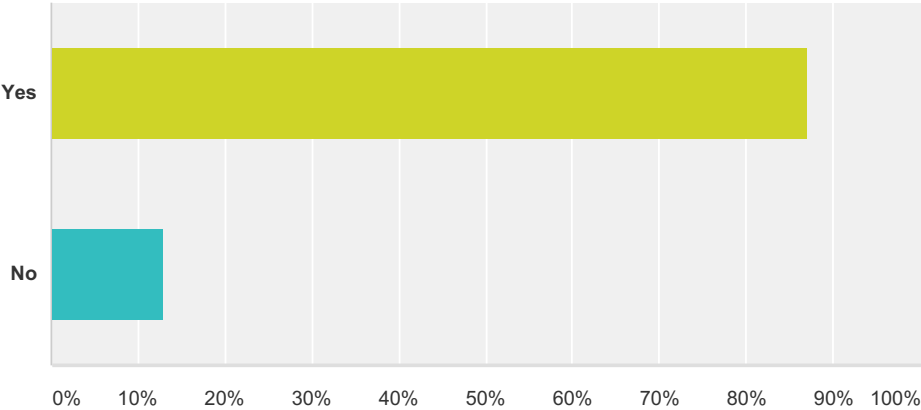


Q1 Name

Answered: 119 Skipped: 0

Q2 In the past 5 years, have you been prescribed medications or taken Over The Counter medications?

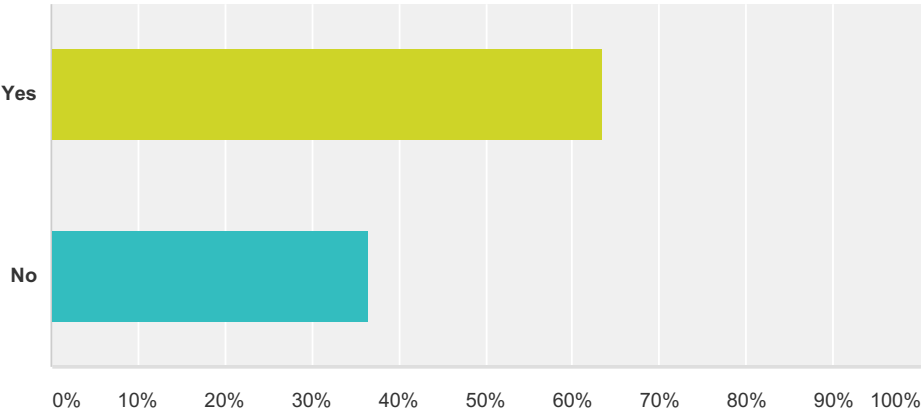
Answered: 115 Skipped: 4



Answer Choices	Responses	
Yes	86.96%	100
No	13.04%	15
Total		115

Q3 Have you been prescribed multiple medications at the same time ?

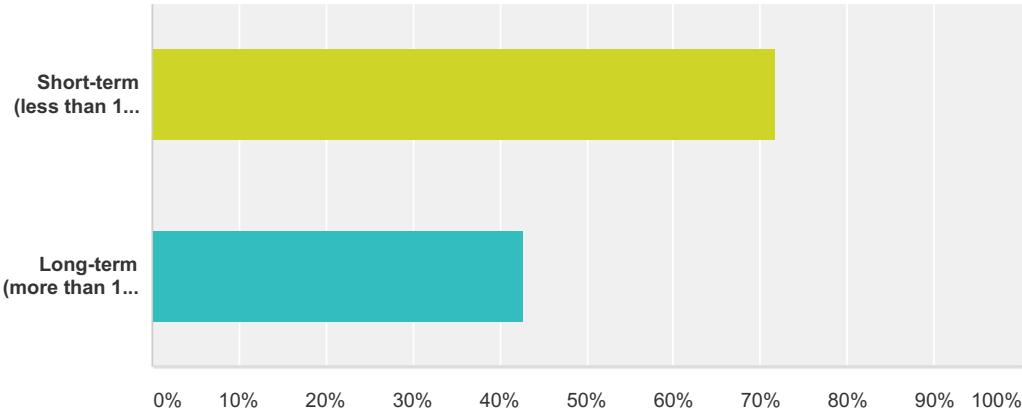
Answered: 101 Skipped: 18



Answer Choices	Responses	
Yes	63.37%	64
No	36.63%	37
Total		101

Q4 Was the prescription short-term or long-term?

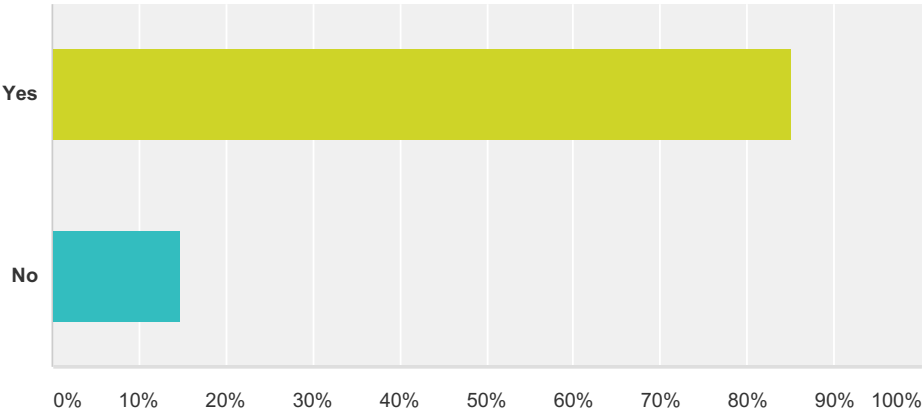
Answered: 96 Skipped: 23



Answer Choices	Responses	
Short-term (less than 1 month)	71.88%	69
Long-term (more than 1 month)	42.71%	41
Total Respondents: 96		

Q5 Did you read medication labels or research a medication that you are taking?

Answered: 94 Skipped: 25



Answer Choices	Responses	
Yes	85.11%	80
No	14.89%	14
Total		94