

*The Nealon Report Survey*

Please tell us what you think about *The Nealon Report* by taking a few minutes to answer the following questions. Your input is very valuable and will be taken into consideration. Your responses will be kept confidential and anonymous. Thank you!

1. Please rate how interesting, informative and useful this issue of *The Nealon Report* is to you.

Very interesting, informative, and useful

Somewhat interesting, informative and useful

Not interesting, informative or useful at all

2. On a scale of 1 to 5 how would you rate your satisfaction with this issue of *The Nealon Report*?

5 Very Satisfied

4 Satisfied

3 Neutral

2 Not very satisfied

1 Completely Dissatisfied

3. If you answered 3, 2, or 1, what is it that you did not like?

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4. How much of this *Nealon Report* did you read?

All of it

More than half

Less than half

5. Which of the following best describes why you are interested in *The Nealon Report*? (Select all that apply)

Consumer Health Advocate

Patient

Educator

Health Professional

Scientist/Researcher

- Student
- Media Representative
- Friend of a Patient
- None of the Above
- Other \_\_\_\_\_

6. How likely are you to recommend *The Nealon Report* to someone else?

- Very likely
- Somewhat likely
- Not very likely
- Don't know

7. If you forward a copy of *The Nealon Report* to anyone, please tell us whom:

- Consumer Health Advocates
- Family members or friends
- Coworkers or colleagues
- Patients
- Other (please specify) \_\_\_\_\_
- I do not share my copy of *The Nealon Report* with others

8. Please list any suggestions you may have to improve the appearance or format of *The Nealon Report*.

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9. Please list any ideas you might have for topics of interest or story ideas to cover in future issues of *The Nealon Report*.

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Public reporting burden for this collection of information is estimated to average 5 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. **An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.** Send comments regarding this burden estimate or any other aspect of

this collection of information, including suggestions for reducing this burden, to: NIH, Project Clearance Branch, 6705 Rockledge Drive, MSC 7974, Bethesda, MD 20892-7974, ATTN: PRA (0925-0486). Do not return the completed form to this address.