

# Critical Care Alert

## Reader Survey 2015

In an effort to ensure *Critical Care Alert* is addressing the issues most important to you, we ask that you take a few minutes to complete and return this survey. The result will be used to ensure you are getting the information most important to you.

**Instructions:** Mark your answers by filling in the appropriate bubbles. Please write in your answers to the open-ended questions in the space provided. Either fax the completed questionnaire to 678-974-5419, or return it in the enclosed postage-paid envelope. The deadline is **July 1, 2015**.

Following is a list of topics frequently discussed in *Critical Care Alert*. To help us understand your needs, please fill in the appropriate answer to indicate your interest in that topic.

- |   | A. very useful          | B. fairly useful        | C. not very useful      | D. not at all useful    |
|---|-------------------------|-------------------------|-------------------------|-------------------------|
| 1. ICU administration/management                  | <input type="radio"/> A | <input type="radio"/> B | <input type="radio"/> C | <input type="radio"/> D |
| 2. Cost-effectiveness                             | <input type="radio"/> A | <input type="radio"/> B | <input type="radio"/> C | <input type="radio"/> D |
| 3. Infections/infection control                   | <input type="radio"/> A | <input type="radio"/> B | <input type="radio"/> C | <input type="radio"/> D |
| 4. Drug therapy                                   | <input type="radio"/> A | <input type="radio"/> B | <input type="radio"/> C | <input type="radio"/> D |
| 5. Manifestations of critical illness             | <input type="radio"/> A | <input type="radio"/> B | <input type="radio"/> C | <input type="radio"/> D |
| 6. Specific procedures/techniques                 | <input type="radio"/> A | <input type="radio"/> B | <input type="radio"/> C | <input type="radio"/> D |
| 7. Ethics/end-of-life care                        | <input type="radio"/> A | <input type="radio"/> B | <input type="radio"/> C | <input type="radio"/> D |
| 8. Health policy                                  | <input type="radio"/> A | <input type="radio"/> B | <input type="radio"/> C | <input type="radio"/> D |
| 9. Mechanical ventilation and respiratory failure | <input type="radio"/> A | <input type="radio"/> B | <input type="radio"/> C | <input type="radio"/> D |
| 10. Evidence-based practice                       | <input type="radio"/> A | <input type="radio"/> B | <input type="radio"/> C | <input type="radio"/> D |
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|--|---|---|
| <b>11. Which of the following credentials do you have?</b> | <b>12. Which of the following most accurately describes your clinical practice?</b> | <b>13. In the future, how do you plan to obtain your CME credits?</b> |
| <input type="radio"/> A. MD/DO                             | <input type="radio"/> A. Exclusively hospital-based                                 | <input type="radio"/> A. Travel to live conferences                   |
| <input type="radio"/> B. RN                                | <input type="radio"/> B. Both hospital- and office-based                            | <input type="radio"/> B. Subscription-based newsletters/journals      |
| <input type="radio"/> C. RRT/CRT                           | <input type="radio"/> C. Exclusively office-based                                   | <input type="radio"/> C. Outside-sponsored teleconferences            |
| <input type="radio"/> D. other _____                       | <input type="radio"/> D. Currently in training                                      | <input type="radio"/> D. Internet-based activities                    |
|  |   | <input type="radio"/> E. Other _____                                  |
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|--|--|
| <b>14. Which of the following do you personally do in your practice? (Fill in all that apply.)</b> | <b>15. Who pays for the <i>Critical Care Alert</i> subscription that you read?</b> |
| <input type="radio"/> A. Make decision to admit a patient to ICU                                   | <input type="radio"/> A. I do personally   |
| <input type="radio"/> B. Make decision to discharge a patient from ICU                             | <input type="radio"/> B. My practice/partnership                                   |
| <input type="radio"/> C. Endotracheal intubation   | <input type="radio"/> C. ICU   |
| <input type="radio"/> D. Tracheotomy   | <input type="radio"/> D. Department  |
| <input type="radio"/> E. Ventilator management   | <input type="radio"/> E. Medical library   |
| <input type="radio"/> F. Insertion of pulmonary artery catheters                                   | <input type="radio"/> F. other _____   |
| <input type="radio"/> G. Hemodialysis/other renal replacement therapy                              |  |
| <input type="radio"/> H. Gastrointestinal endoscopy  |  |

16. In the abstract & commentary/special feature section of *Critical Care Alert*, compared to the way it is now, how much editorial comment and perspective would you like to see by the newsletter's contributing editors?

- A. more    B. the same    C. less

17. What type of information not currently provided in *Critical Care Alert* would you like to see added?

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18. To what other publications or information sources about critical care do you subscribe?

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19. Including *Critical Care Alert*, which publication or information source do you find most useful, and why?

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20. List the top three challenges you face in your job today.

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

Contact information \_\_\_\_\_

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