



How many years (post-training) have you been working in your profession?

What is your age?

Highest level of education?

- High School
- Associate's
- Bachelor's
- Master's
- Doctorate

Are you certified by the Board of Certified Psychometrists?

- Yes
- No

In which state are you employed?

What is your current setting of practice (select all that apply)?

- Private Practice
- General Hospital
- Academic Medical Center
- Psychiatric Hospital or Facility
- Rehabilitation Hospital or Setting
- Community Mental Health Setting
- Veterans Hospital or Military Hospital/Clinic
- Law Firm
- Other

If other, please describe setting.

What is the typical age range of your patients (you can select more than one)?

- 6-12
- 13-18
- 19-35
- 35-60
- 60+

Estimated number of patients you test (per week)?

Estimated number of hours spent testing patients (per week)?

Estimated number of hours scoring (per week)?

What time of day do you typically score? (drag selection and rank order)

Early-morning

Mid-morning

Mid-afternoon

Late-afternoon

What percentage of your scoring is done electronically?

Does your site use tablets/laptops/computers for test administration (e.g., WAIS, WISC, WCST)?

- Yes
 No

Please describe which tasks are administered electronically

Does your site use template scoring tools? (e.g., excel spreadsheets)

- Yes
 No

Please describe

Does your site utilize cross checking/double scoring?

- Yes
- No

Does your site use a score summary sheet? (i.e., a sheet with scores to summarize performance on a neuropsychological battery of tests)

- Yes
- No

Please answer the following through the scaling options below.

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
My motivation is lower when I am fatigued.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Fatigue interferes with my work, family, or social life.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel physically exhausted.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel emotionally exhausted.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My work is emotionally exhausting.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel burnt out because of my work.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My work frustrates me.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel worn out at the end of the working day.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am exhausted in the morning at the thought of another day at work.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
I have enough energy for family and friends during leisure time.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel satisfied with my quality of life at work.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please provide any additional information which you feel would be beneficial or to clarify any above responses.

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