

ANZSRS ASM 2008 Melbourne – Evaluation Survey Results

Compiled by Brigitte Borg, LOC Chair

General Information

	Very Unsatisfied	Unsatisfied	Undecided	Satisfied	Very Satisfied	Mean	Median	total responses
	1	2	3	4	5			
How satisfied were you with:								
Q1: The ASM venue?	0	2	7	34	26	4.2	4	69
Q2: The relevance of the trade exhibit?	1	0	2	44	21	4.2	4	68

If unsatisfied, what types of trade would you like to see at future meetings?

- ❖ Preschool Lung Function Equipment
- ❖ Experts should be available earlier in the meeting
- ❖ Didn't have sufficient time to see all and liaise with exhibitors.
- ❖ Its getting more & more difficult to spend adequate time with the trade without skipping some of the program. I skipped Mon am in order to devote some time to the trade.
- ❖ Directions to the meeting room was poorly signposted, and far from the trade exhibit

	Very Unsatisfied	Unsatisfied	Undecided	Satisfied	Very Satisfied	Mean	Median	total responses
	1	2	3	4	5			
Q3: The social program?	0	0	8	34	25	4.3	4	67
Q4: Welcome Reception	0	0	5	26	33	4.4	5	64
Q5: Conference Dinner	0	1	9	27	30	4.3	4	67
Q6: The overall organisation of the ASM?	0	0	0	30	39	4.6	5	69

Q7: Comments regarding the ASM in general:

- ❖ problems with IT
- ❖ Very Good, I was most impressed with the set-up and organisation of this meeting, I have attended many meetings in Europe and it was as good if not better than those!!! Well done LOC and SCC!!!!!!!
- ❖ Very well organised. Chairs need to keep speakers to time. This is particularly important when there are concurrent sessions on during ANZSRS and TSANZ
- ❖ Overall was very good. Disappointed with Tobin's first presentation, but his others were terrific and justified his visit.
- ❖ The 3 days makes it more worthwhile. The follow-up PowerPoint session on the posters didn't really achieve too much (the slides were illegible).
- ❖ The catering at the MCC was quite basic, with only limited options for lunch and refreshments. Catering at the welcome reception & conference dinner were great though.
- ❖ The conference dinner was dissapointing, with overcooked steak and burnt chocolate sauce with the desert
- ❖ As always, the ASM is very well organised, runs to time and is a 'easy' to attend.
- ❖ Problems loading presentations onto computers were snnoying and disrupted flow of meeting and increased presenter anxiety
- ❖ Well done to BB and co for a job well done
- ❖ I thought it was well run, with generally interesting presentations.

- ❖ Disappointing the Audio Visual had problems with links to presentations. Food - no fruit at morning tea, didn't like lunches, need some hot food
- ❖ Well organized and well run. Congrats to the LOC.
- ❖ well organised
- ❖ interesting and enjoyable
- ❖ Really enjoyed this meeting, however there were a few presentations where their claims were "highly significant" based on stats of $p < 0.05$ and $r < 0.8$. Is it the responsibility of the board to ensure that claims in papers/posters are more valid? "
- ❖ The guest speaker Martin Tobin, should have been cut short by the Chairs. Many of us had to leave, which we did in the end. Not a good speaker to go 45 minutes over, no matter how interesting the topic!
- ❖ Well done
- ❖ Music too loud at dinner venue. Couldn't talk to people. Hat idea was fun!
- ❖ one of the best we have had
- ❖ Just in regards to food requirements, almost seemed like I was asked this for legal purposes. Catering didn't seem to be very accomodating for allergies, just was told what I couldn't have (which was almost all morning and afternoon teas, plus options at lunch. Conference dinner they were more accomodating)Almost seemed no point listing my allergies as it seemed to be disregarded, if not almost flaunted!!

Saturday/Sunday Program

	Very Unsatisfied	Unsatisfied	Undecided	Satisfied	Very Satisfied	Mean	Median	total responses
	1	2	3	4	5			
How satisfied were you with:								
Q8: The relevance of the overall theme of the meeting?	0	0	9	40	20	4.2	4	69
Q9: Relevance of presentations related to ILD?	0	1	4	38	25	4.3	4	68
Q10: Relevance of presentations related to Respiratory Muscle function?	0	0	11	35	23	4.2	4	69
Q11: Relevance of presentations related to ICU related topics?	4	9	29	20	4	3.2	3	66
Q12: Relevance of presentations related to clinical testing?	0	0	5	38	26	4.3	4	69
Q13: Relevance of presentations related to imaging?	1	4	10	38	14	3.9	4	67
Q14: The mix of clinical, research, adult and paediatric content?	0	1	4	42	21	4.2	4	68
Q15: The format of the sessions?	0	0	4	44	21	4.2	4	69
Q16: The allocated question time?	0	3	7	44	15	4.0	4	69
Q17: The concurrent sessions?	0	2	9	42	16	4.0	4	69
Q18: The format of the oral presentation sessions?	0	0	2	49	18	4.2	4	69

Comments:

- ❖ See above. Timing is important and keeping to time is an important skill for speakers to learn
- ❖ A lot of time wasted with speakers not able to load their presentations simply. This should never happen in such a venue.
- ❖ Door entry/exit should be at the back (not side) of the room. Mobile phones MUST BE OFF!!!!

- ❖ Comment on weekend program: I don't like talks which basically just review the relevant guidelines, I feel I don't learn anything from them. eg talk on lung volume measurement and exercise testing. They would be more relevant in CRFS workshop.
- ❖ Not sure if the Sunday AGM worked?? A key note speaker scheduled for the end of the day (eg M Tobin on Saturday) didn't work. Mind you, his presentation was far too long, and wandered. However I'm not certain any 45 min presentation at the days end is wise???
- ❖ Shame about IT problems again
- ❖ I think it could be good to leave a space so that ANZSRS members can listen to the Wunderly Presentation on the Monday morning - this year was excellent.
- ❖ Not enough Q time for some speakers
- ❖ for new members some talks were above comprehension
- ❖ Question time was cut short during the oral presentations and YIA due to time taken up with technical probs with presentations not loading
- ❖ Martin Tobin spoke for too long. Difficult situation for chair as he was the guest speaker
- ❖ If concurrent sessions are run they should be mutually exclusive in terms of relevance, eg paediatric vs adult, basic vs applied.
- ❖ Meeting too small to justify concurrent sessions. One session always misses out on audience to the more popular topic.
- ❖ I was a bit concerned that the presentations are becoming more like the TSANZ clinical sessions and we seem to be losing focus of Physiology & Testing. This mainly relates to the ILD clinical sessions.

	Very Unsatisfied	Unsatisfied	Undecided	Satisfied	Very Satisfied	Mean	Median	total responses
	1	2	3	4	5			
Q19: The format of the poster presentation sessions?	1	5	11	38	10	3.8	4	65

Comments:

- ❖ ? need for formal questions in auditorium
- ❖ I think maybe the people who had posters should have done a quick overview of their posters then questions.
- ❖ An improvement on last year, but still awkward. It was hard to read the presentations onscreen to reacquaint yourself with the data. Perhaps next time they can present their results instead
- ❖ Disappointed with the lack of questions from the audience.
- ❖ The follow-up PowerPoint session on the posters didn't really achieve too much (the slides were illegible).
- ❖ I'm not sure what best works with posters, but I think we need decide on a format, then stick to it for a few years. Every year the format is different.
- ❖ In comparison to Auckland where there was not a structured Q and A session, this year gave the opportunity for delegates to be more involved in the poster presentations.
- ❖ Best format we've had for a while. Gives you time to look through posters and then see presenters answer a range of Q's
- ❖ Question time didn't work that well. I think we need to persist with this format though.
- ❖ ?? sleep posters inclusion
- ❖ This worked really well this year.
- ❖ Question format boring. Don't think we need it, had already asked questions when looking at posters
- ❖ A shame that the ppt for the last 2-3 presentations weren't loaded. Perhaps checks should be made (by LOC?/ chairs) prior to each session.
- ❖ I would suggest that discussion of posters occurs at the same time as manning of the posters where summary is given and questions are asked. Many questions asked while looking at the poster were not repeated during the discussion session. So I think having a separate discussion session is not as effective.
- ❖ much better than last year
- ❖ The most effective format so far

- ❖ Poster session format worked very well this year
- ❖ Each poster presenter should give a brief (2min) summary of their work before inviting questions.
- ❖ We still haven't worked out the best format for the posters. In the past I have disliked the poster discussions held at the poster due to difficulties with hearing the discussion. This year was a worthwhile experiment but I think the question session in the theatre didn't work. Not sure I know the answer.
- ❖ Would be good to have a short overview prior to questions
- ❖ Thought the new format worked well
- ❖ Liked moving in to room for questions

Q20: Which Concurrent session did you attend?								
Session 1 - Pulm Rehab and Exercise in ILD	47							65
Session 2 - Restriction in Paediatrics/ NIV in restriction	18							

Monday Program

Q21: CRFS Workshop - indicate if attended	yes	24	no	43				67
	Very Unsatisfied	Unsatisfied	Undecided	Satisfied	Very Satisfied	Mean	Median	total responses
	1	2	3	4	5			
Q22: Were you satisfied with the topic	0	1	1	8	14	4.5	5	24
Q23: Were you satisfied with the standard of the presentations	0	0	3	7	14	4.5	5	24
Q24: Were you satisfied with the format of the workshop?	0	1	2	8	12	4.3	5	23
Q25: Were you satisfied with the notes	2	0	2	5	15	4.3	5	24
How did you rate the level of difficulty of the topics covered	basic	relatively easy	about right	challenging	difficult	Mean	Median	total responses
	1	2	3	4	5			
Q26: Anatomy and Physiology	1	2	17	2	3	3.2	3	25
Q27: Pathophysiology	0	0	15	5	3	3.5	3	23
Q28: Tests of lung parenchymal function	0	1	18	0	3	3.2	3	22
Q29: Interpretation of tests of lung parenchymal function	1	0	17	1	2	3.1	3	21

Q30: Comments

- ❖ Timing was also an issue with this session which meant that one speaker had to stop early. Perhaps too much detail with the pathophysiology...
- ❖ Level seemed appropriate (but maybe address via questions rather than lecture)
- ❖ Well delivered topics. No one trying to show everybody else how smart they are. Just relevant, applicable presenting. Good work!
- ❖ presenter - so inappropriate to comment!
- ❖ I thought most speakers were very good. It might be better to get the audience to come up with the answer first, rather than tell us

- ❖ I thought the person presenting interpretation of tests of parenchymal function was not particularly strong in that area, perhaps someone with a bit more knowledge/passion of physiology would have made it more interesting. I suppose she was competing with a Nobel laureate speaking at the same time, and I wished i had attended that session instead! Also, there werent enough handouts, although i registered, only about half the participants got notes.
- ❖ I did not recieve a handout as not enough were provided for the number of people who attended
- ❖ Pathophysiology- too broad a topic to cover well
- ❖ Unfortunately was unable to attend on Monday, however I heard the sessions were wonderful

Q31: Research Workshop - indicate if attended	yes	23	no	44				67
	Very Unsatisfied	Unsatisfied	Undecided	Satisfied	Very Satisfied	Mean	Median	total responses
	1	2	3	4	5			
Q32: Were you satisfied with the topic	0	0	0	13	10	4.4	4	23
Q33: Were you satisfied with the standard of the presentations	1	4	4	9	5	3.6	4	23
Q34: Were you satisfied with the format of the workshop?	0	2	3	11	7	4.0	4	23
Q35: Were you satisfied with the notes	0	1	1	11	10	4.3	4	23
How did you rate the level of difficulty of the topics covered	basic	relatively easy	about right	challenging	difficult	Mean	Median	total responses
	1	2	3	4	5			
Q36: Introduction to Biostatistics	1	0	6	8	7	3.9	4	22
Q37: How to write a Manuscript	0	0	19	0	2	3.2	3	21

Q38: Comments

- ❖ biostats pres:needs to be more applicable rather than lots of equations. we need to know 'what to use when'
- ❖ Biostatistics presentation was too rushed and not presented well
- ❖ The choice of presenter for the "how to write a manuscript" was fantastic
- ❖ Don Campbell's presentation was terrible and could have been better presented by 90% of ANZSRS members.
- ❖ Biostatistics session was difficult to maintain concentration
- ❖ (for Q31 my answer of 4 is an average of 2 for the biostats, which was not so great session, and a 5 for the manuscript talk, which was excellent)
- ❖ This presentation (manuscript) was excellent
- ❖ A little more on actual practical statistics in research applications would have been better than 1st principles. The manuscript lecture was superb.
- ❖ Presenter on Biostatistics didn't get through all of his slides which was frustrating. We started a little late, but not that late.
- ❖ The presentation by Martin Tobin was absolutely brilliant. I thoroughly enjoyed it and gained an enormous amount of benefit from it.
- ❖ Only attended biostats - big topic to cover - but hard to follow - round tables not good - I realise venue arranged that.
- ❖ The biostatistics was not helpful, it started at too basic a level. The writing a manuscript was good but could have been illustrated with more examples.
- ❖ Martin Tobin's presentation on writing manuscripts was excellent.
- ❖ Statistics - too much information for time allocated

- ❖ The Biostatistics lecturer was misinformed of the length of time he was allocated, so only gave half of his planned lecture. This was extremely frustrating as he only covered the introductory topics in the lecture delivered, the rest (ie actual tests including correlations and linear regressions) was in the notes only. Manuscript writing talk was fantastic.

What types of workshops and what topics would you like to see in the future?									total responses
Q39: Research	yes	45	no	5				50	
Q40: CRFS	yes	49	no	2				51	
Q41: Accreditation	yes	40	no	12				52	
Q42: Clinical testing	yes	56	no	1				57	
Q43: Interpretation	yes	57	no	1				58	
Q44: Imaging	yes	25	no	25				50	
Q45: Reference Equations	yes	46	no	8				54	

Q46: Other suggestions:

- ❖ what about combination of imaging/interpretationie how pft's fit into the bigger picture,
- ❖ New techniques, QA, critical evaluation
- ❖ Clinical interpretation related to anatomy and pathophysiology changes in disease
- ❖ Career outcomes and possibilities for the new generation of respiratory scientists. We all love the field but we would like to know that there is life beyond 15 tests a day in a private lab.
- ❖ What about: how to run a lab, with a mix of public and private view points.
- ❖ As I have, like others, already obtained both my CFRS and completed research, it would be great to have other options as suggested.
- ❖ Please try to avoid clash with key speakers on Monady morning TSANZ session.
- ❖ Pharmacology, Quality Assurance.
- ❖ Legal requirements regarding referrals, verbal vs written consent, infection control, different billing codes, privacy etc
- ❖ Cardiopulmonary exercise testing
- ❖ Better statistics presentation - possibly with relevance to lung function testing/research including lower limit of normal explanations etc.
- ❖ more statistics
- ❖ clinical disease processes & how it relates to lung function

Combined TSANZ/ANZSRS sessions									total responses
Q47: Lung Function Testing in Preschoolers - indicate if attended	yes	32	no	33				65	
	Very Unsatisfied	Unsatisfied	Undecided	Satisfied	Very Satisfied	Mean	Median	total responses	
	1	2	3	4	5				
Q48: Satisfaction that topics were adequately covered	0	1	5	18	8	4.0	4	32	
Q49: Satisfaction with standard of presenters	0	0	4	19	10	4.2	4	33	

								total responses
Q50: Masterclass in Static Lung Volumes - indicate if attended	yes	41	no	25				66
	Very Unsatisfied	Unsatisfied	Undecided	Satisfied	Very Satisfied	Mean	Median	total responses
	1	2	3	4	5			
Q51: Satisfaction that topics were adequately covered	0	1	2	20	18	4.3	4	41
Q52: Satisfaction with theme	0	1	0	18	23	4.5	5	42
Q53: Satisfaction with standard of presenters	0	1	3	13	24	4.5	5	41

Q54: Comments regarding the combined symposia:

- ❖ masterclass was too late. would suggest better value if perhaps less presentations and more time was allowed for questions in the programed time.
- ❖ I would have though someone from the Paediatric Field would have been a better choice for Reference Values presentation, the Pre-school Spirometry seemed to repeat the previous presentations, as a Scientist in Paediatric Resp I was really please to see this included, All the other presentations were fabulous!!!
- ❖ First speaker ran so far overtime that I missed the last talk so I could catch a plane. Really need to keep to time. Feedback above is only for the first two talks
- ❖ This session was a highlight of the meeting but presented at an unfortunate time (ie end of the last day). Given its relevance to essentially all ANZSRS members, should have been at a more accessible time. I like the format of having 2 scientist presenters and 2 physician presenters.
- ❖ Worked well.
- ❖ A lot of overlap in content, not catering for audience, needed more of relevance covered
- ❖ Always good simply because it is applicable to our field.
- ❖ Inform people of topics earlier so they can make their travel plans accordingly. quite a few people wanted to attend, but had already committed to flights/work on the Monday.
- ❖ Unfortunately the first speak went over time, which impinged on the following speakers time allocation.
- ❖ Ready for Clinics?" (Preschool LFTs) quesionetion was not answered. Very frustrating! And do not ask Peter Sly to present again. The others were good!"
- ❖ excellent idea
- ❖ Excellent
- ❖ Late finnish - made attendance for last topic difficult for people.
- ❖ Overall a very good meeting. Congratulations Brigette and the LOC.
- ❖ Preto - excellent; Young - OK; McKenzie - not so good
- ❖ Needed more clinical focus
- ❖ Masterclass in static lung volumes best session, no problems following
- ❖ Masterclass is superb. Mandatory for future meetings.

Q55: Future topics you'd like to see in combined TSANZ/ANZSRS sessions:

- ❖ Again Paediatrics, Clinical Exercise Testing, Multibreath Washout Analysis
- ❖ Provocation challenges
- ❖ Interpretation of lung function tests (in general); 2. Indications for lung function testing.- these 2 areas appear to create a lot of the conflict/disagreement between scientists and physicians and these combined sessions would provide the ideal stage for this to be presented. Given the strong attendance at these sessions by registrars/advance trainees/new physicians it would be a good way to appropriately educate them to take an evidence-based approach to these issues.
- ❖ Technician's" gripes with referring "medicos" and vice-versa.

- ❖ EIA, NMD,
- ❖ Measuring resistance in the airways. Clinical exercise testing in both adults and children; Pathophysiology of asthma , and airway remodelling.
- ❖ Haven't had exercise testing for a while
- ❖ Standardisation of reports of lung function tests and exercise tests
- ❖ Blood gas, pulse oximetry gas exchange issues. Exercise testing CPET 6 min walk.
- ❖ Exercise; Bronchial challenges
- ❖ asthma and progressive exercise testing
- ❖ Clinically relevant topics in general