



Date: May 9, 2019

Location: _____

Name of Session: **Diabetes Management – Medications 101**

For each statement below, please circle your answer.

		Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1.	Today's session was easy to understand.	1	2	3	4	5
2.	The information I learned today was new to me.	1	2	3	4	5
3.	The information I learned today will help me understand how diabetes medications work.	1	2	3	4	5
	The information I learned today will help me to speak about different diabetes medications.	1	2	3	4	5
4.	I know where to get help to better understand diabetes medications.	1	2	3	4	5
5.	I would attend another Diabetes 101 education session.	1	2	3	4	5

		Poor	Below Average	Average	Good	Excellent
6.	Overall, I rate this session:	1	2	3	4	5

		Just Right	Too Short	Too Long
7.	The length of the session was:	1	2	3

8. What did you learn today that was new to you?

9. What is one thing that you will start doing differently after this session?

10. Other comments: (All comments are welcome and very helpful!)

Thank you, we value your comments! Please FAX to 780-495-7338