

EMS & Trauma Systems

Trauma Coordinator Course Evaluation

Module taken (Number, Title): _____

Date Module taken: _____

Name: _____

The TC Course modules posted on the EMSTS website have been made available for those seeking education on the role of Trauma Coordinator and the Montana Trauma System. We NEED your feedback to provide us with ideas to enhance/improve the information we are presenting. Please evaluate EACH Trauma Coordinator Module you review. We truly appreciate your comments and responses.

	<u>Low</u>				<u>High</u>
Module Content:	1	2	3	4	5
Module Organization:	1	2	3	4	5
Effectiveness:	1	2	3	4	5
Personal Objectives:	<u>Not Met</u>				<u>Met</u>
	1	2	3	4	5
Audiovisuals/weblinks:	<u>Not Helpful</u>				<u>Useful</u>
	1	2	3	4	5

Any comments or suggestion for specific slides in this module?

Any additional comments or suggestions for this module?

Please email, mail or FAX this to:
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