

HEART TO HEART: WOMEN & VALVE DISEASE

Participant Workshop Evaluation

Please rate today's program in terms of how helpful it was for:

Please use the following 1-5 scale:

1 = Not at all 2 = Somewhat 3 = Moderately	4 = Very	5 = Extremely			
		PLEASE CIRCLE ONE			
1. Learning about different types of valve disease	1	2	3	4	5
2. Identifying causes and risk factors	1	2	3	4	5
3. Recognizing signs and symptoms	1	2	3	4	5
4. Learning about diagnosis	1	2	3	4	5
5. Living with valve disease	1	2	3	4	5
6. Exploring different treatment options	1	2	3	4	5
7. Life after surgery	1	2	3	4	5
8. How would you rate today's workshop overall?	1	2	3	4	5

9. What suggestions do you have for improvement? ______

10.What is your age?

- O Under 40
- $\odot\,$ 41 to 50
- \odot 51 to 60
- \odot 61 to 70
- $\odot~71$ to 80
- O 81+

11.What is your sex?

- O Male
- O Female

12.What is your race? Do you consider yourself: (Select one or more.)

- $\operatorname{O}\,$ White or Caucasian
- $\operatorname{O}\,$ Hispanic or Latino
- O Black or African American
- ${\rm O}$ Asian
- ${\rm O}\,$ Native Hawaiian or other Pacific Islander
- ${\rm O}\,$ American Indian or Alaska Native
- ${\rm O}$ Other

Please return this form to the workshop leader when you are finished. Thank you for your feedback!