

Project Title
Project Subtitle

(ak13)
RCC_WEB/INTRO1

Overall Progress:  0%
Section Progress:  0%

Form Approved
OMB No. 0920-0943
Exp. Date 07/31/2015

Dear Administrator / Executive Director,

The Centers for Disease Control and Prevention conducts the National Study of Long-Term Care Providers. Please complete this questionnaire about the **residential care community** at the address printed on the letter you received about this study.

- **If this residential care community is part of a multi-facility campus or has more than one residential care license, answer only for the place/address printed on the letter you received.**
- Please consult records and other staff as needed to answer questions.
- If you need assistance or have questions, go to <http://www.cdc.gov/nchs/nsitcp.htm> or call 1-877-225-4434.

Residential care places are known by different names in different states. We refer to all of these places and others like them as residential care communities.

Just a few terms used to refer to these places are assisted living, personal care, and adult care homes, facilities, and communities; adult family and board and care homes; adult foster care; homes for the aged; and housing with service establishments.

Thank you for taking the time to complete this questionnaire.

Please click "Next" to move to the next screen.

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RCC_WEB/PRINT

Overall Progress:  15%

Section Progress:  15%

Before you begin entering your answers, you may find it helpful to print and preview the questionnaire to identify any questions that will require you to consult records or request assistance from other staff. A printable version is available here: [Residential Care Community questionnaire](#)

This link is also available to you once you have started the questionnaire. It can be accessed by clicking the 'Help' button.

NOTICE – Public reporting burden of this collection of information is estimated to average 30 minutes per response. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: CDC/ATSDR Reports Clearance Officer, 1600 Clifton Road, MS D-74, Atlanta, GA 30333, ATTN: PRA (0920-0943).

Assurance of Confidentiality – All information which would permit identification of an individual, a practice, or an establishment will be held confidential, will be used for statistical purposes only by NCHS staff, contractors, and agents only when required and with necessary controls, and will not be disclosed or released to other persons without the consent of the individual or establishment in accordance with section 308(d) of the Public Health Service Act (42 USC 242m) and the Confidential Information Protection and Statistical Efficiency Act (PL-107-347).

Please click "Next" to move to the next screen and complete the web questionnaire.

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

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RCC_WEB/INTRO2



Overall Progress: 

Section Progress: 

Navigation Instructions

- Please do NOT use your browser's "Back" and "Forward" buttons to navigate through the questions.
- Click "Next" to save your answer and move to the next question.
- To save a current response and return to a previous question, first click "Next" to save your answer and then click "Previous" until you reach the question you wish to go back to.
- You may stop or step away from the questionnaire at any time. If you stop without clicking the "Logoff" button, the questionnaire will timeout after 30 minutes. When you return to your questionnaire, whether you logged off or timed out, you will need to enter your User ID and password to log back in. You will start at the point where you left off.
- You can enter comments by clicking the  button.

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RCC_WEB/LICENSED

Overall Progress:  70%

Section Progress:  70%

1. Is this residential care community currently licensed, registered, listed, certified, or otherwise regulated by the State?

YES

NO



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RCC_WEB/LICTYPE

Overall Progress:  13%
Section Progress:  13%

2_1. Is this residential care community licensed, registered, or certified by beds or by apartments or units?

MARK ONLY ONE ANSWER

- BEDS
 - APARTMENTS OR UNITS
- 

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(ak13)
RCC_WEB/BEDS

Overall Progress: 
Section Progress: 

2. At this residential care community, what is the number of licensed, registered, or certified residential care **beds**? Include both occupied and unoccupied beds.

If none, enter "0."

Number of beds 

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RCC_WEB/BEDS

Overall Progress: 
Section Progress: 

2. At this residential care community, what is the number of licensed, registered, or certified residential care **beds**? Include both occupied and unoccupied beds.

If this residential care community is licensed, registered, or certified by **apartment or unit**, please count the number of single resident apartments or units as one bed each, two bedroom apartments or units as two beds each and so forth. **If none, enter "0."**

Number of beds 

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RCC_WEB/IDDMNFAC

Overall Progress:  15%
Section Progress:  7%

3a. Does this residential care community **only** serve adults with...

MARK YES OR NO IN EACH ROW

	YES	NO	
a. an intellectual or developmental disability?	<input type="radio"/>	<input type="radio"/>	
b. severe mental illness? Do not include Alzheimer's disease or other dementias.	<input type="radio"/>	<input type="radio"/>	

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RCC_WEB/TWOMEAL

Overall Progress:  15%
Section Progress:  13%

4. Does this residential care community offer at least 2 meals a day to residents?

- YES
- NO
- 


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RCC_WEB/TOTRES

Overall Progress:  15%
Section Progress:  10%

5. What is the total number of residents currently living in this residential care community? If you have respite care residents please include them. **If none, enter "0."**

Number of residents 

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RCC_WEB/PC24HOUR




Overall Progress:  16%


Section Progress:  17%

6. Does this residential care community provide or arrange for **any** of the following types of staff to be on-site 24 hours a day, 7 days a week to meet any resident needs that may arise?


On-site means the staff are located in the same building, in an attached building or next door, or on the same campus.

MARK A RESPONSE IN EACH ROW

	YES	ON AN AS NEEDED BASIS	NO	
a. Personal care aide or staff caregiver	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
b. Registered Nurse (RN) or Licensed Practical Nurse (LPN)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
c. Director, Assistant Director, Administrator or Operator (if they provide personal care or nursing services to residents)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	

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RCC_WEB/HELP


Overall Progress:  15%

Section Progress:  10%


7. Does this residential care community offer...

MARK YES OR NO IN EACH ROW

	YES	NO	
a. help with activities of daily living (ADLs), such as help with bathing, either directly or arranged through an outside vendor? 	<input type="radio"/>	<input type="radio"/>	
b. assistance with medications, such as the administration of medications, give reminders, or provide central storage of medications? 	<input type="radio"/>	<input type="radio"/>	

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RCC_WEB/OWNERSHP

Overall Progress:  20%
Section Progress:  20%

8. What is the type of ownership of this residential care community?

MARK ONLY ONE ANSWER

- Private, nonprofit
- Private, for profit
- Publicly traded company or limited liability company (LLC)
- Government—federal, state, county, or local



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RCC_WEB/CHAIN

Overall Progress:  21%
Section Progress:  22%

9. Is this residential care community owned by a person, group, or organization that owns or manages **two or more residential care communities**? This may include a corporate chain.

- YES
- NO
- 

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RCC_WEB/MEDICAID

Overall Progress:  22%
Section Progress:  22%

10. Is this residential care community authorized or otherwise set up to participate in Medicaid?

- YES
- NO
- 

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RCC_WEB/MEDPAID

Overall Progress:  25%

Section Progress:  23%

10a. During the last 30 days, for how many of the **8** residents currently living in this residential care community, did Medicaid pay for some or all of their services received at this community? **If none, enter "0."**

Number of residents: 

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RCC_WEB/RCFYEAR

Overall Progress:  26%
Section Progress:  27%

11. What is the total number of years this residential care community has been operating as a residential care community at this location?

MARK ONLY ONE ANSWER

- Less than 1 year
 - 1 to 4 years
 - 5 to 9 years
 - 10 to 19 years
 - 20 or more years
- 

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RCC_WEB/DEPSCRN

Overall Progress:  20%

Section Progress:  10%

12. As a part of the admission process, does this residential care community...

MARK YES OR NO IN EACH ROW

	YES	NO	
a. screen residents for depression with a standardized tool or scale?	<input type="radio"/>	<input type="radio"/>	
b. accept results from depression screenings performed by other health care providers?	<input type="radio"/>	<input type="radio"/>	

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RCC_WEB/ONLYDEM

Overall Progress:  30%
Section Progress:  20%

13. Does this residential care community only serve adults with dementia or Alzheimer's disease?

- YES
- NO
- 

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RCC_WEB/DEMWING

Overall Progress:  31%

Section Progress:  100%

13a. Does this residential care community have a distinct unit, wing, or floor that is designated as a dementia or Alzheimer's Special Care Unit?

- YES
- NO
- 

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RCC_WEB/DEMBED

Overall Progress:  33%
Section Progress:  33%

13b. How many licensed beds are in the dementia or Alzheimer's Special Care Unit?
Please count the number of single resident apartments or units as one bed each, two bedroom apartments or units as two beds each and so forth. **If none, enter "0."**

Number of beds 

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RCC_WEB/DEMBED

Overall Progress:  33%
Section Progress:  33%

13b. How many licensed beds are in the dementia or Alzheimer's Special Care Unit?
If none, enter "0."

Number of beds 

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RCC_WEB/PROGRAMS





Overall Progress:  34%

Section Progress:  15%

14. Disease-specific programs may include one or more of the following services—education, physical activity, diet/nutrition, medication management, or weight management.

Does this residential care community offer **any disease-specific programs** for residents with the following conditions?

MARK YES OR NO IN EACH ROW

		YES	NO	
a. Alzheimer's disease and other dementias	X	<input type="radio"/>	<input type="radio"/>	
b. Cardiovascular disease (e.g., heart disease, stroke, high blood pressure)	X	<input type="radio"/>	<input type="radio"/>	
c. Depression	X	<input type="radio"/>	<input type="radio"/>	
d. Diabetes	X	<input type="radio"/>	<input type="radio"/>	

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RCC_WEB/SERVICES

Overall Progress: 

Section Progress: 

The next questions ask about services provided at this residential care community. **For each service, mark if** this residential care community provides the service by...

- Paid residential care community employees
- Arranging for and paying outside vendors
- Arranging for outside vendors paid by others
- Referral
- **NONE OF THESE APPLY / NOT PROVIDED**

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RCC_WEB/SERVDENT

Overall Progress:  100%

Section Progress:  100%

15a. Routine and emergency dental services by a licensed dentist

This residential care community provides this service by ... (MARK ALL THAT APPLY)

- PAID RESIDENTIAL CARE COMMUNITY EMPLOYEES 
- ARRANGING FOR AND PAYING OUTSIDE VENDORS 
- ARRANGING FOR OUTSIDE VENDORS PAID BY OTHERS 
- REFERRAL 
- NONE OF THESE APPLY / NOT PROVIDED 

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RCC_WEB/SERVHOSP

Overall Progress:  13%
Section Progress:  44%

15b. Hospice services

This residential care community provides this service by ... (MARK ALL THAT APPLY)

- PAID RESIDENTIAL CARE COMMUNITY EMPLOYEES 
- ARRANGING FOR AND PAYING OUTSIDE VENDORS 
- ARRANGING FOR OUTSIDE VENDORS PAID BY OTHERS 
- REFERRAL 
- NONE OF THESE APPLY / NOT PROVIDED 

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RCC_WEB/SERV/SOCW

Overall Progress:  41%

Section Progress:  42%

15c. Social work services—provided by licensed social workers or persons with a bachelor's or master's degree in social work, and include an array of services such as psychosocial assessment, individual or group counseling, and referral services

This residential care community provides this service by ... (MARK ALL THAT APPLY)

- PAID RESIDENTIAL CARE COMMUNITY EMPLOYEES 
- ARRANGING FOR AND PAYING OUTSIDE VENDORS 
- ARRANGING FOR OUTSIDE VENDORS PAID BY OTHERS 
- REFERRAL 
- NONE OF THESE APPLY / NOT PROVIDED 

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



RCC_WEB/SERVMH

Overall Progress:  43%

Section Progress:  27%

15d. Mental health services—target residents' mental, emotional, psychological, or psychiatric well-being and include diagnosing, describing, evaluating, and treating mental conditions

This residential care community provides this service by ... (MARK ALL THAT APPLY)

- PAID RESIDENTIAL CARE COMMUNITY EMPLOYEES 
- ARRANGING FOR AND PAYING OUTSIDE VENDORS 
- ARRANGING FOR OUTSIDE VENDORS PAID BY OTHERS 
- REFERRAL 
- NONE OF THESE APPLY / NOT PROVIDED** 

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(ak13)

RCC_WEB/SERVTX

Overall Progress:  44%
Section Progress:  24%

15e. Any therapeutic services—physical, occupational, or speech

This residential care community provides this service by ... (MARK ALL THAT APPLY)

- PAID RESIDENTIAL CARE COMMUNITY EMPLOYEES 
- ARRANGING FOR AND PAYING OUTSIDE VENDORS 
- ARRANGING FOR OUTSIDE VENDORS PAID BY OTHERS 
- REFERRAL 
- NONE OF THESE APPLY / NOT PROVIDED 

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(ak13)
RCC_WEB/SERVX

Overall Progress:  45%
Section Progress:  27%

15f. Pharmacy services—including filling of and delivery of prescriptions

This residential care community provides this service by ... (MARK ALL THAT APPLY)

- PAID RESIDENTIAL CARE COMMUNITY EMPLOYEES 
- ARRANGING FOR AND PAYING OUTSIDE VENDORS 
- ARRANGING FOR OUTSIDE VENDORS PAID BY OTHERS 
- REFERRAL 
- NONE OF THESE APPLY / NOT PROVIDED 

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RCC_WEB/SERVPOD

Overall Progress:  48%

Section Progress:  48%

15g. Podiatry services

This residential care community provides this service by ... (MARK ALL THAT APPLY)

- PAID RESIDENTIAL CARE COMMUNITY EMPLOYEES 
- ARRANGING FOR AND PAYING OUTSIDE VENDORS 
- ARRANGING FOR OUTSIDE VENDORS PAID BY OTHERS 
- REFERRAL 
- NONE OF THESE APPLY / NOT PROVIDED** 

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(ak13)

RCC_WEB/SERVNURS

Overall Progress:  49%
Section Progress:  100%

15h. Skilled nursing services—must be performed by an RN or LPN and are medical in nature

This residential care community provides this service by ... (MARK ALL THAT APPLY)

- PAID RESIDENTIAL CARE COMMUNITY EMPLOYEES 
- ARRANGING FOR AND PAYING OUTSIDE VENDORS 
- ARRANGING FOR OUTSIDE VENDORS PAID BY OTHERS 
- REFERRAL 
- NONE OF THESE APPLY / NOT PROVIDED 

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(ak13)

RCC_WEB/SERVAPPT

Overall Progress:  51%
Section Progress:  57%

15i. Transportation services for medical or dental appointments

This residential care community provides this service by ... (MARK ALL THAT APPLY)

- PAID RESIDENTIAL CARE COMMUNITY EMPLOYEES 
- ARRANGING FOR AND PAYING OUTSIDE VENDORS 
- ARRANGING FOR OUTSIDE VENDORS PAID BY OTHERS 
- REFERRAL 
- NONE OF THESE APPLY / NOT PROVIDED** 

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(ak13)

RCC_WEB/SERVSTOR

Overall Progress:  52%
Section Progress:  53%

15j. Transportation services for social and recreational activities, or shopping

This residential care community provides this service by ... (MARK ALL THAT APPLY)

- PAID RESIDENTIAL CARE COMMUNITY EMPLOYEES 
- ARRANGING FOR AND PAYING OUTSIDE VENDORS 
- ARRANGING FOR OUTSIDE VENDORS PAID BY OTHERS 
- REFERRAL 
- NONE OF THESE APPLY / NOT PROVIDED** 

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RCC_WEB/STAFFPT

Overall Progress:  54%

Section Progress:  55%

The next questions are about staff that currently work at this residential care community.

16a. What is the **maximum** number of hours per week that **part-time staff** can work at this residential care community?

Hours per week 

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RCC_WEB/STAFFFT

Overall Progress:  56%

Section Progress:  72%

16b. What is the **minimum** number of hours per week that **full-time staff** can work at this residential care community?

Hours per week 

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RCC_WEB/EMPLOYEE







Overall Progress:  57%

Section Progress:  58%

17_1. An individual is considered **a residential care community employee** if the residential care community is required to issue a Form W-2 on their behalf.

Does this residential care community currently have any full-time and part-time employees for each category of staff listed below?

MARK ALL THAT APPLY

- Registered nurses (RNs) 
- Licensed practical nurses (LPNs) / Licensed vocational nurses (LVNs) 
- Certified nursing assistants, nursing assistants, home health aides, home care aides, personal care aides, personal care assistants, and medication technicians or medication aides 
- Social workers—Licensed social workers or persons with a bachelor's or master's degree in social work 
- Activities directors or activities staff 
- No full-time or part-time employees 

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RCC_WEB/STAFFRM1

Overall Progress:  59%
Section Progress:  60%

17a_a. How many employees at this residential care community are full-time and part-time **RNs** ?

If none, enter "0."

Number of full-time employees 

Number of part-time employees 

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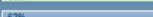
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RCC_WEB/STAFFLPN1

Overall Progress:  61%
Section Progress:  47%

17b_a. How many employees at this residential care community are full-time and part-time LPNs/LVNs?

If none, enter "0."

Number of full-time employees 
Number of part-time employees 

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RCC_WEB/STAFFAIDE1


Overall Progress:  62%

Section Progress:  53%

17c_a. How many employees at this residential care community are full-time and part-time **certified nursing assistants, nursing assistants, home health aides, home care aides, personal care aides, personal care assistants, and medication technicians or medication aides?**

If none, enter "0."

Number of full-time employees 

Number of part-time employees 

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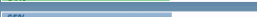
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RCC_WEB/STAFFSOCW1

Overall Progress:  64%
Section Progress:  5%

17d_a. How many employees at this residential care community are full-time and part-time **social workers, including individuals that are licensed social worker's or persons with a bachelor's or master's degree in social work?**

If none, enter "0."

Number of full-time employees 

Number of part-time employees 

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RCC_WEB/STAFFACT1

Overall Progress:  58%

Section Progress:  37%

17e_a. How many employees at this residential care community are full-time and part-time **activities directors or activities staff**?

If none, enter "0."

Number of full-time employees 

Number of part-time employees 



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


(ak13)
RCC_WEB/CONTRACT

Overall Progress:  67%
Section Progress:  48%

17_2. Contract staff refer to individuals or organization **staff under contract** with and working at this residential care community full-time and part-time.

Does this residential care community currently have any full-time and part-time contract staff for each category of staff listed below?

MARK ALL THAT APPLY

- Registered nurses (RNs) 
- Licensed practical nurses (LPNs) / Licensed vocational nurses (LVNs) 
- Certified nursing assistants, nursing assistants, home health aides, home care aides, personal care aides, personal care assistants, and medication technicians or medication aides. 
- Social workers—licensed social workers or persons with a bachelor's or master's degree in social work 
- Activities directors or activities staff 
- No full-time or part-time contract staff 

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RCC_WEB/STAFFRN2


Overall Progress:  68%

Section Progress:  70%

17a_b. How many contract staff at this residential care community are full-time and part-time **RNs**?

If none, enter "0."

Number of full-time contract staff 

Number of part-time contract staff 

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RCC_WEB/STAFFLPN2

Overall Progress:  70%
Section Progress:  72%

17b_b. How many contract staff at this residential care community are full-time and part-time **LPNs/LVNs**?

If none, enter "0."

Number of full-time contract staff 

Number of part-time contract staff 

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(ak13)


RCC_WEB/STAFFAIDE2

Overall Progress:  72%
Section Progress:  72%

17c_b. How many contract staff at this residential care community are full-time and part-time **certified nursing assistants, nursing assistants, home health aides, home care aides, personal care aides, personal care assistants, and medication technicians or medication aides?**

If none, enter "0."

Number of full-time contract staff 

Number of part-time contract staff 

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(ak13)


RCC_WEB/STAFFSOCW2


Overall Progress:  74%

Section Progress:  75%

17d_b. How many contract staff at this residential care community are full-time and part-time **social workers, including individuals that are licensed social worker's or persons with a bachelor's or master's degree in social work?**

If none, enter "0."

Number of full-time contract staff 

Number of part-time contract staff 

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(ak13)

RCC_WEB/RACE

Overall Progress:  67%
Section Progress:  67%

The next questions are about residents at this residential care community.

18. Of the **8** residents currently living in this residential care community, how many are in each of the following categories? Count each resident only once. **Enter "0" for any categories with no residents.**

- a. Hispanic or Latino, of any race 
- b. American Indian or Alaska Native, not Hispanic or Latino 
- c. Asian, not Hispanic or Latino 
- d. Black, not Hispanic or Latino 
- e. Native Hawaiian or Other Pacific Islander, not Hispanic or Latino 
- f. White, not Hispanic or Latino 
- g. Two or more races, not Hispanic or Latino 
- h. Some other category reported in this residential care community's system 
- i. Not reported (race and ethnicity unknown) 

Total

Please make sure that the total number of residents is the same as the total number of residents you reported earlier, which is 8 residents.



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RCC_WEB/GENDER

Overall Progress:  79%
Section Progress:  40%

19. Of the **8** residents currently living in this residential care community, how many are in each of the following categories? **Enter "0"** for any categories with no residents.

a. Male 
b. Female 
Total

Please make sure that the total number of residents is the same as the total number of residents you reported earlier, which is 8 residents.

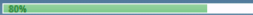

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RCC_WEB/AGE


Overall Progress:  30%
Section Progress:  12%

20. Of the **8** residents currently living in this residential care community, how many are in each of the following age categories? **Enter "0" for any categories with no residents.**


a. 17 years or younger 


b. 18–44 years 

c. 45–54 years 

d. 55–64 years 

e. 65–74 years 

f. 75–84 years 

g. 85 years or older 

Total

Please make sure that the total number of residents is the same as the total number of residents you reported earlier, which is 8.



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




Project Title

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(ak13)
RCC_WEB/DXCONDIT

Overall Progress:  82%
Section Progress:  100%

21. Of the **8** residents currently living in this residential care community, about how many have been diagnosed with each of the following conditions? **Enter "0" for any categories with no residents.**

- a. Alzheimer's disease or other dementias 
- b. Intellectual/developmental disability 
- c. Severe mental illness 
- d. Depression 
- e. Cardiovascular disease (e.g., heart disease, stroke, high blood pressure) 
- f. Diabetes 

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(ak13)

RCC_WEB/ADLHELP1

Overall Progress:  100%
Section Progress:  100%

22. Assistance refers to **needing any help or supervision from another person, or use of special equipment**.

Of the **8** residents currently living in this residential care community, about how many need **any assistance** in each of the following activities? **Enter "0" for any categories with no residents.**

- a. With transferring in and out of a bed or chair 
- b. With eating, like cutting up food 
- c. With dressing 
- d. With bathing or showering 
- e. In using the bathroom (toileting) 
- f. With locomotion or walking 



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(ak13)
RCC_WEB/OVRNITE

Overall Progress:  85%
Section Progress:  87%

23. Of the **8** residents currently living in this residential care community, about how many were discharged from an overnight hospital stay in the last 90 days? Exclude trips to the hospital emergency department that did not result in an overnight hospital stay. **If none, enter "0."**

Number of residents 

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(ak13)

RCC_WEB/EMERNUM

Overall Progress:  87%
Section Progress:  68%

24. Of the **8** residents currently living in this residential care community, about how many were treated in a hospital emergency department in the last 90 days? **If none, enter "0."**

Number of residents 

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Project Title

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(ak13)

RCC_WEB/FALLNUM

Overall Progress:  89%

Section Progress:  90%

25. Of the **8** residents currently living in this residential care community, about how many had any falls in the last 90 days? Include on-site and off-site falls. **If none, enter "0."**

Number of residents 

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RCC_WEB/MEDHELP

Overall Progress:  50%
Section Progress:  25%

26. For about how many of the **8** current residents does this residential care community provide medication-related services, such as storing medications; administering medications; or providing assistance to residents with self-administration of medications? **If none, enter "0."**

Number of residents 

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RCC_WEB/MOVECOST

Overall Progress:  62%

Section Progress:  47%

27. Of residents who moved out in the last 12 months, did **any** leave because the cost of care, including housing, meals, and services required to meet their needs, exceeded their ability to pay?

YES

NO





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RCC_WEB/EHRS

Overall Progress:  83%
Section Progress:  95%

28. An Electronic Health Record is a computerized version of the resident's health and personal information used in the management of the resident's health care. Other than for accounting or billing purposes, does this residential care community use Electronic Health Records?

- YES
- NO
- 


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RCC_WEB/ITEXCHNG

Overall Progress:  25%
Section Progress:  97%

29. Does this residential care community's computerized system support **electronic health information exchange** with each of the following providers? Do not include faxing.

MARK YES OR NO IN EACH ROW

	YES	NO	
a. Physician 	<input type="radio"/>	<input type="radio"/>	
b. Pharmacy 	<input type="radio"/>	<input type="radio"/>	
c. Hospital 	<input type="radio"/>	<input type="radio"/>	

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RCC_WEB/RINFO

Overall Progress:  97%
Section Progress:  88%

30. In case we need to reach you, please provide your name, telephone number, work e-mail address, and job title. Your contact information will be kept confidential and will not be shared with anyone outside the project team.

Your first name:

Your last name:

Your work telephone number:

Extension:

Your work e-mail address:

ENTER EMAIL ADDRESS AGAIN:

Your job title:



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(ak13)
RCC_WEB/END

Overall Progress:  100%
Section Progress:  0%

You have reached the end of the questionnaire. You may:

- **REVIEW**—Click "Review" to review and print a copy of your answers. After reviewing, you can return to the survey if you need to change your answers or you can submit your questionnaire.
- **LOGOFF**—Click "Logoff" if you are still working on your questionnaire. Please keep your URL, your User ID, and password so that you can open your questionnaire and complete the unanswered questions when you are ready to return.
- **SUBMIT**—Click "Submit" to submit your questionnaire.

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