



Regional Emergency Medical Organization  
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## CME Participant Summary

Name \_\_\_\_\_ EMT # \_\_\_\_\_ REMO # \_\_\_\_\_

Primary Agency \_\_\_\_\_

Title of CME \_\_\_\_\_ CME# \_\_\_\_\_

Date of CME \_\_\_\_\_ CIC name \_\_\_\_\_ CIC initials \_\_\_\_\_

1. Define one new concept or lesson that you learned from this CME.
2. Describe how this concept or lesson will be applied to your practice.
3. Summarize the teaching points being communicated in this CME.
4. Was the speaker on time and well prepared?  Yes  No
5. Did the speaker demonstrate knowledge of the subject?  Yes  No
6. Did this CME meet your expectations?  Yes  No
7. Was there opportunity to ask questions?  Yes  No
8. Were questions answered to your satisfaction?  Yes  No