IAM 2011 (SEARCH)					
Q1. Why did you do this search for information?					
Please check all that apply. Note: You can check more than one objection.  Note to programmer: MUST check at least one	ive.				
To address a clinical question (problem) about a specific patient	0				
If 'Yes', then display TEXT BOX. Instruction: What was your question	?				
To fulfill a personal educational objective	0				
To satisfy curiosity or for personal interest	0				
To look up something I had forgotten	0				
To share information with a patient, their family, or home health aides	0				
To exchange information with other health professionals (e.g., a colleague)	0				
To manage aspects of patient care with other health professionals	0				
Q2. Did you find relevant information that partially or completely met your objective $\mathbf{v}_{Yes}$	ctive(s)?				
If 'No', then disable subsequent questions. Display this message—"A Mainpro® credit is not available for this search." Option — Contact at Q3. What is the impact of this information on you or your practice? Please check	librarian				
Note: You can check more than one type of impact. Note to programmer: MUST check at least one					
My practice was (will be) changed and improved	0				
If Yes, what aspect was (will be) changed or improved?					
Diagnostic approach?	0				
• Therapeutic approach?	0				
<ul> <li>Disease prevention or health education?</li> </ul>	0				
• Prognostic approach?	0				
I learned something new	0				
This information confirmed I did (am doing) the right thing	0				
I am reassured	0				
I am reminded of something I already knew	0				
I am dissatisfied	0				
There is a problem with the presentation of this information	0				
If Yes, what problem do you see?					
• Too much information?	0				

<ul><li>Not enough information?</li></ul>			C	)		
<ul><li>Information poorly written?</li></ul>			C	)		
• Too technical?			C	)		
<ul> <li>Other? If 'Yes', TEXT BOX with mandator</li> <li>Please describe this problem.</li> </ul>	ry commen	t. Instructi	ion:	)		
I disagree with the content of this information			C	)		
This information is potentially harmful			C	)		
If 'Yes', TEXT BOX with mandatory comment. Instruction:	: Please des	cribe how t	this informatio	on may be	harmfu	l.
Q4. Did you (will you) use this information for a specific patient?	Yes	No	Possibly			
Answering "No" or "Possibly" to question 4 will	0	•	0			
disable items of 'use' and question 5						
If YES: <i>Please check all that apply</i> Note: You can check more than one type of use. Note As a result of this information I managed (or will manage) this I had several options for this patient, and I used (will use) this in I did not know what to do, and I used (will use) this information I thought I knew what to do, and I used this information to be in I used this information to better understand a particular issue re I used (will use) this information in a discussion with this patient I used (will use) this information to persuade this patient, or to patient	patient diffent of the manage more certain lated to this int, or with continuous part of the manage	erently to justify a this patien about the n patient ther health	choice t nanagement of professionals	this patier	nt patient	O O O O or this
Q5. For this patient, did you observe (or do you expect) any applying this information?	health ben	efits as a r	esult of	Yes	No	Possibly
Answering "No" or "Possibly" will disable items of	health be	nefit'		0	•	0
If YES: Check all that apply. You may check more the Note to programmer: MUST check at least one	han 1 box					
This information helped to improve (will help to improve) this adapt to significant life stressors)	patient's he	alth status,	functioning or	resilience	(i.e., abi	ility to O
This information helped to prevent (will help to prevent) a disease	ase or worse	ening of dis	ease for this pa	atient		0
This information helped to avoid (will help to avoid) unnecessal preventative interventions or a referral, for this patient	ry or inappi	ropriate trea	ntment, diagno	stic proced	lures,	0
This information helped to decrease this patient's worries about	t a treatmen	t, diagnosti	c procedure or	preventati	ve inter	vention O

This information helped to increase this patient's knowledge, or their family or home health aides' knowledge				
Comment on this information or this questionnaire.				
Display thank you message - acknowledge credit earned.				