

APPENDIX E

CRITICAL CARE NURSES OPINIONS REGARDING CONTINUOUS PROFESSIONAL DEVELOPMENT

PANEL OF EXPERTS DEMOGRAPHIC DATA SHEET

Expert's Name and Surname:		
Telephone no:	Office:	Cell:
Fax:	Email:	Postal address:
Current employment:	Position:	Employer:
Relevant qualifications:		
ICU Field of expertise:	Theory:	Clinical:
Years of ICU experience:	Theory:	Clinical:
Current professional body affiliation:		