



5912



**PROGRAM EVALUATION &  
POST - ASSESSMENT**

**COURSE NUMBER:** 12.LB.CG.PTSDSAT.A

**ACTIVITY TITLE:** VA/DOD - INTEGRATING THE CLINICAL

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Contact Phone 949-637-3645

**THIS PROGRAM EVALUATION INCLUDES A POST-ASSESSMENT.**

**POST-ASSESSMENT INSTRUCTIONS**

1. All Post-Assessment answers must be completed in the answer blocks on the "PROGRAM EVALUATION & POST-ASSESSMENT ANSWERS" page (Page 2) to be graded.
2. A passing grade must be obtained, as defined in the Program Brochure, in order to receive a certificate. If a passing grade is not obtained, notification will be sent, to the email address provided on the "PROGRAM EVALUATION & POST-ASSESSMENT ANSWERS" page (Page 2), with further instructions.
3. Please refer any questions or concerns, specific to the Post-Assessment, to the Program Contact listed above.

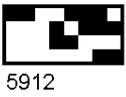
**SUBMISSION INSTRUCTIONS**

1. Complete this registration and evaluation form within two weeks of completing the activity.
2. **Fax:** (205) 731-1826 - No cover page needed, or  
**Mail:** Employee Education Resource Center, ATTN: EPC, 950 North 22nd Street, Suite 500, Birmingham, AL 35203.
3. Please allow several business days for receipt of certificate if evaluation is faxed, additional transit time if mailed.
4. For questions or concerns regarding the Program Evaluation or Certificate, the following contact methods are available:  
EPC by email at **EESEPC@va.gov**, or the  
EES Customer Service by phone at **1.877.EES.1331** option 5 (**1.877.337.1331**).

**PRIVACY ACT STATEMENT**

**AUTHORITY:** Title 50, Appendix, U.S.C., Title 10, U.S.C., Public Law 96-357 96th Congress, September 24, 1980 (Amendment to 10 U.S.C. 2107).  
**PRINCIPAL PURPOSE(S):** To develop policies and procedures, compile statistics and render analytical reports, and to track participation in EES activities.  
**ROUTINE USES:** The information provided on the application will be used to maintain data on EES activities, provide requested reports on participation, and to provide activity original and duplicate certificates to EES activity participants.  
**MANDATORY AND VOLUNTARY DISCLOSURE AND EFFECT ON INDIVIDUAL PROVIDING INFORMATION:** Disclosure of information requested in the EES registration form (the application) is voluntary; however, the information must be furnished in order to ensure the applicant will receive a certificate of completion for EES activities and appropriate education credit.





POST - ASSESSMENT QUESTIONS

Answers must be recorded in the answer blocks on "PROGRAM EVALUATION & POST-ASSESSMENT ANSWERS" page (Page 2).

1. It is important to initiate pharmacotherapy with a Benzodiazepine to treat PTSD symptoms
  - A True
  - B False
  - C
  - D
  - E
  
2. For a patient diagnosed with PTSD comprehensive re-assessment and evaluation of treatment progress should occur at least every \_\_\_\_?
  - A 30 Days
  - B Two Weeks
  - C 90 Days
  - D Six months
  - E



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Answers must be recorded in the answer blocks on "PROGRAM EVALUATION & POST-ASSESSMENT ANSWERS" page (Page 2).

**3.** The intervention which shows the most significant benefit for PTSD is?

**A** Dialectical Behavior Therapy

**B** Hypnosis

**C** Group Therapy

**D** Trauma-focused Psychotherapy

**E**

**4.** Valproate and Risperidone are effective in treating PTSD and should be considered a first line therapy.

**A** True

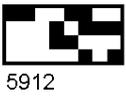
**B** False

**C**

**D**

**E**





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Answers must be recorded in the answer blocks on "PROGRAM EVALUATION & POST-ASSESSMENT ANSWERS" page (Page 2).

**5.** Which of the following physical symptoms is common following exposure to trauma?

- A** Chills
- B** Dizziness
- C** Headaches
- D** All the above
- E**

**6.** which of the following behaviors are common after exposure to trauma?

- A** Increased alcohol consumption
- B** Social withdrawal
- C** Mood elevation
- D** A and B
- E** A and C



POST - ASSESSMENT QUESTIONS

Answers must be recorded in the answer blocks on "PROGRAM EVALUATION & POST-ASSESSMENT ANSWERS" page (Page 2).

7. Young age at the time of trauma make it more likely an individual will eventually develop PTSD.

A True

B False

C

D

E

8. When evaluating risk factors for developing PTSD, the clinician should keep in mind that PTSD is defined as occurring only after \_\_\_\_ have elapsed following a traumatic event.

A 45 days

B 6 months

C 1 year

D 4 weeks

E



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**9.** \_\_\_\_\_ providers should take lead responsibility in ensuring a collaborative multi-disciplinary treatment approach.

**A** Mental health

**B** Primary Care

**C** Spiritual Care

**D**

**E**

**10.** Which of the following psychotherapeutic interventions is strongly recommended for treatment of PTSD?

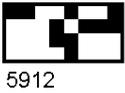
**A** Prolonged Exposure

**B** Cognitive Processing Therapy

**C** Stress Inoculation Therapy

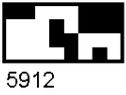
**D** Eye Movement Desensitization and Reprocessing Therapy

**E** All of the above



PLEASE CIRCLE THE APPROPRIATE RESPONSE CORRESPONDING WITH EACH QUESTION BELOW:	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Not Applicable
1. Overall, I was satisfied with this learning activity.	1	2	3	4	5	NA
2. I would recommend this learning activity to others.	1	2	3	4	5	NA
3. The learning activities and/or materials were effective in helping me learn the content.	1	2	3	4	5	NA
4. I learned new knowledge and skills from this learning activity.	1	2	3	4	5	NA
5. The scope of the material was appropriate to my needs.	1	2	3	4	5	NA
6. I found the material in this learning activity to be relevant and up-to-date.	1	2	3	4	5	NA
7. The content was relevant to my job-related needs.	1	2	3	4	5	NA
8. Was the content presented in a manner that was fair and balanced?				Yes	No	NA
If no, please explain:						
9. Overall, I fully accomplished the learning activity's objectives.	1	2	3	4	5	NA
10. I will be able to apply the knowledge and skills learned to my job.	1	2	3	4	5	NA
11. If you feel you will be successful in applying this learning, please provide a few specific examples of how you will apply it.						
12. This learning activity will help improve my job performance.	1	2	3	4	5	NA
13. My manager and I set expectations for this learning prior to attending this learning activity.	1	2	3	4	5	NA
14. I feel competent to apply the skills/knowledge I developed during the learning activity.	1	2	3	4	5	NA
15. This learning activity aligns with the business priorities and goals identified by my organization.	1	2	3	4	5	NA
16. I obtained information on the learning activity's logistics (i.e., date, location, time) in a timely manner.	1	2	3	4	5	NA
17. If you required any accommodations for a disability your request was addressed respectfully and in a timely manner.	1	2	3	4	5	NA

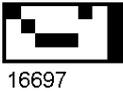




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Please rate each of the following program objectives.

After attending this learning activity, I have the ability to:	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1. Identify key elements of the VA/DoD Management of PTSD Clinical Practice Guideline	<input type="radio"/>				
2. Discuss implications of the VA/DoD Management of PTSD Clinical Practice Guideline for the respective DoD and VA populations	<input type="radio"/>				
3. Identify appropriate knowledge-based clinical issues that are unique for the patient with PTSD;	<input type="radio"/>				
4. Describe how to integrate use of the VA/DoD Management of PTSD Clinical Practice into the care of patients	<input type="radio"/>				
5. Identify appropriate knowledge-based pharmaceutical issues that are unique for the patient diagnosed with PTSD	<input type="radio"/>				
	<input type="radio"/>				
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FACULTY EVALUATION

PLEASE CIRCLE THE APPROPRIATE RESPONSE  
CORRESPONDING WITH EACH QUESTION BELOW:

Dr. Shawn F. Kane / Current Issues and Discussion	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1. Was able to effectively present content	1	2	3	4	5
2. Was knowledgeable about the topic	1	2	3	4	5
3. Engaged participants effectively	1	2	3	4	5

Comments

Diane Poulter / Current Issues and Discussion	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1. Was able to effectively present content	1	2	3	4	5
2. Was knowledgeable about the topic	1	2	3	4	5
3. Engaged participants effectively	1	2	3	4	5

Comments

Dr. Joseph Ruzek / Current Issues and Discussion	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1. Was able to effectively present content	1	2	3	4	5
2. Was knowledgeable about the topic	1	2	3	4	5
3. Engaged participants effectively	1	2	3	4	5

Comments

Dr. Robert Selvester / Current Issues and Discussion	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1. Was able to effectively present content	1	2	3	4	5
2. Was knowledgeable about the topic	1	2	3	4	5
3. Engaged participants effectively	1	2	3	4	5

Comments