

Healthcare workers attitude towards Third dose COVID- 19 vaccines in Jordan

The results of this survey will provide us insights in how the healthcare workers interact with COVID-19 vaccines especially the third dose. But we will not spam you in any way! So do not worry, you will remain completely anonymous.

***Required**

1. Age *

2. Gender *

Mark only one oval.

☐ Male

☐ Female

3. What is your current marital status? *

Mark only one oval.

☐ single

☐ married without children

☐ married with children

4. What is your profession in the healthcare field? *

Mark only one oval.

- ☐ medical doctor-surgeon
- ☐ medical doctor-internal medicine
- ☐ medical doctor-pediatrics
- ☐ medical doctor-OB/GYN
- ☐ medical doctor-family medicine
- ☐ medical doctor-anesthesiologist
- ☐ medical doctor-lab medicine
- ☐ medical doctor-general practice
- ☐ medical doctor-other
- ☐ medical student
- ☐ nurse-practicing
- ☐ nurse-academic
- ☐ nursing student
- ☐ dentist
- ☐ dental student
- ☐ pharmacist
- ☐ pharmacy student
- ☐ research-principal investigator
- ☐ research-post doctorate
- ☐ research-PhD student
- ☐ nutritionist
- ☐ physiotherapist

5. place of work *

Mark only one oval.

- ☐ university hospitaly
- ☐ Royal Medical Services
- ☐ MOH
- ☐ private sector

6. Location of work? *

Mark only one oval.

- ☐ Irbid
- ☐ Mafraq
- ☐ Zarqa
- ☐ Ajloun
- ☐ Jerash
- ☐ Amman
- ☐ Madaba
- ☐ Balqa
- ☐ Karak
- ☐ Tafilah
- ☐ Maan
- ☐ Aqaba

7. Nature of work: *

Mark only one oval.

- ☐ Work clinically,without direct contact with patients
- ☐ work clinically,with direct contact with patients
- ☐ work clinically,with direct contact with COVID-19 patients
- ☐ No clinical work

8. history of COVID-19 infection: *

Mark only one oval.

- ☐ yes
- ☐ no
- ☐ do not know

Healthcare
workers
attitude
towards
Third dose
COVID-19
vaccines
in Jordan

The results of this survey will provide us insights in how the healthcare workers interact with COVID-19 vaccines especially the third dose. But we will not spam you in any way! So do not worry, you will remain completely anonymous.

9. Age *

10. Gender *

Mark only one oval.

☐ Male

☐ Female

11. What is your current marital status? *

Mark only one oval.

☐ single

☐ married without children

☐ married with children

12. What is your profession in the healthcare field? *

Mark only one oval.

- ☐ medical doctor-surgeon
- ☐ medical doctor-internal medicine
- ☐ medical doctor-pediatrics
- ☐ medical doctor-OB/GYN
- ☐ medical doctor-family medicine
- ☐ medical doctor-anesthesiologist
- ☐ medical doctor-lab medicine
- ☐ medical doctor-general practice
- ☐ medical doctor-other
- ☐ medical student
- ☐ nurse-practicing
- ☐ nurse-academic
- ☐ nursing student
- ☐ dentist
- ☐ dental student
- ☐ pharmacist
- ☐ pharmacy student
- ☐ research-principal investigator
- ☐ research-post doctorate
- ☐ research-PhD student
- ☐ nutritionist
- ☐ physiotherapist

13. place of work *

Mark only one oval.

- ☐ university hospitaly
- ☐ Royal Medical Services
- ☐ MOH
- ☐ private sector

14. Location of work? *

Mark only one oval.

- ☐ Irbid
- ☐ Mafrag
- ☐ Zarqa
- ☐ Ajloun
- ☐ Jerash
- ☐ Amman
- ☐ Madaba
- ☐ Balqa
- ☐ Karak
- ☐ Tafeleh
- ☐ Maan
- ☐ Aqaba

15. Nature of work: *

Mark only one oval.

- ☐ Work clinically,without direct contact with patients
- ☐ work clinically,with direct contact with patients
- ☐ work clinically,with direct contact with COVID-19 patients
- ☐ No clinical work

16. history of COVID-19 infection: *

Mark only one oval.

- ☐ yes
- ☐ no
- ☐ do not know

Healthcare workers attitude towards
COVID-19 vaccines in Jordan

17. If Third dose COVID-19 vaccines *
were available at your work place,
would you be willing to recommend it
to your patients?

Mark only one oval.

- ☐ yes,certainly
☐ yes,probably
☐ No,probably not
☐ No,certainly not
☐ Do not know

18. If Third dose COVID-19 vaccines *
were available at your work place,
would you be willing to be vaccinated
yourself?

Mark only one oval.

- ☐ yes,certainly
☐ yes,probably
☐ No,probably not
☐ No,certainly not
☐ Do not know

19. How much do you rate your Third dose COVID-19 vaccine acceptance? *

Mark only one oval.

- ☐ High
- ☐ Moderate
- ☐ Hesitancy/reluctance

20. Were you vaccinated against seasonal influenza for the winter 2020/21 season? *

Mark only one oval.

- ☐ Yes
- ☐ No
- ☐ Do not know

21. Do you sometimes hesitate to recommend *
booster dose of vaccines for your patients, for
example, when you have questions about
their benefits or risks?

Mark only one oval per row.

Never sometimes often alw

**For
adults
(≥ 18
years
old)
with a
chronic
diseas**

☐ ☐ ☐ ☐

**Among
adults
aged ≥
65
years
old**

☐ ☐ ☐ ☐

22. The safety of a vaccine developed in *
an emergency, during an epidemic,
cannot be considered guaranteed

Mark only one oval.

- ☐ Agree
☐ Disagree
☐ Do not know

23. In your opinion, for the population as a whole, how serious is COVID-19 on a scale of 0 to 10? *

Mark only one oval.

low

0

☐

1

☐

2

☐

3

☐

4

☐

5

☐

6

☐

7

☐

8

☐

9

☐

10

☐

high

24. It is preferable to acquire immunity against infectious diseases naturally (by having the disease) than by vaccination *

Mark only one oval.

- ☐ Agree
- ☐ Disagree
- ☐ Do not know

25. I trust science to develop safe effective new vaccines *

Mark only one oval.

- ☐ Agree
- ☐ Disagree
- ☐ Do not know

26. I trust the ministry of health to ensure that the booster dose of COVID-19 vaccines are safe *

Mark only one oval.

- ☐ Agree
- ☐ Disagree
- ☐ Do not know

27. I prefer to wait for more scientific *
reviews about the safety and efficacy
of the Third dose COVID-19 vaccines

Mark only one oval.

- ☐ Agree
- ☐ Disagree
- ☐ Do not know

This content is neither created nor endorsed by Google.

Google Forms

