National Amyotrophic Lateral Sclerosis (ALS) Registry

Form Approved OMB No. 0923-0047 Exp. Date 12/31/2018

National ALS Registry Websit	te Satisfa	ction Si	urvey							
I am a (select all that apply)										
Person with ALS										
☐ Friend/Family Member										
☐ Caregiver										
Healthcare Professional										
Researcher Other										
_ other										
2. How did you learn about the Na	itional ALS F	Registry v	website (https://v	wwn.cdc.gov/als/)?					
O Healthcare Professional (e.g. F	hysician, Nu	ırse etc.)	te.							
O Friend/Family Member										
O News story										
Internet search engine (e.g. G Referred by other website	oogle, Yaho	o, Bing e	tc.)							
O Presentation or other event										
O Pamphlet, brochure, or other v	written mate	rial								
O ALSA (Amyotrophic Lateral Sci		iation)								
O MDA (Muscular Dystrophy Ass	ociation)									
O Les Turner O Another ALS advocacy/support	t organizatio	n								
Other	-									
3. How often do you visit the Nation	onal ALS Re	aistry we	bsite?							
O First visit		-000								
O Daily										
2 or more times per week										
○ Weekly										
2-3 times per month										
○ Rarely										
4. I came to the National ALS Reg	istry website	e to find	informat	ion and r	esources for the following: (Check all t	hat apply)				
☐ To learn about the National AL						100 mm 10				
☐ To learn about the Bioreposito										
☐ To find a clinic near me	5									
To learn about ALS Research										
☐ To learn about and/or participa					tudies					
 □ To learn about ALS continuing □ To order Registry materials (e. 					phice atc \					
☐ Just curious	gr region y	garaco, r	000011000	o, illogi	prince citary					
Other(please specify)										
5. I was able to find what I was lo	okina for? (If no, ple	ase spec	ifv what	you were looking for)					
○ Yes ○ No										
I could not find										
Which features of the National.	ALS Registry	website	do you	find mos	useful (Check all that apply)					
☐ Information about ALS, ATSDF				Resource)					
☐ Information for ALS researche										
 ☐ Information about the Biorepo ☐ Signing up for the ALS Registr 										
☐ Finding a nearby clinic (ALS Se			circ)							
Learning about funded research			arch)							
FAQs, patient guide, provider										
☐ MMWR reports, surveillance re ☐ Papers and articles about the I										
Continuing Education Module (venta et	. (Fubications and Contentions)					
☐ National ALS Registry videos,				imedia T	ols)					
Registry guides, fact sheets, in										
☐ Quick links to other ALS associ	iations, trial:	s and res	earch (e	.g. MDA,	NIH, ALS Untangled etc.)					
7. Please rate the following attribu	ites of the N	ational A	LS Regis	stry webs	te.					
Rating Scale (1 = Very Dissatis		satisfied	; 3 = Ne	eutral; 4	Satisfied; 5 = Very Satisfied)					
Layout/design	10	20	30	40	5 🔾					
Quantity of content	10	20	30	40	5 🔾					
Easy to find information	10	20	30	40	50					
Meeting my needs Ouality of content	10	20	3 0	40	50					
Clear information	10	20	30	40	50					
Overall satisfaction	10	20	30	40	50					
How likely are you to recomme	nd the Natio	nal ALS	Registry	website	o a friend or patient in the future?					
O Very likely										
O Somewhat likely										
O Neutral O Somewhat unlikely										
O Very unlikely										
How likely are you to visit the N	National ALS	Registry	website	again if	ou need more information?					
O Very likely										
O Somewhat likely										
O Neutral										
O Somewhat unlikely										
O Very unlikely										
10. What areas of the National ALS	Registry we	bsite car	we imp	rove? (S	elect all that apply)					
☐ Website Design										
Social media promotion										
Registry Resources (videos, in	fographics, f	actsheet	s etc.)							
Research information										
☐ Clinical trials information ☐ Ease of contacting National AL	S Rogistor									
Other	o negistry									

. Did you register for the National ALS	S Regist	ry?								
○Yes										
○ No										
O Not Applicable										
t. (If selected yes to #11) Please rate Rating Scale (1 = Very Dissatisfied;	: 2 = Dis	ssatisfied	l; 3 = Ne	eutral; 4	= Satisfied; 5	5 = Very Satis	sfied)			
Clear directions	10	20	3 〇	40	50					
The website responded as expected	10	20	3 (40	5 🔾					
Time to complete	10	20	3 〇	40	5 🔾					
Overall Satisfaction	10	20	3 🔾	40	50					
Did you complete risk factor survey:	s?									
○Yes										
○ No										
O Not Applicable										
. (If selected yes to #13) Please rate Rating Scale (1 = Very Dissatisfied;		ssatisfied	i; 3 = Ne	eutral; 4	= Satisfied; 5	5 = Very Satis	afied)			
Clear directions	10	20	3 (40	50					
The website responded as expected	10	20	3 (40	5 🔾					
Time to complete	10	20	3 〇	40	50					
Overall Satisfaction<	10	20	3 (40	50					
i. Many items on our site will soon be	translat	ted into	Spanish.	Is there	another lang	uage you thin	k we should	also use? (If yes, pleas	e type below)
O Yes What language?										
i. How old are you?										
'. What is your race? (select all that a	pply)									
☐ American Indian or Alaska Native ☐ Asian										
Black or African American										
Native Hawaiian or other Pacific Isl	ander									
☐ White										
. What is your ethnicity?										
O Hispanic or Latino										
O Not Hispanic or Latino										
ATSDR estimates the average public reporting burd sources, gathering and maintaining the data neede collection of information unless it displays a current reposetions for poducins this burden to POC/ATSDI	d, and cor	noleting and	d reviewing	the collection	on of information.	An agency may n	ot conduct or spo	onsor, and a pe	rson is not requi	red to respond to

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