

Primary Care Reports

Reader Survey 2015

In an effort to ensure *Primary Care Reports* is addressing the issues most important to you, we ask that you take a few minutes to complete and return this survey.

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 15, 2015**.

In future issues of *Primary Care Reports*, would you like to see more or less coverage of the following topics?

A. more coverage B. less coverage C. about the same amount

- | | | | |
|---------------------------|-------------------------|-------------------------|-------------------------|
| 1. Cardiology | <input type="radio"/> A | <input type="radio"/> B | <input type="radio"/> C |
| 2. Infectious disease | <input type="radio"/> A | <input type="radio"/> B | <input type="radio"/> C |
| 3. Neurology | <input type="radio"/> A | <input type="radio"/> B | <input type="radio"/> C |
| 4. Endocrinology | <input type="radio"/> A | <input type="radio"/> B | <input type="radio"/> C |
| 5. Psychiatry | <input type="radio"/> A | <input type="radio"/> B | <input type="radio"/> C |
| 6. Gastroenterology | <input type="radio"/> A | <input type="radio"/> B | <input type="radio"/> C |
| 7. Rheumatology | <input type="radio"/> A | <input type="radio"/> B | <input type="radio"/> C |
| 8. Allergy and immunology | <input type="radio"/> A | <input type="radio"/> B | <input type="radio"/> C |
| 9. Oncology | <input type="radio"/> A | <input type="radio"/> B | <input type="radio"/> C |
| 10. Pulmonology | <input type="radio"/> A | <input type="radio"/> B | <input type="radio"/> C |

11. What other topics would you like to see discussed in *PCR*?

12. What type of information not currently provided in *Primary Care Reports* would you like to see added?

18. Are the articles in *PCR* written about issues of importance and concern to you?

- A. always
- B. most of the time
- C. some of the time
- D. rarely
- E. never

19. Please describe your work place.

- A. private practice
- B. hospital
- C. government institution
- D. research
- E. other _____

Please rate your level of satisfaction with the items listed.

- | | A. excellent | B. good | C. fair | D. poor |
|---------------------------|-------------------------|-------------------------|-------------------------|-------------------------|
| 13. quality | <input type="radio"/> A | <input type="radio"/> B | <input type="radio"/> C | <input type="radio"/> D |
| 14. article selections | <input type="radio"/> A | <input type="radio"/> B | <input type="radio"/> C | <input type="radio"/> D |
| 15. timeliness | <input type="radio"/> A | <input type="radio"/> B | <input type="radio"/> C | <input type="radio"/> D |
| 16. quality of commentary | <input type="radio"/> A | <input type="radio"/> B | <input type="radio"/> C | <input type="radio"/> D |
| 17. overall value | <input type="radio"/> A | <input type="radio"/> B | <input type="radio"/> C | <input type="radio"/> D |

20. To what other publications or information sources about primary care do you subscribe?

21. Including *PCR*, which publication or information source do you find most useful, and why?

22. List the top three challenges you face in your job today? _____

23. What do you like most about *Primary Care Reports*?

24. What do you like least about *Primary Care Reports*?

25. What are the top three things you would add to *PCR* to make it more valuable for your money?

Contact information _____
