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?>

1. What is your profession?

* Professor, Medical department
* Student, Medical department
* Doctor
* Nurse
* Patient
* Authorities representative
* Other

1. 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)

1. 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)

1. Will you recommend this website to your friends or colleagues?

* Yes
* No