43 PM
62	more geriatric topics	10/22/2022 8:51 PM
63	mental health	10/22/2022 8:16 PM
64	Cbt ibs pregnancy related topics	10/22/2022 7:41 PM
65	Psychosis with marijuana use in teens. Anxiety in children, assessment and management and resources.	10/22/2022 7:41 PM
66	fatty liver - monitoring of LFT , value of liver elastography	10/22/2022 7:17 PM
67	Info on small intestinal bacterial overgrowth, IBS, there should always be an MSK talk on different body parts. I loved the focus on just 2 areas. There should be two new areas of focus yearly.	10/22/2022 6:09 PM
68	ADHD - medication and behavioural treatment. "doc, my legs are swelling!" approach to (bilateral more than unilateral) edema. more ENT: chronic 'sinusitis' / congestion.	10/22/2022 5:46 PM
69	Osteoporosis guidelines	10/22/2022 5:40 PM
70	osteoporosis if they come out with guidelines	10/22/2022 5:38 PM
71	I was happy to see some evidence related to seniors and frail elderly. For someone who does primarily nursing home work, I would love to see more of this at future conferences.	10/22/2022 5:26 PM
72	Practical guidelines of treating HTN in the elderly	10/22/2022 5:25 PM
73	Electrolyte lab findings in community i.e. hyponatremia, hypercalcemia. Endometriosis in family medicine setting. TIAs.	10/22/2022 5:22 PM
74	Depression/anxiety Another MSK one - ? knee	10/22/2022 5:09 PM
75	More updates	10/22/2022 4:59 PM
76	Obstetrics and gynaecology Neurology eg migraines	10/22/2022 4:58 PM

2022 PEIP Overall Conference Evaluation

77	Mental health issues	10/22/2022 4:58 PM
78	More of elderly medicine	10/22/2022 4:39 PM
79	Rural family medicine Rural obstetrics	10/22/2022 4:37 PM
80	More MSK More CBT	10/22/2022 4:32 PM
81	Lipid guideline update - was teased that was being worked on; same with HTN	10/22/2022 4:30 PM
82	dementia/geriatrics; substance use disorders	10/22/2022 4:26 PM
83	Neurology and gastro more	10/22/2022 4:22 PM
84	updates (only if there are any) on these topics: appropriate use of antipsychotics complicated UTI very elderly depression and suicidal ideation in teens eating disorders any new studies that will change what we do today	10/22/2022 4:21 PM
85	use of acupuncture in MSK and other areas of medical care. Most papers are in mandarin - not english this is a barrier - no lack of research	10/22/2022 4:17 PM
86	Antidepressants Trazodone value/harms for insomnia Treat to target or just treat?	10/22/2022 4:16 PM
87	Osteoporosis Constipation OA	10/22/2022 4:13 PM
88	Keep doing what you are doing! Love it every year!	10/22/2022 4:06 PM
89	- new guidelines	10/22/2022 3:59 PM
90	hypertension treatment in seniors - risk vs benefit. Standards for evaluating BP. Update on chronic pain - roles of activity, CBT and medication benefit/risk.	10/22/2022 3:53 PM
91	ADHD adults Dementia with BPSD	10/22/2022 3:53 PM
92	ADHD - in moving from Northern BC to Calgary I have noted a concerning trend - ADHD meds. appear to be an epidemic in Calgary. There is expectation from adult patients and from parents of youth to prescribe these medications. I see adult women on antidepressants and ADHD medication reporting that their psychiatrist has now diagnosed them with ADHD. I am concerned.	10/22/2022 3:52 PM
93	as usual	10/22/2022 3:50 PM
94	look at what is most relevant given constant change, changes in COVID-19 management (prolonged COVID-19 and vaccine uptake)	10/22/2022 3:50 PM
95	Allergy treatment, blood pressure medication choices	10/22/2022 3:41 PM
96	ophthalm! and common eye diseases term - common rashes and treatment (and when to refer) - also hair loss something on lower back pain	10/22/2022 3:41 PM
97	1. Another hematology talk I loved the speaker 2. Another MSK talk-maybe talk on SI pain or hip pain 3. More on deprescribing	10/22/2022 3:41 PM
98	motivational interviewing, ADD (uptick in adult pts presenting), MJ (any update on what it actually helps with?)	10/22/2022 3:41 PM
99	Any as long as there is some new aspect of it.	10/22/2022 3:40 PM
100	More MSK injury management and management of anxiety and pandemic related increase in stress	10/22/2022 3:40 PM
101	Dr. Dabbs to talk about breast cancer screening, higher risk patients, especially understanding the impact of breast density, talk about densebreasts.ca (which recommends disregarding the Task Force Guidelines), proper use of breast cancer risk calculators and which one to use in determining need for high risk screening Review of prostate screening - anything new, use of MRI Asthma treatment review - so many new inhalers, when should we be checking eosinophils, how often should we do spirometry, also how do we remove the diagnosis from a patient who was not appropriately diagnosed in the past Lab tests - BNP - appropriate use, use pre-operatively; CRP - when is it useful and when is it not; PTH post-bariatric - what does it mean and when do we need to do something about higher results (with normal Ca); what tests should we generally stop doing so much?	10/22/2022 3:40 PM

2022 PEIP Overall Conference Evaluation

102	cannabis and or mushrooms	10/22/2022 3:36 PM
103	More gi	10/22/2022 3:36 PM
104	Sex - Dr. Stephanie Hart would be a great presenter Menopause - Dr. Nathalie Gamache would be a great presenter How to be a media personality - Dr. Shazma Mithani/Dr. Lynora Saxinger Long COVID - Dr. Neeja Bakshi	10/22/2022 3:36 PM
105	Any new family medicine updates	10/22/2022 3:27 PM
106	Knee exams: sprains and injuries by Dr. Adam(Sports Med)	10/22/2022 3:27 PM
107	evidence for adult ADHD and treatment, how to manage osteoporosis after 5 years, more myths debunked.	10/22/2022 3:26 PM
108	WHAT IS UP WITH THE NEW FERRITIN TEST FROM DYNALIFE; SUDDENLY ALL MY PATIENTS HAVE LOW FERRITIN	10/22/2022 3:23 PM
109	utility of MSK US, indications for vertebroplasty, long Covid (what is it and does anything actually help)	10/22/2022 3:23 PM
110	desprescribing antidepressants evidence for IBS management	10/22/2022 3:21 PM
111	Vinay prasad Pat Pierse	10/22/2022 3:20 PM
112	Fertility , geriatrics, COPD	10/22/2022 3:18 PM

Q24 Please feel free to provide additional comments.

Answered: 49 Skipped: 221

#	RESPONSES	DATE
1	1. have slides available for the conference. 2. have recordings available within 2 days post conference. 3. reduce cost for conference, esp if single MD, not part of a group. 4. consider having the conference all in one day.	10/30/2022 9:37 AM
2	Excellent!	10/28/2022 6:18 PM
3	Having access to recordings in a more timely manner would so improve the quality of PEIP.	10/28/2022 6:10 PM
4	Best conference I've ever been to. I'll be telling all my friends. :) Do you need a PEIP ambassador? I will be your PEIP ambassador. Everyone needs to attend PEIP. PEIP is the GOAT.	10/28/2022 12:34 PM
5	n/a	10/28/2022 6:34 AM
6	excellent program this year thank you so much	10/27/2022 7:38 PM
7	Organizer and presenters may feel satisfied	10/27/2022 3:53 PM
8	Excellent conference once again. Thank you!	10/27/2022 1:21 PM
9	Thanks again!	10/25/2022 4:46 PM
10	Good info as usual. Thanks!	10/25/2022 4:36 PM
11	RE tech: Sessions on day 2 were hard to find How were we supposed to know to press the filter button?? Not very intuitive	10/24/2022 5:38 PM
12	This conference is amazing... my only complaint is that it falls on the same weekend as Current Obstetrical Management Seminar which is a local AB conference geared towards GP-OB providers and I hate having to pick between them every year (although I usually choose PEIP!). Would be great if they weren't on the same weekend...	10/24/2022 4:20 PM
13	I did not understand where the handouts were and also I needed to E. Mail to inquire about getting my certificate of attendance.	10/24/2022 2:47 PM
14	might like 1 good case study option embedded in the program, ideally with a bit of breakout discussion, then panel summary/debrief. have case address 3 main themes/areas covered in the conference and show application of values (evidence, simplified, shared decision, value) to the case	10/24/2022 10:16 AM
15	A wider variety of topics would be helpful	10/23/2022 10:18 PM
16	Great conference! Thanks!	10/23/2022 7:51 PM
17	I truly appreciate the webcast option. There are several other conferences I would have liked to attend but could not due to lack of virtual option. I also really liked your new platform. People might not have known, but there was an accessibility button at the top right which could change your display to be ADHD friendly or better for visually impaired. This would have been good to cover in your 3 minute how-to video.	10/23/2022 4:12 PM
18	.	10/23/2022 4:09 PM
19	I found this year's PEIP conference to be very informative with amazing speakers. Keep up the great work!	10/23/2022 4:03 PM
20	great job!	10/23/2022 11:34 AM
21	Thanks for all the work you team dose - great to have this opportunity to learn from colleagues.	10/23/2022 11:17 AM
22	As noted in a different section, if webcast could be available shortly after recording that would be great, as opposed to having to wait weeks. Lots of us watching the webcast probably had to	10/23/2022 9:08 AM

2022 PEIP Overall Conference Evaluation

miss a bit and it would be nice if we could watch it later the same weekend. I don't think we'd mind if it's edited or not. I organized a large group (20+) of clinic webcast participants. Please continue to have this option.

23	Lovely conference	10/23/2022 8:47 AM
24	It is the most helpful and enjoyable conference I attended!	10/23/2022 8:14 AM
25	Any new menopausal hormone therapy info? Testosterone in females? Please make this a subject!	10/23/2022 7:39 AM
26	When you put the program to full screen so you can see better, it is a hassle to leave that screen, then click engage and then submit the answer and then go back to the large screen. With technology, that should be fixed.	10/23/2022 6:23 AM
27	Great conference! I really enjoyed it.	10/22/2022 11:31 PM
28	Great conference as always!	10/22/2022 10:55 PM
29	This is the best conference for family physicians. The learning is fun, topics relevant, and I feel like I'm a better family physician after attending. Thanks again and see you next year!	10/22/2022 10:16 PM
30	just to say thanks, you are appreciated.	10/22/2022 8:16 PM
31	This is a great conference. One of the best I've been to! Interesting topics, engaging speakers and humour. Awesome!	10/22/2022 7:41 PM
32	Also section on de prescribing is always good but I feel like I have seen a lot of it now.	10/22/2022 6:09 PM
33	I LOVE this conference. Best "bang for your buck" - succinct, relevant, funny!	10/22/2022 5:22 PM
34	Please see if it is possible to streamline the online access. Even modest written instruction would have been a world of help.	10/22/2022 5:00 PM
35	Excellent and hard working group of organizers and presenters	10/22/2022 4:58 PM
36	Nil Applicable	10/22/2022 4:39 PM
37	Please keep it hybrid model (virtual/in person) to enable out of towners / out of province.	10/22/2022 4:21 PM
38	The evaluation forms are long- I really don't want to spend an hour after the conference is ver on completing each survey monkey questionnaire	10/22/2022 4:17 PM
39	Your work is invaluable, practical ,and trustworthy	10/22/2022 3:53 PM
40	Thank you; this was well worth attending. Thanks for all your hard work and thought.	10/22/2022 3:52 PM
41	great programme, enjoyed this one the most and it just flew by! really appreciate the hybrid approach	10/22/2022 3:50 PM
42	Amazing effort and really enjoyed the conference! Speakers were mostly enthusiastic about their topics and a great atmosphere was created and could be felt even through a screen! very short and concise topics. will definitely attend again next year!	10/22/2022 3:41 PM
43	Loved it, thank you!	10/22/2022 3:41 PM
44	Thank you for the excellent conference as usual. For the virtual questions, the character number allowed was a bit restrictive.	10/22/2022 3:40 PM
45	Great conference	10/22/2022 3:36 PM
46	Great speakers, relevant and practical information	10/22/2022 3:27 PM
47	LOVED THIS CONFERENCE; MOST FUN PART WAS FOLLOWING ALONG WITH THE SHOULDER EXAM SPEAKER WITH MY SHIRT OFF, AS INSTRUCTED.... :)	10/22/2022 3:23 PM
48	maybe consider changing the music playing during break time, some of those lyrics were pretty trashy even if there was not swearing	10/22/2022 3:21 PM
49	Great as always	10/22/2022 3:15 PM

Q25 What is your profession?

Answered: 251 Skipped: 19

#	RESPONSES	DATE
1	Pharmacist	10/31/2022 12:19 PM
2	family physician	10/30/2022 9:03 PM
3	md	10/30/2022 8:32 PM
4	Family physician	10/30/2022 10:35 AM
5	physician	10/30/2022 9:37 AM
6	NP	10/29/2022 11:03 AM
7	Family physician	10/28/2022 6:38 PM
8	Pharmacist	10/28/2022 6:19 PM
9	Pharmacist	10/28/2022 6:10 PM
10	Family Med Resident	10/28/2022 12:34 PM
11	MD - family medicine	10/28/2022 11:49 AM
12	Family medicine	10/28/2022 9:50 AM
13	Family Physician	10/28/2022 6:35 AM
14	Family physician	10/27/2022 9:35 PM
15	Family Physician	10/27/2022 7:39 PM
16	Family Medicine	10/27/2022 7:27 PM
17	Family doctor	10/27/2022 6:18 PM
18	Pharmacist	10/27/2022 5:22 PM
19	FP	10/27/2022 3:53 PM
20	Physician Assistant	10/27/2022 2:42 PM
21	MD	10/27/2022 1:37 PM
22	Family physician.	10/27/2022 1:21 PM
23	Family Medicine	10/27/2022 12:05 PM
24	general practice	10/27/2022 11:35 AM
25	Family Doctor	10/27/2022 10:53 AM
26	Family Physician	10/27/2022 10:49 AM
27	MD	10/27/2022 10:48 AM
28	Family physician	10/27/2022 10:48 AM
29	Pharmacist	10/27/2022 10:43 AM
30	Family physician	10/27/2022 10:31 AM
31	Family Physician	10/27/2022 10:29 AM
32	pharmacist	10/27/2022 10:25 AM
33	Pharmacist	10/27/2022 8:55 AM

2022 PEIP Overall Conference Evaluation

34	nurse practitioner	10/26/2022 6:08 PM
35	Family physician	10/26/2022 3:22 PM
36	Pharmacist	10/26/2022 11:50 AM
37	family doctor	10/26/2022 6:12 AM
38	Nurse Practitioner	10/26/2022 12:09 AM
39	MD	10/25/2022 8:42 PM
40	Family doctor	10/25/2022 4:58 PM
41	Physician	10/25/2022 4:55 PM
42	Family Medicine	10/25/2022 4:47 PM
43	Family Physician	10/25/2022 4:37 PM
44	Pharmacist	10/25/2022 3:17 PM
45	Family medicine	10/25/2022 3:04 PM
46	Pharmacist	10/25/2022 11:40 AM
47	Family Physician	10/24/2022 8:06 PM
48	Family Physician	10/24/2022 7:51 PM
49	family physician	10/24/2022 6:33 PM
50	Family Physician	10/24/2022 6:32 PM
51	RN	10/24/2022 6:03 PM
52	md	10/24/2022 5:38 PM
53	Family Medicine	10/24/2022 4:20 PM
54	Resident Family Medicine	10/24/2022 3:55 PM
55	GP	10/24/2022 3:41 PM
56	Physician	10/24/2022 2:47 PM
57	Family Physician	10/24/2022 1:00 PM
58	Family Practice	10/24/2022 12:53 PM
59	Family physician	10/24/2022 12:00 PM
60	pharmacist	10/24/2022 11:37 AM
61	Family physician	10/24/2022 11:21 AM
62	Registered nurse in primary care	10/24/2022 11:00 AM
63	pharmacist	10/24/2022 10:17 AM
64	pharmacist	10/24/2022 10:03 AM
65	MD	10/24/2022 9:42 AM
66	Pharmacist	10/24/2022 9:25 AM
67	Pharmacist	10/24/2022 9:15 AM
68	Family Medicine	10/24/2022 9:11 AM
69	Pharmacist	10/24/2022 8:32 AM
70	Pharmacist	10/24/2022 8:28 AM
71	family doctor	10/24/2022 8:26 AM

2022 PEIP Overall Conference Evaluation

72	pharmacist	10/24/2022 8:17 AM
73	Family physician	10/24/2022 7:56 AM
74	Family physician	10/24/2022 7:55 AM
75	Family Medicine Resident	10/24/2022 7:05 AM
76	Family Physician	10/24/2022 6:33 AM
77	Family Physocian	10/24/2022 1:10 AM
78	fam dr	10/23/2022 11:45 PM
79	physician	10/23/2022 11:17 PM
80	FAMILY physician	10/23/2022 10:38 PM
81	Family physician	10/23/2022 10:18 PM
82	Family Physician	10/23/2022 9:29 PM
83	Family physician	10/23/2022 8:58 PM
84	Physician - Rural Family Medicine	10/23/2022 7:53 PM
85	Rural Family Physician	10/23/2022 7:51 PM
86	md	10/23/2022 6:52 PM
87	Physician	10/23/2022 6:50 PM
88	Family physician	10/23/2022 5:42 PM
89	Ccfp	10/23/2022 5:36 PM
90	FP	10/23/2022 4:47 PM
91	Family physician	10/23/2022 4:13 PM
92	Family doctor	10/23/2022 4:12 PM
93	MD	10/23/2022 4:09 PM
94	Registered Nurse	10/23/2022 4:03 PM
95	MD	10/23/2022 2:45 PM
96	Nurse Practitioner	10/23/2022 2:39 PM
97	Family physician	10/23/2022 2:21 PM
98	MD	10/23/2022 1:46 PM
99	resident family doc	10/23/2022 1:42 PM
100	Family Physician	10/23/2022 1:31 PM
101	Nurse	10/23/2022 12:24 PM
102	GP	10/23/2022 12:14 PM
103	GP	10/23/2022 12:02 PM
104	Family Physician	10/23/2022 11:45 AM
105	family physician	10/23/2022 11:38 AM
106	Family Medicine Physician	10/23/2022 11:35 AM
107	MD	10/23/2022 11:34 AM
108	FP	10/23/2022 11:17 AM
109	family Physician	10/23/2022 11:15 AM

2022 PEIP Overall Conference Evaluation

110	Family physician	10/23/2022 10:58 AM
111	Family medicine	10/23/2022 10:56 AM
112	family medicine COE	10/23/2022 10:48 AM
113	MD	10/23/2022 10:46 AM
114	Family Doctor	10/23/2022 10:37 AM
115	Pharmacist	10/23/2022 9:11 AM
116	Family Physician	10/23/2022 9:08 AM
117	MD	10/23/2022 8:52 AM
118	Family doctor	10/23/2022 8:47 AM
119	Family physician	10/23/2022 8:45 AM
120	md	10/23/2022 8:42 AM
121	Pharmacist	10/23/2022 8:34 AM
122	Family Physician	10/23/2022 8:31 AM
123	Family Physician	10/23/2022 8:21 AM
124	Family Medicine	10/23/2022 8:15 AM
125	Family Physician	10/23/2022 8:08 AM
126	Family Physician	10/23/2022 8:06 AM
127	Family/ER physician	10/23/2022 8:04 AM
128	Family medicine	10/23/2022 7:39 AM
129	family doctor	10/23/2022 7:26 AM
130	MD	10/23/2022 6:59 AM
131	Family physician	10/23/2022 6:37 AM
132	Physician	10/23/2022 6:24 AM
133	MD - family Med/sport med	10/23/2022 6:23 AM
134	Family physician	10/23/2022 6:10 AM
135	Family physician	10/23/2022 4:58 AM
136	Family doctor	10/22/2022 11:36 PM
137	Family Doctor	10/22/2022 11:32 PM
138	Physician	10/22/2022 10:55 PM
139	Family Physician	10/22/2022 10:17 PM
140	Family physician	10/22/2022 9:43 PM
141	Family physician	10/22/2022 9:27 PM
142	MD	10/22/2022 9:08 PM
143	Pharmacist	10/22/2022 8:55 PM
144	general practitioner	10/22/2022 8:54 PM
145	MD	10/22/2022 8:54 PM
146	physician	10/22/2022 8:52 PM
147	family physician	10/22/2022 8:16 PM

2022 PEIP Overall Conference Evaluation

148	Family Physician	10/22/2022 8:14 PM
149	RN	10/22/2022 7:42 PM
150	Family physician	10/22/2022 7:41 PM
151	Family Physician	10/22/2022 7:31 PM
152	family MD	10/22/2022 7:17 PM
153	Family physician	10/22/2022 7:09 PM
154	Family Doctor	10/22/2022 6:46 PM
155	Family Physician	10/22/2022 6:39 PM
156	Family physician	10/22/2022 6:34 PM
157	Family physician	10/22/2022 6:10 PM
158	Family physician	10/22/2022 6:07 PM
159	Gp	10/22/2022 6:05 PM
160	Physician	10/22/2022 6:04 PM
161	Family doctor	10/22/2022 6:04 PM
162	Physician	10/22/2022 5:50 PM
163	Family Physician	10/22/2022 5:48 PM
164	Family Physician	10/22/2022 5:47 PM
165	Physician	10/22/2022 5:46 PM
166	FP	10/22/2022 5:46 PM
167	MD	10/22/2022 5:40 PM
168	fam doc	10/22/2022 5:38 PM
169	GP	10/22/2022 5:26 PM
170	Family Physician	10/22/2022 5:26 PM
171	Family physician	10/22/2022 5:26 PM
172	Family Doctor	10/22/2022 5:23 PM
173	Pharmacist	10/22/2022 5:20 PM
174	Fam doc	10/22/2022 5:16 PM
175	FP	10/22/2022 5:14 PM
176	Family medicine /Hospitalist	10/22/2022 5:12 PM
177	Family dr	10/22/2022 5:09 PM
178	MD	10/22/2022 5:05 PM
179	Family Doctor	10/22/2022 5:03 PM
180	Family Medicine/Hospitalist	10/22/2022 5:00 PM
181	Physician	10/22/2022 5:00 PM
182	FP	10/22/2022 5:00 PM
183	Family MD	10/22/2022 4:59 PM
184	FP	10/22/2022 4:58 PM
185	Family Physician	10/22/2022 4:46 PM

2022 PEIP Overall Conference Evaluation

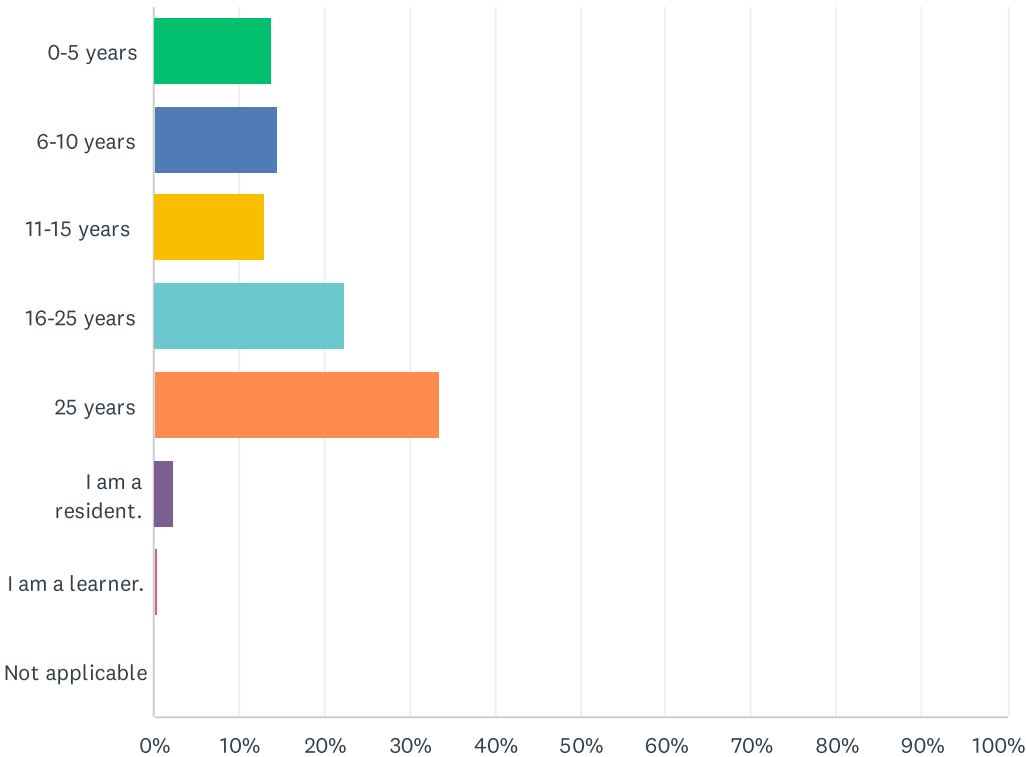
186	Family Physician	10/22/2022 4:40 PM
187	Nurse Practitioner Student	10/22/2022 4:37 PM
188	family physician	10/22/2022 4:34 PM
189	Medical Doctor	10/22/2022 4:33 PM
190	Rural Family Physician	10/22/2022 4:31 PM
191	gp	10/22/2022 4:28 PM
192	MD	10/22/2022 4:28 PM
193	MD	10/22/2022 4:27 PM
194	family physician	10/22/2022 4:26 PM
195	Family doctor	10/22/2022 4:22 PM
196	Pharmacist	10/22/2022 4:21 PM
197	Family Physician	10/22/2022 4:20 PM
198	Family Physician	10/22/2022 4:19 PM
199	family physician	10/22/2022 4:17 PM
200	Family Physician	10/22/2022 4:16 PM
201	Family physician	10/22/2022 4:15 PM
202	MD	10/22/2022 4:13 PM
203	Physician	10/22/2022 4:06 PM
204	Family Physician	10/22/2022 4:02 PM
205	pharmacist	10/22/2022 4:02 PM
206	Physician	10/22/2022 3:59 PM
207	Family physician	10/22/2022 3:58 PM
208	Family medicine. Consultant in disability for insurance medicine. Should be retired, but what the heck - i'll be 90 in a month. U of T 1960	10/22/2022 3:56 PM
209	Physician	10/22/2022 3:54 PM
210	Family physician	10/22/2022 3:52 PM
211	Family physician	10/22/2022 3:51 PM
212	GP	10/22/2022 3:50 PM
213	FP	10/22/2022 3:50 PM
214	Family medicine resident	10/22/2022 3:43 PM
215	Family med	10/22/2022 3:42 PM
216	Family physician	10/22/2022 3:42 PM
217	family doctor	10/22/2022 3:42 PM
218	Family Medicine Resident	10/22/2022 3:41 PM
219	Family Physician	10/22/2022 3:41 PM
220	Family Medicine	10/22/2022 3:41 PM
221	GP	10/22/2022 3:40 PM
222	Family physician	10/22/2022 3:40 PM
223	Surgical Hospitalist	10/22/2022 3:37 PM

2022 PEIP Overall Conference Evaluation

224	Family med md	10/22/2022 3:36 PM
225	Fam Physician	10/22/2022 3:36 PM
226	Nurse practitioner	10/22/2022 3:36 PM
227	family physician	10/22/2022 3:36 PM
228	Family physician	10/22/2022 3:35 PM
229	pharmacist	10/22/2022 3:34 PM
230	Family Physician	10/22/2022 3:29 PM
231	Physician	10/22/2022 3:27 PM
232	Family Physician	10/22/2022 3:27 PM
233	Resident Family Medicine	10/22/2022 3:27 PM
234	family physician	10/22/2022 3:27 PM
235	Physician	10/22/2022 3:26 PM
236	Family Physician	10/22/2022 3:26 PM
237	Family physician	10/22/2022 3:23 PM
238	Family physician	10/22/2022 3:23 PM
239	FAMILY DOCTOR	10/22/2022 3:23 PM
240	Physician	10/22/2022 3:23 PM
241	Pharmacist	10/22/2022 3:21 PM
242	family physician	10/22/2022 3:21 PM
243	Physician	10/22/2022 3:19 PM
244	Pharmacist	10/22/2022 3:19 PM
245	family physician	10/22/2022 3:18 PM
246	physician	10/22/2022 3:16 PM
247	Primary Care Practice	10/22/2022 3:15 PM
248	Family Medicine - 30 years!	10/22/2022 3:15 PM
249	MD	10/22/2022 3:15 PM
250	Physician	10/22/2022 3:14 PM
251	Family physician	10/22/2022 3:14 PM

Q26 How many years of practice do you have?

Answered: 254 Skipped: 16



ANSWER CHOICES	RESPONSES	
0-5 years	13.78%	35
6-10 years	14.57%	37
11-15 years	12.99%	33
16-25 years	22.44%	57
25 years	33.46%	85
I am a resident.	2.36%	6
I am a learner.	0.39%	1
Not applicable	0.00%	0
TOTAL		254