

Pre-downloading questionnaire

The SLIPPS Team would be grateful if you could complete a questionnaire intended to collect users' interest statistics. The questionnaire is confidential. The answers will be used to improve the searching functions of the system.

1. What is your country of residence?
<Countries list?>
2. What is your profession?
 - Professor, Medical department
 - Student, Medical department
 - Doctor
 - Nurse
 - Patient
 - Authorities representative
 - Other
3. What is your medical field of interest, if any?
 - Non-medical (specify)
 - Medical
 - Bioanalytics
 - Nutrition
 - Nursing science
 - Medicine
 - Nursing (Nurse)
 - Nursing (Midwife)
 - Nursing (Public health nurse)
 - Nursing (Other)
 - Occupational therapy
 - First aid
 - Pharmacy
 - Physiotherapy
 - Radiographer
 - Social work (Children)
 - Social work (Adults)
 - Social work (Other)
 - Speech therapy
 - Other (specify)
4. Why are you downloading this learning event?
 - It is relevant for my research
 - It is relevant for my medical practice
 - It is connected to my health state
 - Other (specify)
5. Will you recommend this website to your friends or colleagues?
 - Yes
 - No