Annual Journal Club Evaluation

Date: __________

Check one:  PGY-1 ____   PGY-2 ____   PGY-3 ____   PGY-4 ____   Faculty ____

Considering the activities of the Journal Club during the past year, please answer the following:

1. The Journal Club met the educational goals of this residency program.
   Strongly Agree    Agree    Unsure    Disagree    Strongly Disagree

2. The Journal Club met my educational needs this year.
   Strongly Agree    Agree    Unsure    Disagree    Strongly Disagree

3. What proportion of the Journal Club sessions did you attend this past year?
   ___ 75-100%     ___ 50-74%     ___ 25-49%     ___ 5-24%     ___ None

4. What do you consider the strengths of the Journal Club?
   __________________________________________________________________________
   __________________________________________________________________________
   __________________________________________________________________________

5. What do you consider the weaknesses of the Journal Club?
   __________________________________________________________________________
   __________________________________________________________________________
   __________________________________________________________________________

6. Are there any changes you think could improve the Journal Club?
   __________________________________________________________________________
   __________________________________________________________________________
   __________________________________________________________________________

Thank you for your help in keeping the Journal Club a viable educational function of this residency program. Please return this form to: