

Management of bronchiolitis in Calgary Emergency Departments

COMMITMENT TO CHANGE

As a result of this session, identify 3 **concrete, measurable changes** you will employ in your practice of bronchiolitis management in infants. Following each change you specify, check the number on the scale which most accurately indicates your commitment to successfully implement the change. The intent of having you put this into writing is to allow us to review the specific areas of impact this program may have on your practice. In three months you will be asked to read this commitment and review, if in fact, these changes did occur.

Change 1

Commitment level for Change 1	1 <input type="checkbox"/> (lowest)	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/> (highest)
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Change 2

Commitment level for Change 2	1 <input type="checkbox"/> (lowest)	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/> (highest)
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Change 3

Commitment level for Change 3	1 <input type="checkbox"/> (lowest)	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/> (highest)
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NAME