Wellness Survey

1. How long have you been diagnosed with MS?
	1. 0-2 years
	2. 2-5 years
	3. 5-10 years
	4. Greater than 10 years
2. Remembering when you were first diagnosed with MS, what information did you receive that was most valuable? (You may choose more than one answer)
	1. Disease information (e.g. symptoms, progression, prognosis)
	2. Medical management (e.g. medication)
	3. Nutrition
	4. Physical activity (e.g. exercise routines, benefits of physical therapy)
	5. Psychosocial concerns (e.g. adjusting, influence on employment, financial concerns)
	6. Support Services
	7. Other (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Remembering when you were first diagnosed with MS, was there information that you were not aware of that you believe would have been valuable at the time? (You may choose more than one answer)
	1. Disease information (e.g. symptoms, progression, prognosis)
	2. Medical management (e.g. medication)
	3. Nutrition
	4. Physical activity (e.g. exercise routines, benefits of physical therapy)
	5. Psychosocial concerns (e.g. adjusting, influence on employment, financial concerns)
	6. Support Services
	7. Other (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. How would you describe your current level of physical activity relative to your activity level before your diagnosis?
	1. As active as I was before I was diagnosed with MS
	2. More active than I was before I was diagnosed with MS
	3. Less active than I was before my diagnosis with MS
	4. Not active, but I am interested in being more active
	5. Not active, and I am not interested in increasing my physical activity
	6. Not active because I feel I am unable to exercise
	7. Other (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
5. If you answered (a), (b), or (c), on the previous question, please list the activities you typically do each day to stay active.
6. How interested would you be in attending a free wellness event in your local community, specifically for people with MS?
	1. Very interested
	2. Somewhat interested
	3. Not sure
	4. Not interested
	5. Other (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
7. If you would consider attending a free wellness event for people with MS, what topics would you like to learn more about? (You may choose more than one answer)
	1. Group exercise
	2. Individual exercise
	3. Exercises to do at home
	4. Personal training
	5. Cognitive exercise
	6. Nutrition for people with MS
	7. Medical information
	8. Medication management
	9. Social support groups for self
	10. Support groups for family members
	11. Employment opportunities
	12. Having your balance and walking evaluated by a physical therapist
	13. Fall prevention
	14. Competitive sports
	15. Wheelchair mobility
	16. Adaptive devices
	17. Dealing with visual changes
	18. Spasticity
	19. Fatigue
	20. Heat sensitivity
	21. Other (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
8. Please share your contact information with us if you may be interested in attending a free wellness event for people with MS.