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My MedlinePlus Newsletter User Survey

Thank you for subscribing to the *My MedlinePlus* newsletter. We're working to improve the newsletter and want to learn more about what information you find most useful. Please help us by taking this quick survey. Your responses are confidential.

Q1.	I am a? (Please select all that apply).
	O Patient, family, caregiver, or friend of patient (1)
	O Student (2)
	Researcher (3)
	C Librarian or information professional (4)
	C Educator/trainer (5)
	O Healthcare Professional (6)
	Other (please tell us what describes you best): (7)

How much do you agree or disagree with the following statements about the My MedlinePlus newsletter:

Q2. The information I read in the <i>My MedlinePlus</i> newsletter is easy to understand.	
O Strongly agree (1)	
O Agree (2)	
O Neither agree nor disagree (3)	
O Disagree (4)	
O Strongly disagree (5)	
Q3. The <i>My MedlinePlus</i> newsletter gives me health information that is important to me or my family.	
O Strongly agree (1)	
O Agree (2)	
Neither agree nor disagree (3)	
O Disagree (4)	
O Strongly disagree (5)	
Q4. The <i>My MedlinePlus</i> newsletter helps me keep up with the latest information about staying healthy.	
O Strongly agree (1)	
O Agree (2)	
O Neither agree nor disagree (3)	
O Disagree (4)	
O Strongly disagree (5)	

Q5.	. The My <i>Me</i>	dlinePlus newsletter is a trustworthy source for health information.
	O Strongl	y agree (1)
	O Agree	(2)
	O Neither	agree nor disagree (3)
	O Disagree (4)	
	O Strongl	y disagree (5)
Q6.	Q6. How has reading the <i>My MedlinePlus</i> newsletter helped you? Choose all that apply.	
		Helps me better understand medical information (1)
		Helps me discuss my health with my doctor or health professional (2)
		Helps me or a family member to change a health-related behavior (3)
		Makes me more aware of health-related issues (4)
		Other (please specify) (5)

Q7. Which action apply.	ons have you taken as a result of reading the My MedlinePlus newsletter? Choose all that
	Shared the newsletter with a family member or friend (1)
	Looked for more information (2)
	Talked to a doctor or other healthcare provider (3)
	Made a healthy lifestyle change such as improving diet or exercising more frequently (4)
	Researched a medication, procedure, or treatment (5)
	Made a healthy recipe I found in the newsletter (6)
	Visited the MedlinePlus website (7)
	Found MedlinePlus information on social media (Facebook, Twitter) (8)
	Other (please specify): (9)

Q8	Q8. Which topics are you most interested in reading about?		
		Specific diseases or health conditions (1)	
		Genetics (2)	
		Medications (3)	
		Herbs and supplements (4)	
		Medical tests (5)	
		Mental Health (6)	
		Fitness, nutrition, and wellness (7)	
		Healthy recipes (8)	
		Other (please specify): (9)	
Q9. Are you familiar with the MedlinePlus website, the National Library of Medicine's online health information resource for patients and their families and friends?			
	O Yes (1)	
	O No (2)		
	O Not sur	re (3)	
Q10. In your opinion, is the title, My MedlinePlus, representative of the information in the newsletter?			
	O Yes (1)	
	O No (2)		
	O What is	s MedlinePlus? (3)	

Q11. How long have you been a subscriber to the <i>My MedilnePlus</i> Newsletter?
C Less than 6 months (1)
One year (2)
More than one year (3)
O Don't know (4)
Q12. Would you rather receive the My MedlinePlus Newsletter via text or e-mail?
O Text (1)
C Email (2)
Q13. How often would you like to receive the My MedlinePlus Newsletter?
○ Weekly (1)
O Biweekly (2)
O Monthly (3)
Q14. In your opinion, the length of the <i>My MedlinePlus</i> newsletter is:
O Too short (1)
O Too long (2)
O Just right (3)
Q15. Which of the following best describes your gender?
O Male (1)
O Female (2)
O Non-binary (3)
O Prefer not to answer (4)

Q16. What is your age?	
O Younge	er than 24 (1)
O 25-34	(2)
35-44	(3)
O 45-54	(4)
O 55-64	(5)
O 65-74	(6)
O 75 or o	lder (7)
OPrefer	not to answer (8)
Q17. Which of	these best describes your ethnicity (choose one)?
O Hispan	ic or Latino (1)
O Not His	spanic or Non-Latino (2)
Q18. Which of	these best describes your race (choose one or more)?
	Asian (1)
	Black or African American (2)
	American Indian or Alaska Native (3)
	Native Hawaiian or other Pacific Islander (4)
	White (5)

Q19. What is your education level?
C Less than a high school degree (1)
High school degree or equivalent (e.g., GED) (2)
O Some college but no degree (3)
Associate degree (4)
O Bachelor's degree (5)
Master's degree (6)
O Professional or PhD (7)
O Prefer not to answer (8)
Thank you for giving us your feedback. Please use the space below to tell us about any other resources or information you'd like to see in the <i>My MedlinePlus</i> newsletter.
