## Health.mil Website Survey

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## AGENCY DISCLOSURE NOTICE

The public reporting burden for this collection of information, 0704-0553, is estimated to average 5 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or burden reduction suggestions to the Department of Defense, Washington Headquarters Services, at whs.mc-alex.esd.mbx.dd-dod-information-collections@mail.mil. Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number.

Please take a few minutes to share your opinions. We want to give you the best online

| experience. Try to be as specific as possible when answering open-ended questions. Do not include any personal identifiable information. |
|--|
| 1. What's your primary reason for visiting our site today?   |
| O Just browsing (1)  |
| O Looking for MHS GENESIS information (electronic health record and patient portal) (2)  |
| O Looking for a policy or a DHA publication (Go to Reference Center) (3)   |
| O Getting military health news (4)   |
| O Looking for provider information (i.e., rates, clinical practice guidelines, training) (5)   |
| O Pharmacy information (6)   |
| Other (7)  |

| 1. How did you look for information on our site today? (Please select all that apply.)   |
|--|
| Top navigation bar (1)   |
| "I Want To" menu (2)   |
| Search feature (3)   |
| Page links (4)   |
| Page bookmark or favorite link (5)   |
| Site map (6)   |
| Other (7)  |
| 2. Did you find what you were looking for?   |
| O Yes (1)  |
| O No (2)   |
| 3. If you answered no, what were you looking for or what were you trying to do? If you couldn't download a file, try clearing your cache. Go to health.mil/ClearCache for browser-specific instructions. |
| 4. How can we improve your online experience with Health.mil?  |

| 5. What best describes yo  | ou?                    |                  |               |   |                 |  |  |
|--|------------------------|------------------|---------------|---|-----------------|--|--|
| O Military hospital staff or clinic staff (1)  |                        |                  |               |   |                 |  |  |
| O Media or other comm  | unicator (2)           |                  |               |   |                 |  |  |
| Medical professional, e  | educator, or r         | esearcher (3     | 3)            |   |                 |  |  |
| O MHS/DHA staff (4)  |                        |                  |               |   |                 |  |  |
| TRICARE beneficiary or   | caregiver (Pl          | ease visit tri   | care.mil.) (5 | ) |                 |  |  |
| O Vendor (6)   |                        |                  |               |   |                 |  |  |
| O Veteran (Please visit va   | a.gov.) (7)            |                  |               |   |                 |  |  |
| Other (8)  |                        |                  |               |   |                 |  |  |
| · /  |                        |                  |               |   |                 |  |  |
| 6. How often do you visit  | this site?             |                  |               |   |                 |  |  |
| O This is my first visit (1)   |                        |                  |               |   |                 |  |  |
| Occasionally (Once eve   | ery two to thr         | ee months.)      | (2)           |   |                 |  |  |
| O Frequently (At least or  | ice a month.)          | (3)              |               |   |                 |  |  |
|  |                        |                  |               |   |                 |  |  |
|  |                        |                  |               |   |                 |  |  |
| 7. Please answer the follo   | owing questic<br>1 (1) | ' <del>-</del> ' | =             |   | n.mil.<br>5 (5) |  |  |
| What is your overall satisfaction with this site? (1=Very Dissatisfied. 5=Very Satisfied) (1)            | 0                      | 0                | 0             | 0 | 0               |  |  |
| How likely are you to return to this site? (1=Very Unlikely. 5=Very Likely) (2)                          | 0                      | 0                | 0             | 0 | 0               |  |  |
| How likely are you to<br>recommend this site to<br>someone else? (1=Very<br>Unlikely. 5=Very Likely) (3) | 0                      | 0                | 0             | 0 | 0               |  |  |