



PMB, Print Measurement Bureau would appreciate your cooperation in completing the enclosed questionnaire, which will provide valuable information about readership of medical publications.

You have been selected as part of a scientifically constructed national sample of physicians to receive the questionnaire. In accordance with the Professional Ethics and Standards of the Marketing Research and Intelligence Association, your answers will remain totally confidential. They will be reported only in aggregate form.

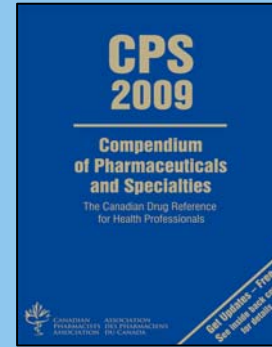
We appreciate that your time is valuable. The content of the questionnaire has been kept to a minimum, and its format is as streamlined as possible.

Thank you in advance for your cooperation.

Stephen Ferley  
President, PMB Print Measurement Bureau

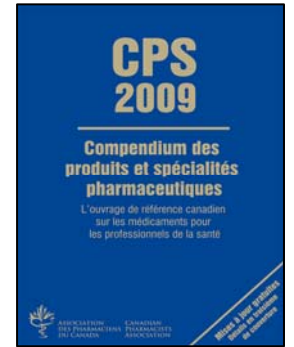
*PMB Print Measurement Bureau is a not-for-profit tripartite industry organization founded in 1973 with members representing all sectors of the Canadian media industry.*

V1-1



**COMPENDIUM OF PHARMACEUTICALS AND SPECIALTIES**

Published annually



**COMPENDIUM DES PRODUITS ET SPÉCIALITÉS PHARMACEUTIQUES**

Published annually

Q1

On average, how often do you personally refer to or read this publication?

- 1 Daily
- 2 Weekly
- 3 Monthly
- 4 Receive but do not use GO TO NEXT PUBLICATION
- 5 Do not receive it

- 1 Daily
- 2 Weekly
- 3 Monthly
- 4 Receive but do not use GO TO NEXT PUBLICATION
- 5 Do not receive it

Q2

In an average week, how many times do you personally refer to or read this publication?

- 1 Over 40
- 2 31 - 40
- 3 21 - 30
- 4 16 - 20
- 5 11 - 15
- 6 6 - 10
- 7 1 - 5
- 8 None

- 1 Over 40
- 2 31 - 40
- 3 21 - 30
- 4 16 - 20
- 5 11 - 15
- 6 6 - 10
- 7 1 - 5
- 8 None

Q3

Publication rating:

Valuable information resource

TOTALLY AGREE (5) (4) (3) (2) (1) TOTALLY DISAGREE

TOTALLY AGREE (5) (4) (3) (2) (1) TOTALLY DISAGREE

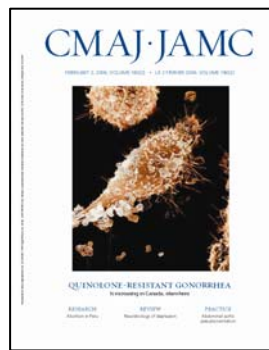
09 (W09-W11)

V1-2



**CANADIAN FAMILY PHYSICIAN**

Published monthly



**CANADIAN MEDICAL ASSOCIATION JOURNAL**

Published 25 times per year



**DOCTOR'S REVIEW**

Published monthly



**PARKHURST EXCHANGE**

Published monthly

Q1

Out of every four issues, how many do you usually read or look through?

(By "read or look through", we mean looking into it and reading something, no matter how briefly.)

- 1 4 out of 4
- 2 3 out of 4
- 3 2 out of 4
- 4 1 out of 4
- 5 Less often than 1 out of 4
- 6 Never look into an issue\*
- 7 Never - Do not receive\*  
\*(If "never", go to next publication)

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- 6 Never look into an issue\*
- 7 Never - Do not receive\*  
\*(If "never", go to next publication)

Q2

a) Thinking of the last issue you read, how much of it did you read or look through?

b) About how much time in total did you spend reading or looking through it?

- 1 All of it
- 2 Most of it (about ¾)
- 3 About half
- 4 Less than half (about ¼)
- 5 Very little

- 1 Less than 10 minutes
- 2 10 - 20 minutes
- 3 21 - 30 minutes
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Q3

Publication rating:

Valuable information resource

I enjoy reading this publication

TOTALLY AGREE (5) (4) (3) (2) (1) TOTALLY DISAGREE

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TOTALLY AGREE (5) (4) (3) (2) (1) TOTALLY DISAGREE

V1-3



**THE CANADIAN JOURNAL OF CONTINUING MEDICAL EDUCATION**

Published monthly



**THE CANADIAN JOURNAL OF DIAGNOSIS**

Published monthly



**THE MEDICAL POST**

Published 25 times per year



**CANADIAN JOURNAL OF RURAL MEDICINE**

Published quarterly

Q1

Out of every four issues, how many do you usually read or look through?

(By "read or look through", we mean looking into it and reading something, no matter how briefly.)

- 1 4 out of 4
  - 2 3 out of 4
  - 3 2 out of 4
  - 4 1 out of 4
  - 5 Less often than 1 out of 4
  - 6 Never look into an issue\*
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- \*(If "never", go to next publication)

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  - 3 2 out of 4
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Q3

Publication rating:

Valuable information resource

I enjoy reading this publication

TOTALLY AGREE	TOTALLY DISAGREE			
5	4	3	2	1

TOTALLY AGREE	TOTALLY DISAGREE			
5	4	3	2	1

TOTALLY AGREE	TOTALLY DISAGREE			
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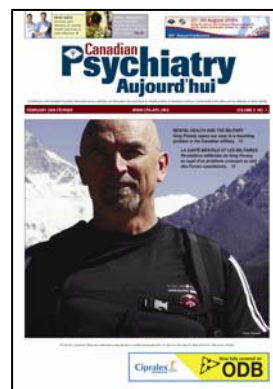
TOTALLY AGREE	TOTALLY DISAGREE			
5	4	3	2	1

V1-4



**CANADIAN JOURNAL OF SURGERY**

Published every 2 months



**CANADIAN PSYCHIATRY AUJOURD'HUI**

Published every 2 months



**CANADIAN RESPIRATORY JOURNAL**

Published every 2 months



**GERIATRICS & AGING**

Published 10 times per year

Q1

Out of every four issues, how many do you usually read or look through?

(By "read or look through", we mean looking into it and reading something, no matter how briefly.)

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Q3

Publication rating:

Valuable information resource

I enjoy reading this publication

TOTALLY AGREE	TOTALLY DISAGREE			
5	4	3	2	1

TOTALLY AGREE	TOTALLY DISAGREE			
5	4	3	2	1

TOTALLY AGREE	TOTALLY DISAGREE			
5	4	3	2	1

TOTALLY AGREE	TOTALLY DISAGREE			
5	4	3	2	1

V1-5



**JOURNAL OF OBSTETRICS AND GYNAECOLOGY CANADA**

Published monthly



**JOURNAL OF PSYCHIATRY & NEUROSCIENCE**

Published every 2 months



**ONTARIO MEDICAL REVIEW**

Published 11 times per year



**PAEDIATRICS & CHILD HEALTH**

Published 10 times per year

Q1

Out of every four issues, how many do you usually read or look through?

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Q3

Publication rating:

Valuable information resource

I enjoy reading this publication

TOTALLY AGREE				TOTALLY DISAGREE
5	4	3	2	1

TOTALLY AGREE				TOTALLY DISAGREE
5	4	3	2	1

TOTALLY AGREE				TOTALLY DISAGREE
5	4	3	2	1

TOTALLY AGREE				TOTALLY DISAGREE
5	4	3	2	1

V1-6



**PAIN RESEARCH & MANAGEMENT**

Published every 2 months



**PERSPECTIVES IN CARDIOLOGY**

Published 10 times per year



**THE CANADIAN JOURNAL OF CARDIOLOGY**

Published monthly



**THE CANADIAN JOURNAL OF GASTROENTEROLOGY**

Published monthly

Q1

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Q3

Publication rating:

Valuable information resource

I enjoy reading this publication

TOTALLY AGREE				TOTALLY DISAGREE
5	4	3	2	1

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5	4	3	2	1

TOTALLY AGREE				TOTALLY DISAGREE
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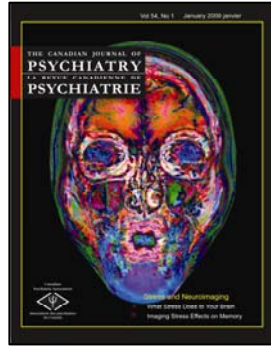
TOTALLY AGREE				TOTALLY DISAGREE
5	4	3	2	1

V1-7



**THE CANADIAN JOURNAL OF INFECTIOUS DISEASES & MEDICAL MICROBIOLOGY**

Published 4 times per year



**THE CANADIAN JOURNAL OF PSYCHIATRY**

Published monthly



**THE NEW ENGLAND JOURNAL OF MEDICINE**

Published weekly



**L'ACTUALITÉ MÉDICALE**

Published 25 times per year

Q1

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Q3

Publication rating:

Valuable information resource

I enjoy reading this publication

TOTALLY AGREE				TOTALLY DISAGREE
5	4	3	2	1

TOTALLY AGREE				TOTALLY DISAGREE
5	4	3	2	1

TOTALLY AGREE				TOTALLY DISAGREE
5	4	3	2	1

TOTALLY AGREE				TOTALLY DISAGREE
5	4	3	2	1

V1-8



**LE CLINICIEN**

Published monthly



**LE MÉDECIN DU QUÉBEC**

Published monthly



**MAGAZINE SANTÉ INC.**

Published every 2 months

Q1

Out of every four issues, how many do you usually read or look through?

(By "read or look through", we mean looking into it and reading something, no matter how briefly.)

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- \*(If "never", go to next publication)

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Q3

Publication rating:

Valuable information resource

I enjoy reading this publication

TOTALLY AGREE				TOTALLY DISAGREE
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TOTALLY AGREE				TOTALLY DISAGREE
5	4	3	2	1

TYPE OF PRACTICE	YEARS IN CURRENT FIELD OF PRACTICE	YEARS	MEDICAL CONFERENCES/ CONTINUING EDUCATION COURSES	PARTICIPATED IN PAST YEAR	ELECTRONICS/ TECHNOLOGY	USE
Office (Solo) ..... <input type="checkbox"/> 1 Office (Group) ..... <input type="checkbox"/> 2 Hospital ..... <input type="checkbox"/> 3 Clinic ..... <input type="checkbox"/> 4  <b>If Group, how many doctors, including yourself, are included?</b> 1 - 3 ..... <input type="checkbox"/> 1 4 - 6 ..... <input type="checkbox"/> 2 7 - 10 ..... <input type="checkbox"/> 3 11+ ..... <input type="checkbox"/> 4	Less than 5 ..... <input type="checkbox"/> 1 5 - 10 ..... <input type="checkbox"/> 2 11 - 15 ..... <input type="checkbox"/> 3 16 - 20 ..... <input type="checkbox"/> 4 More than 20 ..... <input type="checkbox"/> 5		None 1-2 3-5 6+ Accredited CME courses In person ..... <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 Online via internet ..... <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 Medical conferences ..... <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4		<b>Do you use ...?</b> Yes No Electronic Patient Records ..... <input type="checkbox"/> 1 <input type="checkbox"/> 2 Computers in the examining room .. <input type="checkbox"/> 1 <input type="checkbox"/> 2 Computers when counseling patients ..... <input type="checkbox"/> 1 <input type="checkbox"/> 2  <b>How often do you visit these web sites?</b> Daily Weekly Monthly Often Never The New England Journal of Medicine (www.nejm.org) ..... <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 Medical portals (such as Medscape, WebMD, mdBriefcase, mdPassport or CMA) ..... <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 Disease information sites <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 Medical publication web sites ..... <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 Pharmaceutical company web sites ..... <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5	
<b>MEDICAL SPECIALTY, AND OTHER AREAS YOU WORK IN</b>  Specialty Other Areas General Practice/ Family Medicine ..... <input type="checkbox"/> 1 <input type="checkbox"/> 1 Surgery ..... <input type="checkbox"/> 2 <input type="checkbox"/> 2 Internal Medicine ..... <input type="checkbox"/> 3 <input type="checkbox"/> 3 Psychiatry ..... <input type="checkbox"/> 4 <input type="checkbox"/> 4 Neurology ..... <input type="checkbox"/> 5 <input type="checkbox"/> 5 Obstetrics and/or Gynaecology .. <input type="checkbox"/> 6 <input type="checkbox"/> 6 Paediatrics ..... <input type="checkbox"/> 7 <input type="checkbox"/> 7 Cardiology ..... <input type="checkbox"/> 8 <input type="checkbox"/> 8  <b>Other specialties:</b> 1) _____ 2) _____  <b>Other areas:</b> 1) _____ 2) _____	<b>NUMBER OF PATIENTS PER DAY</b> None ..... <input type="checkbox"/> 1 Under 5 ..... <input type="checkbox"/> 2 5 - 14 ..... <input type="checkbox"/> 3 15 - 24 ..... <input type="checkbox"/> 4 25 - 34 ..... <input type="checkbox"/> 5 35 - 44 ..... <input type="checkbox"/> 6 45+ ..... <input type="checkbox"/> 7	<b>USUAL NUMBER</b> None ..... <input type="checkbox"/> 1 Under 5 ..... <input type="checkbox"/> 2 5 - 14 ..... <input type="checkbox"/> 3 15 - 24 ..... <input type="checkbox"/> 4 25 - 34 ..... <input type="checkbox"/> 5 35 - 44 ..... <input type="checkbox"/> 6 45 - 54 ..... <input type="checkbox"/> 7 55 - 64 ..... <input type="checkbox"/> 8 65+ ..... <input type="checkbox"/> 9	<b>POLICY ON PRESCRIBING NEW DRUGS</b> <b>Do you like to try a promising new drug? (Please check ✓ one box)</b> Before it is released for general use ..... <input type="checkbox"/> 1 As soon as it's released ..... <input type="checkbox"/> 2 After others have tried it successfully ..... <input type="checkbox"/> 3 Once it is in common use ..... <input type="checkbox"/> 4	<b>USUALLY PRESCRIBE</b> None ..... <input type="checkbox"/> 1 Under 5 ..... <input type="checkbox"/> 2 5 - 14 ..... <input type="checkbox"/> 3 15 - 24 ..... <input type="checkbox"/> 4 25 - 34 ..... <input type="checkbox"/> 5 35 - 44 ..... <input type="checkbox"/> 6 45 - 54 ..... <input type="checkbox"/> 7 55 - 64 ..... <input type="checkbox"/> 8 65+ ..... <input type="checkbox"/> 9	<b>PHARMACEUTICAL COMPANY DETAILING</b> <b>What best describes your policy on seeing pharmaceutical representatives in person?</b> See all or most ..... <input type="checkbox"/> 1 See selectively ..... <input type="checkbox"/> 2 See only when new information available.. <input type="checkbox"/> 3 Refuse to see ..... <input type="checkbox"/> 4 Detail reps do not call ..... <input type="checkbox"/> 5  <b>Please indicate how often you see reps in person, and how often you participate in E-Detailing/detailing by phone.</b> In person Detailing by phone E-Detailing (internet) Times per month None ..... <input type="checkbox"/> 1 <input type="checkbox"/> 1 <input type="checkbox"/> 1 1 - 4 ..... <input type="checkbox"/> 2 <input type="checkbox"/> 2 <input type="checkbox"/> 2 5 - 8 ..... <input type="checkbox"/> 3 <input type="checkbox"/> 3 <input type="checkbox"/> 3 9 - 11 ..... <input type="checkbox"/> 4 <input type="checkbox"/> 4 <input type="checkbox"/> 4 12 or more ..... <input type="checkbox"/> 5 <input type="checkbox"/> 5 <input type="checkbox"/> 5	<b>PARTICIPATION</b>  <b>We conduct a number of market research surveys during the year. If you would be willing to consider participating in these studies, please indicate below.</b> Yes, I would be interested ..... <input type="checkbox"/> 1 No, please do not contact me ..... <input type="checkbox"/> 2  <b>What is your e-mail address? (optional)</b> _____
	<b>NUMBER OF PRESCRIPTION ITEMS (NOT FORMS) WRITTEN PER DAY</b> None ..... <input type="checkbox"/> 1 Under 5 ..... <input type="checkbox"/> 2 5 - 14 ..... <input type="checkbox"/> 3 15 - 24 ..... <input type="checkbox"/> 4 25 - 34 ..... <input type="checkbox"/> 5 35 - 44 ..... <input type="checkbox"/> 6 45 - 54 ..... <input type="checkbox"/> 7 55 - 64 ..... <input type="checkbox"/> 8 65+ ..... <input type="checkbox"/> 9	<b>USUAL NUMBER</b> None ..... <input type="checkbox"/> 1 Under 5 ..... <input type="checkbox"/> 2 5 - 14 ..... <input type="checkbox"/> 3 15 - 24 ..... <input type="checkbox"/> 4 25 - 34 ..... <input type="checkbox"/> 5 35 - 44 ..... <input type="checkbox"/> 6 45 - 54 ..... <input type="checkbox"/> 7 55 - 64 ..... <input type="checkbox"/> 8 65+ ..... <input type="checkbox"/> 9				
	<b>AGE</b> Under 40 ..... <input type="checkbox"/> 1 40 - 64 ..... <input type="checkbox"/> 2 65 - 69 ..... <input type="checkbox"/> 3 70+ ..... <input type="checkbox"/> 4					