"MYASTHENIA GRAVIS: A NURSING PERSPECTIVE AND CLINICAL GUIDELINES" ON LINE CONTINUING EDUCATION PROGRAM

| | DATE: | |
|------------------|-------|--|
| NAME | | |
| Email | | |
| Address <u>:</u> | | |

Using the rating scale 5=Strongly Agree through 1= Strongly Disagree, please rate the following:

Course Objectives:

| As a result of completing this program, I am able to: | Agree | | I | Disagree | | |
|--|-----------|---|---|----------|---|--|
| Define Myasthenia Gravis (MG) | 5 | 4 | 3 | 2 | 1 | |
| Discuss the epidemiology of acquired myasthenia gravis | 5 | 4 | 3 | 2 | 1 | |
| Discuss the predisposing factors and environmental issues that may contribute to the onset of MG | 5 | 4 | 3 | 2 | 1 | |
| Explain the pathophysiologic mechanisms and autoimmune basis of acquired MG | 5 | 4 | 3 | 2 | 1 | |
| Describe the common clinical presentations of myasthenics | 5 | 4 | 3 | 2 | 1 | |
| Discuss the classification system used to characterize the distinct clinical features and severity of MG | 5 | 4 | 3 | 2 | 1 | |
| Compare the procedures used in the diagnosis of MG and describe the nursing recommendations for each | 5 | 4 | 3 | 2 | 1 | |
| Discuss the medical and surgical therapeutic modalities used in the treatment of MG, including the advantages, side effects and risk factors associated with each treatment option | , 5 | 4 | 3 | 2 | 1 | |
| Identify the nursing implications and nursing recommendation associated with the various treatment options | ns 5 | 4 | 3 | 2 | 1 | |
| Discuss the factors that have an adverse effect and contribute to worsening of MG | e 5 | 4 | 3 | 2 | 1 | |
| Differentiate between Myasthenic Crisis and Cholinergic Crisis and identify the appropriate management strategies and nursing recommendations | 5 | 4 | 3 | 2 | 1 | |
| Describe a comprehensive nursing assessment of the myasthe patient and the related nursing recommendations | enic 5 | 4 | 3 | 2 | 1 | |
| Identify the potential patient problems, expected outcomes, | | | | | | |

appropriate interventions and the related nursing

| recommendations | 5 | 4 | 3 | 2 | 1 | | | |
|---|----------|-----|---|------|-----|---|---|---|
| Discuss the impact of MG on the myasthenic and the family members | 5 | 4 | 3 | 2 | 1 | | | |
| Demonstrate knowledge of myasthenia gravis and the appropria patient management | ate 5 | 4 | 3 | 2 | 1 | | | |
| Teaching/Learning: | | | | | | | | |
| | Agı | ree | D |)isa | gre | е | | |
| Rate the Teaching Effectiveness of the Learning Methods: | | | | 5 | 4 | 3 | 2 | 1 |
| Rate the ease of use of the learning materials | | | | .5 | 4 | 3 | 2 | 1 |
| Overall Program: | | | | | | | | |
| As a result of completing this program: | | | | | | | | |
| I am able to apply the knowledge learned in my practice setting |] | | | .5 | 4 | 3 | 2 | 1 |
| My clinical practice was enhanced | | | | .5 | 4 | 3 | 2 | 1 |
| This study was not commercially biased | | | | .5 | 4 | 3 | 2 | 1 |
| The provider of the activity has disclosed in writing the lack of c interest declared by the planners and content specialists | | | | .5 | 4 | 3 | 2 | 1 |
| How long did it take you to complete this independent self study minutes | y? | | | | | | | |

To verify successful completion of this program and be awarded nursing contact hours, you must complete this evaluation form.