

Wisconsin Nurses Association – Continuing Nursing Education Program  
**2018 APRN Forum Pharmacology & Clinical Update**  
**COMPILED OVERALL CONFERENCE EVALUATION RESULTS**  
 Monona Terrace, Madison

# Completed Overall Conference Evaluation: 354 (including 11 'incompletes')

	NP	CNS	CNM	CRNA	Other – not an APRN
<b>Type of APRN: (from Registration)</b>	<b>367</b>	<b>18</b>	<b>1</b>	<b>1</b>	<b>17</b>

**'OTHER' FILL IN:**

- Nursing student*
- Student NP*
- DNP - Student*
- NP Student*
- DNP Student- Adult Gerontology Primary Care*
- DNP CANDIDATE, UW-MADISON SON*
- DNP student*
- DNP APRN-Student*
- NP Student*
- RN, DNP Student*
- DNP Student*
- Master's Prepared Nurse (MN)*
- Pharmaceutical sales representative*
- Student APRN*
- DNP Student*
- FNP Student*
- NP Student*

**Days of Conference attended – as reported on the EVALUATION:**

	2017	2018
<b>Thursday</b>	<b>237</b>	<b>Thus AM = 124    Thurs PM = 188</b>
<b>Friday</b>	<b>367</b>	<b>326</b>
<b>Saturday</b>	<b>339</b>	<b>262    Poster Session = 181</b>
<b>TOTAL EVALUATIONS</b>	<b>385</b>	
<b>Thursday + Friday + Saturday</b>	<b>201</b>	
<b>Thursday ONLY</b>	<b>8</b>	
<b>Thursday + Friday</b>	<b>26</b>	
<b>Thursday + Saturday</b>	<b>2</b>	
<b>Friday ONLY</b>	<b>12</b>	
<b>Friday + Saturday</b>	<b>128</b>	
<b>Saturday ONLY</b>	<b>8</b>	

**Days of Conference REGISTERED for – from the REGISTRATION:**

	2017	2018

Wisconsin Nurses Association – Continuing Nursing Education Program  
**2018 APRN Forum Pharmacology & Clinical Update**  
**COMPILED OVERALL CONFERENCE EVALUATION RESULTS**  
 Monona Terrace, Madison

Thursday AM	160	130
Thursday PM	223	222
Friday	367	371
Saturday	338	307
<b>TOTAL REGISTRATIONS</b>	<b>386</b>	<b>404</b>
Thursday AM/PM + Friday + Saturday	123	
Thursday PM ONLY	3	
Thursday AM/PM ONLY	6	
Thursday AM + Friday	2	
Thursday PM + Friday	12	
Thursday AM/PM + Friday	13	
Thursday AM + Friday + Saturday	15	
Thursday PM + Friday + Saturday	64	
Thursday AM/PM + Friday + Saturday	1	
Thursday PM + Saturday	1	
Thursday AM/PM + Saturday	12	
Friday ONLY	126	
Friday + Saturday	8	
Saturday ONLY		

Type of Attendee – as reported on REGISTRATION:		
	2017	2018
Total registrants	386	404
APRN Forum Board Member		8
Conference Planner	14	9 ( <i>Jeff Kobernusz, Sara Fehrman, Maureen Greene</i> )
Student (also WNA member)	9	19
Wi Chapter of NAPNAP	11	11
WNA Non-member	175	170
WNA Member	177	187

## CONFERENCE PLANNING

	YES	NO
The Monona Terrace in Madison was a good venue for this conference.	333	10
<i>COMMENTS on location found in other places of evaluation:</i>		

Please explain:

- "1. Centrally located.
  - 2. Easily accessible conference rooms.
  - 3. All the conference rooms are on one floor.
  - 4. Comfortable and spacious conference rooms and AV monitors.
  - 5. Capitol flea market is a walking distance.
  - 6. Fantastic restaurants nearby.
  - 7. Great parking spaces."
- Accessible, good parking  
 All on one level. Easy to get to around for the sessions. Rooms are spacious.  
 Although parking was poor  
 Always enjoy the Monona Terrace.  
 Always nicely up keep, fairly good meals, appropriate temperature control

Wisconsin Nurses Association – Continuing Nursing Education Program  
**2018 APRN Forum Pharmacology & Clinical Update**  
**COMPILED OVERALL CONFERENCE EVALUATION RESULTS**  
Monona Terrace, Madison

*"bathrooms are w.a.y. too far away!  
would be nice to have bottles of water available at all times.  
we are a healthprovider group - yet some of the 'snack' and 'food' items were poor nutritional choices ...."*

*Bathrooms too far away*

*Beautiful accommodations overlooking the lake, easy hotel accommodations*

*Beautiful and easy to get too!*

*Beautiful atmosphere. Plenty of room. Took a walk over lunch.*

*"Beautiful campus with beautiful views of the lake. There is lots of room to spread out. Convenient to hotel.*

*My only complaint was the parking. No parking available in hotel. I used the links provided in the email and GPS sent me in circles for about 45 minutes. It caused me much anxiety as I didn't know what I was going to do for parking and I worried I'd be late. I'm sorry to complain, but another facility with better and easier parking would be welcomed by this nurse. :)"*

*Beautiful location with plenty of space. Easy to get to and parking was convenient.*

*"Beautiful place and nicely done. Poor sound barriers at times, causing some distraction. Food is excellent.  
Would have liked more breakfast options on Friday, some protein."*

*Beautiful setting. I appreciate all the natural lighting. Easy to get into and out of.*

*Beautiful venue. I do wish there had been a map included in the program this year.*

*Beautiful, easily accessible setting for state and inter-state participants. Food and environment very conducive to presentations. Would be nice if there were larger room offerings for those presentations that were limited to number. I appreciate the fresh fruits and vegetables, and yogurt to promote healthful eating. Nice mix of foods.*

*"Being downtown Madison is so fun.*

*Great restaurants and places to go in walking distance."*

*Best Conference site of all places I've been to since attending WNA APRN Update from 2005.*

*centrally located,*

*Clean. Beautiful. A lot of space. I would come back here every year!*

*Close proximity to all break out sessions, large enough rooms for lunch and breakout sessions*

*Close to Milwaukee, comfortable surroundings.*

*Close to the hotel and easy to get to with a great view.*

*close, nice facility*

*Comfortable temperature*

*Comfortable/nice location. Easy to access. Hotel connected with other options nearby. This year I did not have any issues with parking but has been full in past years. A lot to do in this area of Madison and nearby areas. Convenient for me to drive to/attend.*

*convenient location; ample space; beautiful setting*

*Convenient parking. Beautiful facilities. Within easy walking distance of the capital (farmers' market) and State Street. Awesome walking paths.*

*"Convenient.*

*Only complaint is cost of parking."*

*Conveniently located. Good area to enjoy in the evenings.*

*Depending on overnight choice of accommodation, the site was easy to navigate (road construction the exception) and sessions not wide spread or difficult to find.*

*Easily accessible, adequate parking, facility was clean, bright*

*Easy access*

*easy access and great venue*

*Easy access, beautiful, clean, easy to navigate*

*Easy access, great rooms and service*

*easy access, plenty of room*

*easy location, seats a large group of people*

*Easy parking. Nice facility. There was enough room in each breakout session and during breaks.*

*easy to find and get to capitol*

*Easy to find rooms. perfect size*

*Easy to get to, comfortable, beautiful facility*

*easy to get to, easy parking*

*Easy to get to. Parking ok*

*Easy to navigate between session. Does not feel cramped. Close to restaurants and other attractions --can walk from the conference center and hotel.*

*Enjoyed the location, space, catering, and eating breakfast with a view of the lake. Parking may have been more convenient elsewhere.*

*excellent*

*excellent layout and location.*

*"excellent venue*

*Walking distance to hotel*

*Food was excellent"*

Wisconsin Nurses Association – Continuing Nursing Education Program  
**2018 APRN Forum Pharmacology & Clinical Update**  
**COMPILED OVERALL CONFERENCE EVALUATION RESULTS**  
Monona Terrace, Madison

Excellent venue. Would have been good to know ahead of time the cost of parking. I ended up spending \$16/day x 3 days. Facility is able to accommodate the group well. The location is excellent in regard to being walking distance to the capitol square and restaurants/entertainment.

Good food, convenient meeting rooms. Bathrooms seem a little far away from meeting areas but I am getting old. Like having the hotel close by. Parking is expensive but easy to access and get out of.

Good food, good location.

Good location and great space for a conference of this size

good location, plenty of room

Good location.

Good location. Adequate parking, but felt the parking was expensive-->\$16 per day. Lunch on Friday was less than optimal. Soup was lukewarm. Sandwich was too heavy on the turkey and the croissant was dry and bland. Too much pineapple in the fruit salad. Cheesecake was so-so, but enjoyed the topping. Crust was lacking in taste. Wait staff were helpful.

Good location. Nice facility.

Good service, beautiful view. I found the location to be a bit tricky.

Good space.

Good venue, Bad road construction.

Great accommodations for the conference, great food & great bathroom accessibility. I also didn't experience any extreme temperature problems.

Great facility!

Great for the conference but difficult to get to due to the construction

Great for us Madison folk! Large enough for this conference

great location

great location

Great location, beautiful venue and good food

great location, easy access.

Great location. Good was good,

Great scenery, large enough and the food was great!

Great setting all around. Beautiful views of the lake & accommodating meeting rooms. Conference was well organized.

great space

Great venue, one room I was in had flickering lights which was distracting but other than that. parking was not an issues liked the venue more than the dells

Great venue; plenty of room in the main room and during break out sessions. It was great to be downtown Madison to be able to walk to different restaurants following the conference.

Great view for breaks and rooms for classes.

green bay or lake Geneva

however, I would suggest mid-state location, I am from northern Wisconsin

I do not have any suggestions to make, good job.

I felt the space overall for the individual conferences was good. Could've used a bigger room for some of the popular talks.

I much prefer this location to others in the Madison area. It is comfortable, has a beautiful view of the lake, and is close to many restaurants and shops after conference hrs

I prefer other venues that we have been at. I didn't think the food was that great, parking was a challenge.

I really like coming to the Monona Terrace for conferences, but usually the rooms are so cold I have to wear my down coat in April in the room. This time the rooms were all warm enough to just wear a sweater. I really liked the snacks and beverages. It was nice to have healthy food and snacks. And there were drinks like Mountain Dew with caffeine to help when driving home. I also like to stay at the Hilton and it is nice to be able to walk across the Sky Walk to the convention center.

I think this is a great location. Everything was easy to find. The food was great. Great venue for comraderie.

I would have liked to have known there was no food on Thursday

I would like to go back to Green Bay

"I would prefer Green Bay or Appleton--Lake Geneva was a great location.

My lunch was Awful!"

in my area, lots of rooms, beautiful setting

It is a good location for me.

It is but still have a problem with parking, like going to other sites

It is okay. I go there for work functions as well and I just think it is a hassle to get to and the parking is too expensive.

It is well organized and the staff does a god job.

It was a good location, although planning it on a weekend with so many events made parking/traffic difficult

It was adequate. It is unfortunate that this event is not held in Milwaukee.

It was centrally located.

It was conveniently located. A beautiful venue.

It was spacious without being too big where it is hard to find the classes.

Wisconsin Nurses Association – Continuing Nursing Education Program  
**2018 APRN Forum Pharmacology & Clinical Update**  
**COMPILED OVERALL CONFERENCE EVALUATION RESULTS**  
Monona Terrace, Madison

*It worked well this year. It is nice when the exhibits are on the main level instead of in the exhibit hall, as in years past. It was overall a great conference and great venue.*

*It's okay, I loved the view of the lake; however, it is not very family friendly. I enjoyed having it at Lake Geneva or the Kalahari or another family-friendly place in the future. Also, Green Bay would be a nice location for a conference for us coming from the North.*

*Large venue with easy to find rooms, good food, located in city with things to do*

*Layout is large and able to accommodate many people, easy to navigate, nice views as well. I love it when the conference is held there.*

*location and meeting rooms were good*

*Lots of room..... Beautiful view. I always enjoy being in Madison.*

*Love it!*

*Love Monona Terrace, easy to get too and convenient parking.*

*"Love the building, Love Madison, Love the venue and near by hotels*

*Hate the parking rates !"*

*Love the close proximity to downtown Madison.*

*Love the location in Madison*

*Love the view. Food & snack options are excellent.*

*Loved that everything was right by itself and easy to find. Good floor.*

*Loved the ease of the meeting space, location in Madison, hotel! Hope it is here again next year.*

*Loved the location and the beautiful view. My room was great and it was wonderful being able to walk around.*

*Madison is always an excellent city to visit. Beautiful accommodations. Good exercise going to and from conference. Love coming to Madison. Great reason to visit from the best.*

*Many conference rooms and in a great downtown location with many hotel options.*

*meal and breakout service good. space was adequate as were access to bathrooms.*

*"Meals were not that good*

*snacks were good*

*bathrooms pretty close*

*parking structure payment was a nightmare on both days I attended"*

*Nice conference rooms. Beautiful view of Lake Monona!*

*Nice facility though the chairs are too hard! Difficult to sit for long periods of time in uncomfortable chairs.*

*Nice facility. Food mediocre.*

*Nice location, nice venue, good food.*

*Nice rooms; easy access to conference, restaurants, in/out of town for traveling*

*Nice space, good food, close to home for me.*

*Nice venue and easily accessible*

*Not enough bathrooms-too far away.*

*not too far to travel, madison is a great city to visit and visit friends & family. like the hotel and conference venue. i look forward to this location.*

*Parking is a bit of a hassle however.*

*parking is always an issue, prefer to have it held at a venue with free parking*

*Parking is expensive! downtown traffic is horrible, Hotel is expensive. Not many things for a young family to do downtown Madison.*

*parking is extremely expensive though, especially when coming and going each day.*

*Parking is not the best. I did enjoy the conference on the west side of Madison/Middleton, not sure what hotel it was at.*

*Parking was a problem*

*Please add Wednesday night to the block of rooms to allow those travelling from afar to have a good night's rest prior to the Thursday preconference sessions.*

*Plenty of room*

*plenty of room, nice view*

*Plenty of room. Great service.*

*Plenty of rooms, bathrooms. Mother's lounge could be made more nursing-friendly.*

*Projection screens were too low, hard to see bottom lines of slides in some of the sessions. Lunch was the same thurs and Friday, would have loved salad.*

*setting, environment was conducive for learning*

*shortage of chairs for some presentations, room next to kitchen area was very noisy (could hear voices)*

*Spacious and clean. Nicely accommodated our large group. I also appreciated the large blocks of time for networking. Thank you for the meals and snacks!!*

*spacious rooms and easily access to hotel and parking lot.*

*"thankful for the mothers room for pumping*

*Terrace is beautiful place to hold this event"*

*The Monona Terrace was a great location, central to those in the Midwest. I also appreciate when the conference venue is connected to a nearby hotel! It is a great benefit for those of us who are traveling and not familiar with the area.*

*The parking was over-priced*

Wisconsin Nurses Association – Continuing Nursing Education Program  
**2018 APRN Forum Pharmacology & Clinical Update**  
**COMPILED OVERALL CONFERENCE EVALUATION RESULTS**  
Monona Terrace, Madison

*The rooms are comfortable. There is plenty of room to accommodate the group. The people who worked at Monona Terrace were friendly and helpful.*

*The venue was nice. I would prefer more healthier choices for breakfast and coffee throughout the day. The time in-between the presentations was appropriate. I did notice that all of my speakers did not have enough time at the end to answer questions - they all seemed to speak over their allotted time.*

*There was plenty of room at the venue, and the room temperature was appropriate.*

*they need to work on the parking situation. I was billed for parking, but the hotel management at the Hilton did not give me my parking ticket or code in order to get out of the parking lot without having to charge my CC.*

*they treated us very well*

*This is a beautiful building overlooking the lake. bathrooms were clean and stocked. Food was fantastic. Servers were polite and helpful. Centrally located.*

*"This is my favorite place to come. Perfect for this conference.*

*Nice to be able to walk to restaurants and State St."*

*Very accommodating.*

*Very convenient for attending the conference (just walk across skybridge) and very close to multiple restaurants and sight seeing.*

*Very easy to get to and comfortable atmosphere.*

*Very easy to get to. Good layout and easy to navigate*

*Very nice*

*Very nice location. Excellent facilities and food.*

*Was a great local conference with nice venue and was well organized*

*Wonderful learning atmosphere, easy access, wonderful staff, clean restrooms and plenty of them!! Great areas to walk.*

*"Yes and no. Challenging to get to downtown Madison - it is a beautiful facility - but we're spending it inside. Consider a venue closer to the interstate with free parking?"*

*Yes, good location.*

Wisconsin Nurses Association – Continuing Nursing Education Program  
**2018 APRN Forum Pharmacology & Clinical Update**  
**COMPILED OVERALL CONFERENCE EVALUATION RESULTS**  
 Monona Terrace, Madison

**What topics or practice issues would you like to see addressed at conference next year?**

*"Becoming a nurse educator"; repeat preceptor training; any patient education/counseling session (wellness, diet, etc)*  
*"Behavioral interventions for the person with dementia with behavioral disturbance*  
*the role of NP in skilled nursing facilities*  
*telehealth in skilled nursing facilities"*<sup>1</sup>  
*"1. One huge change to our practice has been the move towards goals/metrics in clinics. This is a huge dis satisfier among our physicians and colleagues. Also causes a focus on ordering these tests just to meet the goals. Changes in reimbursement to hospitals/systems is really a huge problem for primary care providers.*  
*2. Alternative stuff, appreciate at least one topic on something in integrative medicine.*  
*3. Appreciate political updates, just shouldn't dominate everything."*  
*"1. continue to provide information on opiate prescribing. I would like to see some practical information also like interpreting urine screenings, what might infer with these screenings. legal issues related to this, DEA information*  
*2. electrolyte issues, interpreting lab work, when is it ok not to treat."*  
*"1. Musculoskeletal examination and treatments*  
*2. CHF evaluation and treatments*  
*3. Cardiovascular diseases and treatments*  
*4. Preventative care*  
*5. Geriatric assessment and preventative care"*  
*"1. Workshop on how to put together a solid powerpoint presentation that is not too wordy, is appealing to the eye, and provides an effective educational experience to the attendee/student. Consideration for number of slides needed to fill the time slot; use of charts, graphs, photos; and other considerations in public speaking.*  
*2. Treatment of diabetes/hyperglycemia in the transplant population: solid organ vs stem cell populations.*  
*3. More overall diabetes and opioid updates.*  
*4. What to do with insulins, insulin pumps, non-insulin injectables, oral agents in the inpt and outpt setting when pts are NPO for various procedures and surgeries, illnesses, religious observances, etc."*  
*1.pediatric dermatology/2. food allergy-recognition and treatment*  
*2018 had great topics, more of the same! I always appreciate reviewing updated practice guidelines and interactive lectures*  
*acute care topics; cardiac, pulmonary*  
*Acute kidney injury*  
*Acute Kidney Injury*  
*"Addressing racial bias and disparities in health care.*  
*Rural health care in Wisconsin - issues specific to small, rural practices.*  
*Creating and implementing clinical practices that are accommodating of people of size.*  
*Anti-choice legislation and policy in Wisconsin - what is happening and how we can address it.*  
*Addressing opioid crisis - this should happen every year."*  
*Advanced Heart including LVAD and Transplant*  
*Advanced Parkinsons. Community based Palliative care.*  
*"advanced suture lab*  
*skills session such as arthrocentesis*  
*evaluating complications of the transplant patient*  
*evaluation of GI disorders IBS vs IBD"*  
*Advanced Wound Care, Mental health*  
*Again, continue with pediatric information, women's health needs.*  
*Always psyc and would like to see more on childhood and adult obesity and diabetes treatments, education and motivation that can help our patients.*  
*"Anemias*  
*Opioids (again)*  
*New Diabetes drugs"*  
*"Antibiotic use in typica conditions*  
*Rheum*  
*Contraception options"*  
*any*  
*arrhythmia issues and managment*  
*"As an anesthesia provider, it would be great to have someone discuss the topic of a patient on suboxone type meds that is scheduled for elective surgey. I rely on the PCP to manage these people, either discontinue or leave on and it would be great if there was some dialogue between CRNA and NP about the type of surgery, length of recovery and some guidelines about how CRNA can best serve the patient in terms of staying on course. I know this course is mostly about NP's but I really would like to know how to help the patient and frankly the physicians aren't often managing the patient preop (no suboxone experience) or they don't return my call on the preop visit so the patients come in still on the drug and we have to try to over-prescribe if we can't manage it with other drugs.*

Wisconsin Nurses Association – Continuing Nursing Education Program  
**2018 APRN Forum Pharmacology & Clinical Update**  
**COMPILED OVERALL CONFERENCE EVALUATION RESULTS**  
Monona Terrace, Madison

*What are the benefits and drawbacks of keeping all four APNP groups together to fight politically? Who doesn't want it? Who truly benefits from collaboration (really) to manage their patients?*  
*I ask this because I feel like I could bring in more CRNA's for the credits if there were a few more topics that might appeal just a tad more to us in this area. I am so in awe of the prescriptive talents of the NPs after listening to the questions posed after the lectures.*  
*Also, as the drugs evolve, always appreciate the topics of bridging, who needs it, reversal, etc."*  
*Asthma or COPD update, Narcolepsy vs Idiopathic Hypersomnia, Sarcoidosis, treatment of insomnia*  
*"asthma/copd*  
*htn management"*  
*at NAPNAP there was a good presentation on E-cig and vaping*  
*Back pain*  
*"billing/charting*  
*issues in a frail elderly institutionalized population- skilled nursing facilities*  
*orthopedic assessment"*  
*"Bladder incontinence--overflow and stress--treatment options*  
*osteoporosis*  
*eating disorders*  
*Bipolar I and II*  
*new treatments for Rheumatoid arthritis"*  
*bph rx in older men*  
*"Breaking down PFTs and managing people for asthma vs COPD vs both*  
*more opioid and controlled substance information"*  
*Breast cancer screening in low income populations.*  
*"Bring back Christina Funk to discuss obesity or someone else to discuss obesity, maybe for a plenary session (great idea to have a plenary session on Saturday, BTW!). We need the proper tools in order to treat obesity across the clinical spectrum, in everyone!*  
*Anything on rheumatology in primary care--early identification, initial workup, specifics on lupus and RA, etc.*  
*Anything about management of fibromyalgia and chronic fatigue syndrome"*  
*"burnout*  
*vertigo/dizziness"*  
*Can not think of one.*  
*cancer prevention*  
*"Cardiac & pulmonary disease & treatment*  
*Update on health maintenance & cancer screening guidelines (i.e. PAP, prostate cancer screening, mammograms (best screening for patient's breast tissue, etc)."*  
*Cardiac topics-- Coronary artery disease*  
*care of the patients in long term care facilities*  
*"Causes and treatments of sleep apnea in young children - not infants*  
*Insomnia evaluation and treatment after sleep hygiene doesn't work. Discuss medications especially those that are not addicting. What do you do when the medication prescribed ""hypes them up.""*  
*PCP tools to diagnose adult ADD, ADHD."*  
*"CHF Management*  
*Developing treatment plans for patients with comorbidities ( CHF, DM, HTN, CKD)*  
*Geriatric issues and practice changes"*  
*Chronic headaches and migraine eval and tx.*  
*chronic pain*  
*"Chronic pain management with focus on non opioids*  
*Opioid epidemic and changing prescribing practices*  
*Substance abuse disorder management*  
*More on diabetes medication classes"*  
*"Chronic pain management*  
*Ortho exams*  
*Abdominal exams/disease"*  
*Chronic renal disease and what antihypertensives to use*  
*Clinical Efficiencies- possibly including EHR*  
*"Common orthopedic injuries in primary care and helpful exam techniques.*  
*Transgender care"*  
*"complex cases in primary practice*  
*More talks on geriatric medicine"*  
*Continue talking about opioid prescribing.*  
*continue to offer behavioral health related topics*  
*"continue to offer courses related to opioids, etc to meet state requirements for DEA renewal.*

Wisconsin Nurses Association – Continuing Nursing Education Program  
**2018 APRN Forum Pharmacology & Clinical Update**  
**COMPILED OVERALL CONFERENCE EVALUATION RESULTS**  
Monona Terrace, Madison

*alzheimier & dementia - how to prevent. current treatment options."*  
*Continue with APRN practice and forum issues.*  
*continue with drug abuse, what to look for, what to prescribe, etc.*  
*continue with mental health*  
*Continue with psych classes as this seems to be a big need. Also maybe some more primary care stuff like going over the newer guidelines in*  
*BP and other common disorders like hyperlipidemia, diabetes, etc.*  
*"Continued antimiceobial information*  
*Advanced derm"*  
*Continued behavioral health, as emerging problem across settings. More gerontology to meet emerging needs*  
*continued dialogue on opioids*  
*"Continued opioid issues*  
*Mindfulness*  
*Dr Jeremy Smieth -- excellent brief overview of several meds / changes we should be aware of"*  
*Contracts and Billing*  
*Could include cardiology updates*  
*Cultural competency in diabetes and other chronic disease management.*  
*"Current hypertension guidelines*  
*Common dermatology diagnosis and treatments."*  
*current practice guidelines review*  
*Dealing with chronic pain issues--back pain, musculoskeletal pain issues...maybe have a PT talk...?*  
*Delerium, not as common dementias and treatments/research related, geriatric treatments*  
*"Dementia*  
*Cardiomyopathy*  
*ESRD*  
*COPD"*  
*depression medications for peditrics and men (with regard to sexual dysfunction)*  
*"Depression with using current modulaties.*  
*Continue diabetes presentations, always great topic*  
*More basic case studies focusing what meds to use with using octet defects and use the ACE treatment recommendations*  
*diabetes: dealing with diabetes during pregnancy.*  
*Diabetes: pediatric diabetes*  
*Diabetes: hospital diabetes*  
*Prediabetes diabetes with utilizing ACE recommendations*  
*hypertension presentation*  
*hyperlipidemia with newer medications"*  
*Derm, bariatrics*  
*Dermatology*  
*Dermatology lectures----acne and psoriasis--current treatment recommendations*  
*"Diabetes care*  
*Osteoporosis"*  
*"Diabetes is always a good topic*  
*CHF refresher*  
*COPD"*  
*diabetes management, peripheral edema,*  
*"Diabetes updates, hypertension updates, dyslipidemia updates.*  
*Abdominal pain in the clinic"*  
*diabetes, obesity, orthopedics, differential diagnosis, laboratory findings.*  
*Diabetic management*  
*"diagnosis and treatment of bipolar disorder, including mixed features*  
*updates on psychotropic medications"*  
*different pain syndromes and treatments in pediatric population*  
*Discussion about available resources for Wisconsin parents and their children (i.e. employment, housing, adaptive equipment needs, etc).*  
*"discussion on how compensation and benefits in Wisconsin compare to other states*  
*continue with pediatric options which were again excellent this year"*  
*discussions regarding alternative medicines and how to approach use of these*  
*"DMARDS and other Rheumatologic drugs/interactions*  
*Metabolism"*  
*"DMARDS/biologics*  
*idiopathic pulmonary fibrosis"*  
*Early Intervention for Adolescent Psychosis*

Wisconsin Nurses Association – Continuing Nursing Education Program  
**2018 APRN Forum Pharmacology & Clinical Update**  
**COMPILED OVERALL CONFERENCE EVALUATION RESULTS**  
Monona Terrace, Madison

eating disorders, IBS, top 10 pediatric disorders requiring immediate referral/treatment, continued joint sessions  
employment contracts/palliative care/delirium in nursing home  
Endocrinology and hypothyroidism/hyper cases, Addison's  
Erectile dysfunction, CHF management, how to taper benzos and/or opioids  
Eval /Tx of Bipolar Dis.  
evaluation of joint complaints such as one for knee , one for shoulder, wrists etc... - imaging crash course - when imaging for what conditions  
Evaluation of joint pains. What to do when imaging, labs negative, OA vs RA, etc.  
for the acute care track, I think we need to have ID topics every year of some variety or another. We have had previous Bugs and drugs, ABx  
stewardship discussion that were all quite good. Diabetes has not been a topic for a few years. Perhaps post op gastric bypass medical care  
and management as well as transitioning back to primary care. I would like to see skills workshops offered throughout the conference.  
Many of the national conferences do this.  
Functional Medicine, Integrative Medicine- patients are always asking!  
genetic cancer syndromes  
genetics  
Good variety  
Great job with the different foci for the break out tracks!  
Greatest hits again! Great information.  
Gut microbe and mental health, more about obesity and nutrition  
Heart failure management and watchman devices  
Herb and supplements in specific doses, reputable brands etc for conditions  
Holistic/Alternative medicine to promote health  
"Homeopathic/alternative therapy medicine presentation. Possibly presenting what therapies are evidence based.  
health promotion topic.  
Asthma management"  
Hospice or palliative care topics  
"Hospice/Palliation  
Antibiotic resistance and management  
Diabetic medications - new oral agents"  
"hospice/palliative care  
concierge services  
healthy eating  
healthy GI  
nephrology"  
How to handle increase workload, more hours, more demand.  
How to implement NP role for the decision making process for clinical practice in a male dominated hierarchy.  
"How to manage acute pain in chronic pain patients  
Methadone and suboxone  
psychedelics in treatment of PTSD"  
how to work with young people who have been sexually abused and have PTSD and emotional issues  
HTN, diabetes management, cholesterol management  
Hyperlipidemia & HTN management, COPD/asthma management & guidelines, more rheumatology information for outpatient providers,  
hyperlipidemia management with options of newer agents  
hypertension management, dialysis patients, legal components (what to do if in malpractice case, how to avoid malpractice, how to stay in  
line with board of nursing, etc)  
I could use a basic x-ray session (including a chest X-ray interpretation). We never learned anything about X-rays in school and I've only been  
in practice for just over a year. I do plan on taking the EKG course in the future. I also heard great feedback on the dementia session this  
year so I would be interested to see that in the future! I would also love to see another "Greatest Hits" session with practice changing  
studies from the next year.  
I did not go to Dr. Maki's talk this year. however, anything he would like to talk about pertaining to infectious disease would be great. He is a  
dynamic and knowledgeable speaker.  
I enjoy the acute care sessions. I practice in a rural environment and do not have access to specialty cardiology very easily. A frequent  
admission is Afib and other rhythm that we are using diltiazem and such as drips. Just wondering about times when it seems it not working.  
How to choose next drug and the stabilization process for transfer.  
I like the different tracks for womens health primary care etc  
I like the tick borne illness presentation, good timing considering ticks are emerging now.  
I liked all the psychiatric-mental health options. Please continue to offer.  
I really like the opening mindfulness and stress reduction strategies and think it would be great to have something like that each year.  
"I think some presenters regarding the diabetes quickly changing technology with closed loop pumps, CGM updates - this is changing the  
practice of type 1 diabetes  
continued updates with women's health

Wisconsin Nurses Association – Continuing Nursing Education Program  
**2018 APRN Forum Pharmacology & Clinical Update**  
**COMPILED OVERALL CONFERENCE EVALUATION RESULTS**  
Monona Terrace, Madison

*EHR - updates in maximizing features - outcomes and other ways to assist providers with timely documentation. How to get the health record work for the provider and assist the patient in optimizing care."*

*"I was very pleased with the increase in pediatric pharmacology content this year compared to when I attended in the past. however, I wish there was more! It would be nice to have a wide variety of pediatric options to choose from including more common diagnoses/treatment as well as the teen/mental health issues which we often refer out to specialists.*

*I also felt there was too much focus/too many lectures regarding opiates-- I know this is a growing concern but 1 lecture on opiates is enough- I know there was a 2nd peds options as well as other opiate options within the conference.*

*It would be nice to break up the most common pediatric diagnoses/pharmacology into smaller groups (too much to cover 10 in one session)." I would like*

*I would like Jennifer Fiegel Newlon speak on more psychiatric management in primary care. Very beneficial presentation/speaker.*

*I would like return of the EKG presentation; Opioid presentation*

*I would like to hear more on the prescribing of opiates.*

*I would like to see a general psychiatry overview for the most common illnesses.*

*I would like to see additional acute care issues, maybe something related to trauma.*

*I would like to see something specific that we can do as a group/individual to eliminate the need for a collaborating physical signature on Respiratory, home health, Podiatry, etc orders. this seems to be talked about and talked about, but not making any progress.*

*I would love to take the suture class. It filled up before I had a chance to register. Great conference.*

*ICU topics, sepsis*

*ID-- differences between meningitis, encephalitis and the different types and treatments.*

*I'd like to see Dr Babu come back and discuss more psychopharmacology and give possible case presentations tying his content into real examples that can be applied in clinical practice.*

*"Immunizations*

*HELLP syndrome"*

*Immunotherapies in clinical practice.*

*Implications for hematuria evaluation for the primary care provider.*

*"In depth wound management*

*Pre operative exams*

*Cardiac evaluation in early heart disease using EKG, echocardiogram, and what to watch for tin the future.*

*Class B Personality disorders and how to deal with them."*

*"Incontinence!*

*How to evaluate and treat for men and women.*

*Urinary primarily - then fecal secondary.*

*Casting and Splinting, Reading X-rays, bring in some Orthopedic person to teach!"*

*infertility*

*"Issues in long term care and housing transitions for the elderly*

*Health care financing, especially for those with low or limited/fixed incomes, and the elderly, and government programs for health care financing (Medicaid, Medicare).*

*Issues in rural health, and how delivering health care in a rural setting is different from doing so in an urban setting."*

*Joint evaluations (shoulder, knee)*

*"-joint injections*

*-I noticed I picked topics with titles like top ten, or 8 great, focusing on a certain subject area and it's top diagnoses is always something I'd be interested in (top 5 GYN concerns, etc)--quick and easy review/practice updates/clinical pearls.*

*-DM meds"*

*just continue with a variety*

*Keep us updated on what's going on legislatively*

*LAA occlusion device*

*latest evidence based practices*

*Life after stroke or stroke work up in primary care. Acute care 101? (like IVF, acute CHF AKI or COPD exacerbation)*

*Like topics that are adult/gero acute care.*

*Long term care, palliative care, pulmonary fibrosis, transplant,*

*Lupus*

*"Lyme Disease Conspiracy Theorists*

*Tubal ligation for women that never want children, addressing bias and overall approach*

*Evaluating Work Injuries/Workers' Compensation"*

*Management of anemia, identifying dementia and managing different types, understanding and uses of CBD oil, sleep disturbances and sleep studies*

*"Management of hypogonadism in primary care.*

*Additional diagnostic imaging topics."*

*managing inflammatory bowel disease; a review of biologic therapies like Humira, Remicade, Cimzia*

*managing patient panels - what does the evidence say for how much dictation, indirect care an NP should have?*

Wisconsin Nurses Association – Continuing Nursing Education Program  
**2018 APRN Forum Pharmacology & Clinical Update**  
**COMPILED OVERALL CONFERENCE EVALUATION RESULTS**  
Monona Terrace, Madison

*maybe a session on HF medications*  
*mental health*  
*Mental health in pediatrics and adults, Obesity and health and wellness initiatives. Anything that is new to practice.*  
*mental health issues are always a good review*  
*"Migraine h/a's*  
*Transgender care"*  
*"Migraine treatment*  
*mental health and prescribing"*  
*More acute care topics. Managing acute delirium, polypharmacy in acutely ill patients, etc*  
*more cardiac*  
*"More cardiac related topics like heart failure in outpt setting.*  
*PFT interpretation"*  
*More clinical. Less opioids.*  
*"More diabetes update*  
*More about Low dose naltrexone*  
*More EKG's and imaging such as ECHO, Stress Test, ETC"*  
*"more diabetes*  
*more cardiovascular medicine*  
*more geriatric medicine*  
*more nutritional medicine"*  
*more geriatric options and transgender health*  
*More geriatric topics*  
*More geriatrics*  
*More geriatrics- management of heart failure, QOL discussions, de-prescribing*  
*More geriatrics. I work in long term care and would like to have more than basic information presented on dementias and Parkinson's Disease. Specifically management of dementia/PD psychosis...both pharmacologic and non-pharmacologic interventions. What does the Primary Care provider have in her toolbox in the clinic setting to keep the patient functional at home to prevent the patient from coming to long term care? Are basic plans in place and being addressed at time of diagnosis, such as having advance directives complete?*  
*More GI speakers*  
*More Holistic practices*  
*More Infectious Diseases. Update on Primary care Guidelines for Clinicians in specialties.*  
*More information on benzodiazepines and older persons, the dangers and adverse consequences*  
*More information on LDN*  
*More information on the profession on the second day instead of the first*  
*More inpatient topics, really like the ICU delirium talk*  
*"More mental health options with more time to discuss*  
*More adolescent health applicable to primary care vs gynecology/student health"*  
*More mental health. PTSD o*  
*More of the same and any updates to practice*  
*More on controlled sub.*  
*More on Infection, electrolytes; this year did have a great amount different topics*  
*More on mental health*  
*More on Pain Management*  
*More opioid training*  
*more peds physical health*  
*more research driven practice pearls*  
*More substance use/abuse topics.*  
*More topics applicable to acute care.*  
*More topics about advocating and engaging with the legislature*  
*More topics on the Opiate Crisis and on Mental Health, I really liked the Poster presentations and they should have dedicated time to see them next year instead of just during breaks.*  
*More topics regarding mental health.*  
*More variety of topics with high pharm credits. Continue having opioid credits for prescribers now need those as separate credits.*  
*More women's health issues. Billing and coding issues.*  
*"more Women's Health.*  
*Endocrine?*  
*more practice pearls"*  
*more wound management, neuro and cardiac content, would also like to see more integrative medicine*  
*"Motivational interviewing*  
*Trauma-sensitive care*

Wisconsin Nurses Association – Continuing Nursing Education Program  
**2018 APRN Forum Pharmacology & Clinical Update**  
**COMPILED OVERALL CONFERENCE EVALUATION RESULTS**  
Monona Terrace, Madison

*Dementia capable care"*  
*"musculoskeletal review*  
*general HP guideines*  
*preoperative clearance- what does this mean to everyone?"*  
*"My focus is primary care pediatrics as a PNP. I would like to see a presentation on identification of child abuse. Dr. Iniquez and Dr. Caroline Nash with the Marshfield Clinic have a very good presentation on identification of bruising associated with child abuse. I would also like to see a presentation on common breastfeeding challenges. I know the ""milk mob"" is located in Madison and sometimes they will coordinate presentations for professionals. Also Dr. Jenny Thompson is a good resource."*  
*neurological evaluation or other specialized examination for new APRNs and update for others.*  
*"new blood pressure guidelines*  
*Better skills presentations-want the WHOLE process"*  
*New medications, medication classes. Smoking cessation/counseling teens.*  
*New research in the past year to change practice*  
*Next year I would like to do the IUD and nexplanon sessions. Anything primary care related is great.*  
*Maybe a oncology provider talking about oncology specific therapies and their side effects that Primary car may see. (new biologics)*  
*nothing*  
*"NP's in a case management roll. How does that work? Who's doing what? Is this just increasing health care costs or does it truly make a difference in health care outcomes?"*  
*Opioid crisis: 1. weeding through multiple addiction specialists & determining how reputable they are. 2. training PCP's to prescribe small amount of narcotics for acute needs. Rec's of which ones are approp to prescribe. Present case studies on when no narcotics are rec'd in acute situations & what to use.*  
*Repeat the ""8 greatest hits"" with the most recent research that will chg our practice.*  
*NP's & MD's in cash clinics. How does that work financially & do the providers find it a more enjoyable & rewarding practice? Do they find their patients are more likely to follow medical rec's?"*  
*National & international focus on health care regarding: where are we heading? What are the scientific & economic rec's for covering health care in the US? Is there any thought to untying the connection between providing care based on evidence based research & the billing mechanisms currently in place? (It seems there is more pressure to choose the correct ICD10 code that relates to ""more money"". The billing focus is so interconnected in the EHR charting, that it's difficult to put in or extract the individual patient & their needs.)"*  
*"Nurses working in harmony with all of the social generations.*  
*Productive and non productive social media."*  
*obesity*  
*obesity in children*  
*"obesity in children*  
*Review of the new HTN guidelines*  
*opioid management again"*  
*Occupational Health*  
*"Occupational Health for worker's comp. how it impacts providers, employers, employees. What is needed for documentation. orthoped assessments of joints such as shoulders, knees, and back. when mri's or Mra's are required. medications, etc."*  
*Offer a quick text document for what absolutely MUST be documented for opioid management in patients who are taking narcotics. Also, what MUST be documented for patients taking other controlled substances.*  
*Oncology related topics.*  
*Oncology topics - updates*  
*ongoing pain management and infectious disease*  
*"Opiod management*  
*Behavior health management in primary care*  
*Suture refresher course"*  
*"Opioids are always a great topic to have year after year.*  
*Treatment of UTIs in primary care is a great topic."*  
*opioids, imaging (reading x-rays, etc), new diabetic medications.*  
*Ortho for family practice*  
*"Orthopedic conditions*  
*Challenges practicing as a NP"*  
*Orthopedic topics are always helpful treatment and assessment.*  
*"Orthopedic topics*  
*Preventive medicine"*  
*orthopedic treatments for common ailments.*  
*Orthopedics for primary care*  
*Orthopedics, ENT*  
*"Osteopenia/osteoporosis and proper/new treatments/recommendations.*  
*Colposcopy training!!"*

Wisconsin Nurses Association – Continuing Nursing Education Program  
**2018 APRN Forum Pharmacology & Clinical Update**  
**COMPILED OVERALL CONFERENCE EVALUATION RESULTS**  
Monona Terrace, Madison

osteoporosis treatment and recommendations. how often to dexa scan. when is treatment change needed. how long is treatment needed  
otitis media  
over utilization by patients of the ER and Urgent Care  
Palliative Care related symptom control and advanced care planning.  
Palliative care, effective dementia behavioral therapies  
"Palliative Care/Having difficult conversations  
Blood Pressure Updates/Discuss medications  
Reading CT scans  
Cancer Screening  
Care of patient after surgery"  
Pediatric concussion, not necessarily sports concussion and medication management or pediatric headache management.  
pediatric content  
Pediatrics- Neonatal Abstinence Syndrome, Late Preterm Infant/Newborns, Special Care Nursery  
peds autism screening, diagnosis, and management/treatment  
peds is always good. also new upcoming medications.  
perhaps a colposcopy review for those of us who do it,, along with HPV update. there is great speaker from Drexel U in Philadelphia, A NP.  
pituitary tumor  
"Please address the legislative changes that occur over the year- ie. if new laws passed or wording changed to allow APRNs to sign home health orders, code status, DME supplies, ect.  
Having these changes in writing would be very helpful!"  
Please continue to include topics relating to NPs who practice in acute care.  
Podiatry  
poly pharmacy, any helpful ideas on how to manage.  
Polypharmacy in seniors.  
"Pre conference on diabetes management - always changing  
Management of COPD in Outpt setting - both maintenance and exacerbation  
Understanding immunotherapy in cancer care - many misconceptions and fears by practitioners"  
"Precepting tips, managing your practice while precepting  
More about interdisciplinary education and team approach to care  
Low-dose naltrexone for chronic pain in adults  
Alternative/complementary/naturopathy  
Assertive communication  
Work/life balance"  
"Pre-operative optimization  
I felt that many of the sessions were focused on inpatient so some more outpatient options as well"  
presentation for screening guidelines for colon cancer  
Preventing burnout  
Preventing Burnout  
primary care for patients with disabilities such as MS or spinal cord injury  
psychology techniques, cognitive behavioral health etc: working with patients with chronic disease (such as pain) ways to assist.  
Reliable holistic/CAM  
respiratory issues in children.  
Return of Dr Smith - same or different greatest hits  
Review of the management of bipolar disorder or schizophrenia.  
Reviewing th new blood pressure guidelines.  
Rheumatology basics for primary care, interpreting pfts/determining need for further testing, radiology interpretation  
"Rheumatology for out-patient  
Really enjoy sessions that have ""top 10 practice recommendations in regards to ..."" - such as the peds one and the greatest studies that were done this year"  
"Rheumatology for primary care  
ASCVD Risk and preventive management"  
safe opioid prescribing  
Screening guidelines/immunizatins  
See below  
"seizure disorder in primary care.  
Hepatitis C treatment in primary care.  
LGBT/Transgender care in primary care."  
Seizures-AED management, neurology topics  
serotonin syndrome would be helpful to learn more about  
similar

Wisconsin Nurses Association – Continuing Nursing Education Program  
**2018 APRN Forum Pharmacology & Clinical Update**  
**COMPILED OVERALL CONFERENCE EVALUATION RESULTS**  
Monona Terrace, Madison

*Sleep medicine- I work in sleep medicine and talking with participants over the course of the 3 days people didn't seem to know much about it and I notice this a lot in my practice. Primary care providers want to know some information to better serve/ refer their patients especially in regards to sleep apnea and insomnia.*

*Some sessions specific to geriatrics/sub-acute/LTC.*

*"specific discussion about anxiety, education to primary care to not start on benzo's and send to psych. Importance of therapy, life style changes*

*updates of medications for mental health what is coming down the road. How to attract more APNP's into mental health help with shortage"*

*sports injuries*

*Sports injuries.*

*Spotting and dealing with personality disorders in primary care that may be undiagnosed.*

*"STIs*

*Pediatric endocrine disorders - other than diabetes"*

*substance abuse*

*Surgical Site Infection*

*Taking care of well geriatric patients*

*The 'ins & outs' of setting up your own, independent NP practice!*

*The over-diagnosing of bipolar disorder and how this diagnosis can be confused with other mental health issues.*

*The Thursday conference has been the same for 8+ years, its time to change up EKG and imaging.*

*Therapeutic communication techniques when working with behavioral health patients.*

*Thought the presenters were great this year.*

*Top 10 most common illness in adult primary care*

*Top endocrinology conditions and their management, kidney failure/function*

*Topics on musculoskeletal work place injuries and providing care.*

*topics on mental health*

*Transgender issues/transition medications*

*transitional care, rehab care, LTC, hospice*

*"Trauma Informed Care and administering the ACES questionnaire.*

*Pharmacogenomics and application of testing in clinic"*

*Trauma informed care. Human Trafficking (Sexual Exploitation of Children). Health Care for children on the Autism spectrum including dx., resources, pharmacological management. Fetal Alcohol syndrome*

*"Treatment of atrial fibrillation*

*Insomnia"*

*"treatment of bipolar disorder in primary care*

*gluten sensitivity and intolerance"*

*"Treatment of insomnia--natural & medication*

*endometriosis*

*human trafficking and what to look for"*

*"Unfortunately, there were several sessions that I would have liked to attend that were at the same times as others. I had to pick which would be most clinically relevant.*

*Managing ADHD in adults*

*Endocrinology topics*

*PCOS management*

*Behavioral health, updates with medication"*

*update on diabetes, HTN management and other primary care issues for those of us with FNP not practicing in primary care*

*Updates on antibiotics, me too movement in the workplace, how to negotiate a fair work contract, how to interview to get what you need.*

*Updates regarding CHF or COPD treatments.*

*Use of DOACs.*

*"Utilizing the new blood pressure guidelines.*

*Navigating thyroid disease."*

*UTI's, OCP selection support (when also wanting to target mood, acne etc) , SSRI selection for the patient's symptom profile.*

*viral hepatitis/eval of elevated LFTs, addiction (ETOH and drug), IBD (crohn's/Uc),*

*vulvar disorders*

*What is new in treating depression. Continue updates on opioids. Sleep issues and treatment.*

*womens health*

*Women's health*

*women's health*

*Women's health and prescribing hormone medications including birth control pills.*

*"Work life balance. Tricks from people who have overcome burnout and how they did it. How to be the best apnp you can be without losing your health, family, other interests.*

*Conflict and difficult colleague or patient management— case studies on what to do or say in difficult situations."*

Wisconsin Nurses Association – Continuing Nursing Education Program  
**2018 APRN Forum Pharmacology & Clinical Update**  
COMPILED OVERALL CONFERENCE EVALUATION RESULTS  
Monona Terrace, Madison

*"workplace and patient communication, bullying.  
provider burn out, overwork/unrealistic expectations"  
Workshops offered on Friday/Saturday, as cannot be away from my practice for three full days.  
Would love some new topics on Thursday. There have been the same topics on Thursdays for several years.  
Would love to see the preceptor presentation, had to attend other sessions. Please offer it again!  
wound care  
"Wound care  
Heart failure  
COPD"  
Xrays (they had this previously and I loved the lecture)*

Wisconsin Nurses Association – Continuing Nursing Education Program  
**2018 APRN Forum Pharmacology & Clinical Update**  
**COMPILED OVERALL CONFERENCE EVALUATION RESULTS**  
 Monona Terrace, Madison

**Are there presenters that you would recommend for particular topics? Please provide contact information or place of employment.**

"1. Dr. Louise Smyth or Dr. Couri, functional medicine, Weston WI 715 298-5991  
 2. Dr. Ann Smith, dermatologist (retired now, might be available) Marshfield WI  
 3. Dr. Todd Hostettler, allergist, excellent - Aspirus system. Multiple good topics, have heard him before."  
 "Alis Panzera DrNP  
 akp39@drexel.edu  
 nursing.education@drexel.edu"  
 Amy Brinza - Reedsburg Area Medical Center (sleep medicine)  
 "Bring DR Kay Theyeri for Mindfulness for the larger conference  
 Dr Jeremy Smith"  
 Check with Dr Glen Huth Appleton Cardiology  
 continue opioid info  
 Dennis Maki, MD is known worldwide not only from his presentations but from his numerous publications. Giving more talks on infection (i.e. central line, dialysis, sepsis, etc) and/or critical care medicine would be great.  
 Dermot More O'Ferrall MD with Advanced Pain Management for pain management or opioid prescribing. doferrall@wi.rr.com  
 Dr Cody for STIs  
 Dr. Angela Rabbitt from Children's hospital is an expert on the medical response to victims of Trafficking. You could contact her through the CAPS program at 414-266-2090  
 "Dr. Christine Heisler and I (Angela Sergeant, NP) would be interested in talking on the topic of Enhanced Recovery after Surgery. We are part of the UW Urogynecology Practice. I think this would be a great topic for anyone working in a surgical specialty and aligns nicely with the ongoing importance of reduced narcotic use.  
 If you have any interest in this, you can contact me at angiesergeant@gmail.com."  
 Dr. Josh Babu (he touched on this subject in his presentation)  
 Dr. Nathan Chin is really great with dementia information (UW)  
 Dr. Ruddy - naturopathy; ruddy@ghcscw.com  
 Dr. Shivani Garg, director of the new UW Health lupus multidisciplinary clinic, could help to coordinate a panel discussion on lupus.  
 I love the CXR interpretation guy from years past. I don't know if he was here this year on Thursday but I could use a refresher next year.  
 I would be happy to present a session on migraines- maybe a title like: Migraine Management: Taming the Beast, or Migraine Management: Helping Patients Take Control (Mary Beck Metzger, NP)  
 "I would love it if our keynote speakers were APRNs.  
 Excellent speakers - but as an APRN conference, let's highlight the excellence of our APRN colleagues."  
 Is there a political leader/consultant that would be willing to come and talk about making political action happen.  
 Jennifer Fiegel-Newlon  
 Keep the on Precision Medication Management and invite Joshua Babu, MD back again, he was excellent  
 Michelle Schmitz, infection control practitioner, UW Hospital-SSI  
 More cardiology focus.  
 More topics during Friday and Saturday on commons dermatologic disorders and management.  
 Paula Cody, Julie Banda, Laurie Newton  
 "Possibly in future I would consider doing diabetes presentation  
 Past 13 yrs , My practice is outpatient adult diabetes." (Sherri Szczepanski, APNP - Sherri.Szczepanski@prevea.com)  
 Tammy Langhoff - tamara.langhoff@ssmhealth.com in fond du lac or the founder of their clinic. Agnesian Healthcare Dr. Treffert who founded the Treffert Center.  
 "There is always new information on diabetes  
 drug use in teens (I know it was done this year), it is always changing  
 teaching sexual health to youth with disabilities (physical, cognitive)"  
 Toby Campbell (UW) to discuss palliative care/having difficult conversations  
 Toby Campbell MD from UW Health for education about communication and oncology subjects.  
 Toni Kessler or Marilyn Sincaban MD for hospice/palliative care 414-257-2600  
 "UW Alzheimer institute  
 Robert Smith Richland Center Hospital  
 Phileomena Poole GNP Richland Center Hospital"  
 "What stress test to choose and when-- primary care approach--  
 Teresa Wiersma NP (Randolph Community Clinic-- 920-326-5060)"

Wisconsin Nurses Association – Continuing Nursing Education Program  
**2018 APRN Forum Pharmacology & Clinical Update**  
**COMPILED OVERALL CONFERENCE EVALUATION RESULTS**  
Monona Terrace, Madison

**What suggestions do you have for improving this conference?**

- "1. For breakfast have more fruit, yogurt, protein*
- 2. Enjoy the different areas conferences have been located. Perhaps try mid WI once in a while near Wausau or Stevens Point area (i.e. Holiday Inn Stevens Point Convention Center if space would allow)"*
- "1. Have more (and variety) raffle items, if able. To increase interest and opportunity for attendees to buy more raffle tickets to benefit the Mary Barker Scholarship Fund.*
- 2. Include the next year's date and location for the APRN Forum in the current brochure This will help attendees plan ahead and also heighten interest.*
- 3. Saturday morning's breakfast items were great choices. Should provide same for Friday morning."*
- adding Wednesday night to the block of rooms for lower rate*
- "All the presenters need to have their presentations available online before the start of the conference, for us who like to print them and take notes.*
- The Pharmacology hours did not match the program 8D.*
- The online schedule needs more information on start time such as registration and breakfast. This was on the program once you got to the conference but not on the online schedule."*
- Although many of the APRNs on the planning panel practice part-time, it sometimes feels as though they are still insulated in the world of academia. Those of us from areas outside of Milwaukee and Madison sometimes feel as though our issues are invisible and unrelatable.*
- Always a good conference. As a CNS in a hospital, I'm happy to see topics that are beyond primary care.*
- Always a great conference. I did like the breakfast on Saturday, there does seem to be more low carbohydrate choices.*
- Always awesome every year - thank you*
- Always very well done.*
- As mentioned above, parking.*
- Be sure to include more details about the conference on the flyer itself. I looked high and low for details about start/stop times and meals.*
- Better food selection for the cost of conference...particularly Friday am breakfast. Wasted food at Friday lunch when sandwiches placed at tables prior to people sitting down. And then no box wed lunch, at least, at the end is disappointing as well.*
- Can't think of anything. Great learning experience as always. I love the variety and presenters are outstanding most of the time. Maybe more question and answer time put into sessions.*
- continue DNP poster presentations*
- continue to hold site in Madison, or perhaps consider Lacrosse as a future site for the conference.*
- Continue to offer the varied and timely topics that are relevant to both inpt and outpt NP practices.*
- "Could you have 2 large electronic boards up at the WNA table? One would have the day's time and events (so we realize that the pharmacy reps are only there for 4 hours) and the other with a live map on it for the location of each session on that floor level. I have been to other conferences around the country where the hotels have live info boards for attendees, instead of trying to find a person who knows where you go for which session, or have to refer to your conference brochure (which you left in the car/hotel room) for the info.*
- Hopefully that can help."*
- Decrease break time to get out earlier on Friday.*
- Decrease cost*
- "Did not see anywhere before the conference when it was timed to start. Arrived way too early. Another participant felt the same. Looked all over for a start time. Saw 8 on a calendar at WNA and timed for that which was not accurate.*
- Could there be large placards at the end of halls designating what is down the hall so that we don't have to wander to find the rooms"*
- doing the APRN modernization act update on Friday when there are more attendees to get more support. loved the snacks this year and the breakfast items with healthy options.*
- Don't have an agenda over lunch.*
- Earlier start Friday to be done at 5.*
- Every year I get a lot out of this conference.*
- Friday am breakfast with healthy foods not carbs*
- "Friday breakfast have some boiled eggs or I'll just bring my own. Too many carbs!*
- should have opiate training that meets requirements for opiate training every year*
- keep best 8-10 practice changing studies every year*
- anyone interested in update on About Health and look at metrics of the future/ trends in care. Billing. Codes."*
- great conference*
- great conference, thank you.*
- Great job as always.*
- Great job this year. I'm actually glad that there wasn't anything structured this year on Friday night, especially in Madison. it was nice to meet up with people and do my own thing, especially since we were so close to downtown this year. So many places to go and things to do.*
- great job. I like the legislature updates.*
- Have 20 -30 minute sessions and keep everyone together so we can hear all the presentations.*
- Have dedicated time to see the posters and talk to the presenters, instead of just during breaks. This conference keeps getting better every year!*
- Hot breakfast every day would be appreciated.*

Wisconsin Nurses Association – Continuing Nursing Education Program  
**2018 APRN Forum Pharmacology & Clinical Update**  
**COMPILED OVERALL CONFERENCE EVALUATION RESULTS**  
Monona Terrace, Madison

*how about having the venue mid-state or up north? how about putting it in a place where the traffic isn't a nightmare??  
I do not have any at this time.  
"I feel there is too much wasted down time (ie. if there is allotted time from 7-8:45am to view exhibits, why additional 45 min from 10-10:45);  
lunch period is too long from 12-1:15. Why are there two breaks in the afternoon? Start earlier and keep it moving along to earn more CEUs.  
There is no recognition for new members or registration participants."  
I miss the social night on Friday when the silent auctions took place or another guest speaker. I think that was a great time to enjoy some  
fellowship with fellow APRNs and talk about what ever.  
"I think this conference was wonderful.  
I want to make note of how nice the staff was to allow me to sit in on a different breakout session that I signed up for, and allowed me to  
attend on Saturday (already paid for) last-minute, even though I didn't think I was going to be able to attend."  
I thought the conference had relevant topics for each area of practice (gerontology, adult, pediatrics, etc).  
I thought this was a fantastic conference and I learned so much. It was hard to choose which sessions to attend because there were so many I  
wanted to attend. I really appreciate that the handouts for the sessions are available to everyone so I can review materials from the  
sessions I was not able to attend.  
I was disappointed that the sessions were so long. At a conference, I like to get the information and move on to the next session. I found the  
sessions I attended informative, but I think they could be shorter, maximum of 45 minutes to get more topics in. Also, the Friday sessions  
not starting until 10:45 am was really late. Again, I am going to a conference for content.  
i will be back next year. great job  
I would like to see an evening networking opportunity return. Also, a complete listing of evening drug-company dinner/educational offerings  
available would be helpful; the one on Ankylosing Spondylitis that I attended was sparsely attended, although there was plenty of room and  
food at the venue.  
I would like to see members who are attending so if possible APNP's could network with providers in a similar area of practice.  
I would recommend ending the conference earlier on Friday and Saturday by 30 minutes or eliminate a session on Friday.  
I'd rather you have it later in the spring for better weather.  
It was a fantastic conference  
It was great and I enjoyed it!  
"It was pretty good.  
More room for breaks. Too go-go-go. It is no wonder why we don't take breaks at work - even conferences are the same!  
They said ""we are adults you take a break when you want to"" but you don't want to be rude to the presenter."  
It would be nice if there was decrease cost for all three days.  
It would be nice to be less UW overloaded and bring in others from throughout the state. More representation on planning committee from  
other areas and health systems could help tap the resources  
It would be nice to have it back in Wisconsin Dells one of the upcoming years  
Job well done!  
Just one general point I wanted to bring up.....Do you mention any where in the brochure that infants/children are not appropriate to be at the  
conference? I feel it would be a good idea to mention this. As a mother who left her children at home, I was in a few break out sessions  
where a mother had her infant in the whole session. Kind of distracting. And not really fair to those of us who made arrangements to have  
our children cared for at home while we attended the conference. I feel it would have been appropriate for someone from the conference  
planning committee/WNA to have talked with this parent and asked her to leave the session with the infant.....just saying  
keep cost more affordable. it seems like a lot for half day at \$160 when whole day is \$200.  
Keep doing what you are it was a great conference  
Keep moving around the state  
keep price low  
Keep the cost down. Healthy snacks  
Less time in between presentations.  
Lights were flickering in the presentation the entire time. Very disconcerting and distracting.  
Like location  
Look at reducing time of breaks to allow earlier finish so those from out of town and experience some of the city  
Loved the addition of posters.  
more drug companies with freebies  
More hands on  
more presenters from diverse parts of wisconsin  
my favorite go to conference  
N/A--it was great!  
No Madison again  
No suggestions! You all do a wonderful job! Thank you for all you do!  
None. Excellent!!  
None. So well done always! Thank you so much for all the efforts.  
None. Very well done. Presenters are top-notch.  
"none. Thanks for a GREAT event."*

Wisconsin Nurses Association – Continuing Nursing Education Program  
**2018 APRN Forum Pharmacology & Clinical Update**  
**COMPILED OVERALL CONFERENCE EVALUATION RESULTS**  
Monona Terrace, Madison

*None. The conference is always beneficial.*

*None; it was great!*

*Nothing. Keep up what you are doing.*

*"On the conference time line- it would have been nice to know in advance when meals/snacks were being offered vs not.*

*It would be nice to have all slides in advance. I know some presenters left them out if they were asking questions during the lecture, but I wonder if they could just take those slides out or use separate slides from what is posted. I like to take notes along with the slides for easier reference when going back in the future- helps with context."*

*"Oncology topics*

*Slightly shorter, more frequent sessions*

*All week days vs weekend days"*

*Pen and paper for taking notes*

*Please start earlier on Friday - going until 5:30pm is too late! Would have preferred that the speaker start at 8 so we could have been done by 4:30. Really working with committee to ensure speakers are sticking to their timeframes, most speakers went over and then you hardly had time to go to the bathroom and get a snack/drink etc.*

*prefer location back to Lake Geneva area or Milwaukee*

*providing box lunches again for last day*

*Rotate locations periodically through other parts of the state if able. Thank you.*

*Send out an email in the future regarding online evaluation and retrieving credits.*

*shorter more frequent sessions--over an hour is too long!*

*Shorter sessions, perhaps some panels, stump the expert, case studies.*

*shorter, fewer breaks*

*"Since I'm not practicing, I couldn't answer ""yes"" to the question re making a change in practice for any of the session. Perhaps there could be a N/A or re-wording of the question (although maybe I'm the only retiree who attended). I felt bad because I found all but one of the sessions I attended provided information that will be useful to me. If you give the presenters feedback re how many people answered Yes or No to that question for them, please leave my responses out. Thanks, Jean"*

*Soup and Salad buffet for lunch vs plated dinner*

*Start earlier in the day and have last session end at 4-4:30.*

*start earlier options so that some of us can enjoy part of the day versus the length of the days*

*Thank you for having Lacroix instead of soda.*

*"The gender and racial diversity of this conference was ... whew ... one of the more homogenous groups I've been in. I understand it is a challenge to increase the diversity of events (both presenters and attendees), but it is important. The attendees and presenters were not representative the population of Wisconsin.*

*Thank you for all your work. Great conference. I will be back and I will bring friends and colleagues."*

*This was a really good conference. I enjoyed all the sessions.*

*Too long of an initial exhibit break Friday morning-would prefer to dive right into the breakout sessions.*

*Try the La Crosse Area*

*Very good conference.*

*Well I loved having it at the Monona Terrace, the cost of parking daily (\$16/day) is excessive in addition to the cost of the conference. I would highly suggest reducing this for participants or absorbing it into the cost of the conference*

*What happened to Thursday night get together?*

*Wish would be one more day of short courses also on Thursday also in addition to longer sessions on Thursday, otherwise I love it and attend every year.*

*WNA gear as a fundraiser (add gear bags and water bottles to the already offered t-shirts, polos, and glasses)*

*"Would appreciate having conference handouts available more in advance to allow more time for printing. Thank you!*

*Appreciated healthy options for meals and snacks; thank you!"*

*Would have been nice to start earlier on Thursday. I think we could have had one more breakout session with CME.*

*Would have liked box lunches on Saturday but understand the financial considerations.*

*Would start earlier on Friday morning- went late into the afternoon*

SORRY – there is a question on the evaluation about what type of entertainment/social function they would like at conference next year...but it was 'hidden' on the displayed evaluation form so no one answered 😞