

**American Association of Nurse Anesthesiology**  
**AANA Electronic Survey Policy and Order Form**

Version 6-1-22

The American Association of Nurse Anesthesiology (AANA) will consider requests to manage email surveys for individuals interested in collecting data from AANA members. Email addresses are not given to any researcher and are held by the AANA. The AANA must approve the process and the content of the survey to be considered for this service. AANA reserves the right to refuse fulfillment of any request. At no time will the researcher have access to AANA member email addresses.

**IMPORTANT:**

- **PLEASE READ THE ENTIRE ORDER AGREEMENT CAREFULLY.**
- All required material must be submitted electronically in one email.
- Survey instrument and cover letter must be in FINAL format upon submission. Any requested revisions during the proofing stage will incur additional charges if they were not included in the original files.
- **PHONE ORDERS ARE NOT ACCEPTED.**
- **PAYMENT MUST BE RECEIVED BEFORE ANY ACTIVITY ON THE PROJECT BEGINS.** (Payment will be processed after all requirements are approved.)
- Confirmation of receipt of request will be acknowledged within five business days of receipt.
- Recently the survey response rate has dramatically declined to as low as 3%. Researchers will be unable to secure more than the maximum amount of names allowed (3,000) to resend the survey. Instrument deployment only surveys may not send more than one reminder under any circumstances.
- All survey cover letters must include the following text ~ Note: This invitation does not imply any endorsement of the survey research and/or its findings by the AANA. The survey contents and findings are the sole responsibility of the individual conducting the survey.

**AANA Electronic Survey Application**

To be considered for the use of the AANA email survey services you are **required** to submit the following material:

- An endorsement letter or email from the research advisor/director/dean/manager of your institution indicating that an instrument and study have been reviewed and approved;
- Completed Email Order Form;
- Copy of official notice of your approved IRB;
- Documentation of Research Methodology to include: purpose, hypothesis, methods, anticipated analysis plan and plan for dissemination of the results;
- Copy of the survey and the cover email with a subject line;
- If you are an AANA member, provide your membership number on the application.
  
- If you choose the Instrument Deploy Only service, you must provide AANA with documentation indicating that your electronic survey platform will not retrieve email addresses or identified information (such as telephone numbers, IP addresses, etc.) from the respondents.

**Disclaimer**

The AANA reserves the right to refuse fulfillment of any survey order if the AANA **does not approve** the purposes or context of the research.

**American Association of Nurse Anesthesiology**  
**AANA Electronic Survey Policy and Order Form**

Version 6-1-22

### **Research Survey Help Desk**

If you have any questions regarding the survey application,  
please contact:  
Bonnie Lowth, Program Manager  
at (847) 655-1170, option 2 or [researchsurvey@aana.com](mailto:researchsurvey@aana.com).

### **Application Submission**

Submit ALL the required materials along with your application in one email to [researchsurvey@aana.com](mailto:researchsurvey@aana.com). ***Return only pages 1-6 of this application, not the entire document.*** You will be notified by email once your survey has been approved; instructions for payment online will be provided at that time.

**Full Service Surveys:** Email the following:

1. The survey tool and cover letter as two separate Word documents. The survey tool should display all questions and answers, specifying which answers are “select all that apply/select only one”.
2. The remaining documents should be combined into one PDF.

**Instrument Deployment Only Surveys:** Email the following:

1. The survey tool as a PDF; the tool should display all questions and answers.
2. The cover letter as a Word document which should include an active link to the survey tool.
3. The remaining documents should be combined into one PDF.

**Important note: The survey policy and fees will be applied based on the policy and fee schedule posted online on *the day of your submission*.**

***On the day of submission*, please confirm that you are using the current application form that is posted online.**

**A fee will incur if not compliant.**

**American Association of Nurse Anesthesiology**  
**AANA Electronic Survey Policy and Order Form**

Version 6-1-22

**AANA Electronic Survey Fee Schedule**

AANA offers a service to deliver and manage email surveys for individuals interested in collecting data from AANA members. Results of the survey will be provided in an Excel file. A fee structure is listed below for approved researchers to purchase the services.

**Fee Schedule:**

A researcher must meet the survey application requirements, and receive approval from the AANA Research Division before any purchase. Two types of electronic survey services are available for purchase: **A) Full-Service** and **B) Instrument Deployment Only Service**.

**A) Required Fees for Full-Service:**

1) **\$600 setup fee** includes the instrument input, two emails (one survey invitation, one reminder), and the data results in Excel format with no identifiers.

2) **Fee for the number\*\* of questions in the instrument:**

- 1-25 questions: \$250
- 26-50 questions: \$500
- 51-75 questions: \$750

\*\* *A matrix question will NOT be counted as only one question.* Matrix questions<sup>1</sup> will be counted differently; see footnote one for the counting method. A matrix question is defined as a question that groups several questions under the same set of choices as one question.

3) **Fee for number of addresses:**

# Addresses	Fee
○ 0 – 1,500	\$ 750
○ 1,501 – 2,000	\$1,000
○ 2,001 – 2,500	\$1,250
○ 2,501 – 3,000	\$1,500

*A maximum of 3,000 email addresses can be surveyed.* If you wish to request more than 3000 email addresses **justification for the larger sample must accompany** this request. *Allowing a larger sample size of email addresses is driven by the uniqueness of the survey contents and population being studied.* Providing justification does not guarantee approval of the request.

4) **The additional fees<sup>2</sup> that may apply are:**

- ✓ Additional email messages for \$100/per message (max. 2).
- ✓ \$500 for developing and field testing the complicated instrument format. That is, if a survey has more than **two branching** (i.e., skip logic) or **three matrix** questions, this additional fee will apply.
- ✓ Fee for complicated sample selections (the researcher will be informed).

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<sup>1</sup> **The question number for a matrix question will be counted as 1/3 of the number on the questions that are nested in a matrix question.** (Example: If a matrix question has **six** questions in it, this matrix question will be counted as **two** questions for the fee purpose.)

<sup>2</sup> Before deploying the survey, the additional fees will be discussed with and agreed upon by the researcher.

**American Association of Nurse Anesthesiology**  
**AANA Electronic Survey Policy and Order Form**

Version 6-1-22

**AANA Electronic Survey Fee Schedule (Continued)**

**B) Required Fees for Instrument Deployment Only:**

**(This option is for approved researchers whose instruments are already prepared in a survey tool system, such as SurveyMonkey, Qualtrics, etc.)**

- 1) **\$300 setup fee** for sending two emails (one survey invitation, one reminder) to the targeted recipients. The reminders will be sent to **all** recipients. (More than one reminder is not permitted.)
  - **Your email message, cover letter and instrument must be approved first by your IRB and then by the AANA research division.**
  - The cover/reminder letters or survey notes **cannot** indicate or imply that AANA supports or endorses the survey.
  - You must only provide **one survey link** to send to the recipients. Your cover letter (submitted in a Word document) must include this link.
  - AANA reserves the right to **affirm** that the approved instrument, and the survey is closed according to the approved schedule (4 weeks from launch date).

**2) Fee for number of addresses:**

# Addresses	Fee
○ 0 – 1,500	\$ 750
○ 1,501 – 2,000	\$1,000
○ 2,001 – 2,500	\$1,250
○ 2,501 – 3,000	\$1,500

***A maximum of 3,000 email addresses can be surveyed.*** If you wish to request more than 3,000 email addresses justification for the larger sample must accompany this request. Allowing a larger sample size of email addresses is a rare occurrence and driven by the uniqueness of the survey contents and population being studied.

- 3) **Reminders:** One reminder will be sent one week before the survey closes. Additional reminders are not allowed for instrument deployment only surveys.

**C) External Entity Fees:** If you are **NOT** an AANA member, the fees will be different. Please add \$500 to the total.

**American Association of Nurse Anesthesiology**  
**AANA Electronic Survey Policy and Order Form**

Version 6-1-22

**Sample Selection Criteria:**

The sample will be randomly selected from the pool of your **specified** selection criteria at the application form. **Please do not leave this section blank.** You may choose your survey sample based on AANA members' geographical locations or/and their member types.

For example, members of the AANA are automatically members in their state of residence or the state they work, if different. Your selection request may be based on a state of membership (where they work) or the state of residence (where they live). We cannot guarantee a sufficient quantity of work addresses/email addresses and will complete the order with home contact information, if necessary. The following are the AANA member types that can be selected:

<b>AANA Member Types</b>	<b>Information</b>
<b>Certified:</b>	Passed exam within 2 years – practicing – voting member
<b>Recertified:</b>	Passed exam over 2 years ago – practicing – voting member
<b>Student:</b>	Currently enrolled in a Nurse Anesthesia Program

**Sample Selection Method:**

A **random selection** of members will be generated. Random selection is based on computer generated numbers with a uniform distribution -- there is an equal probability of getting any one random number as another. Members that have opted out of mass email communication from the AANA are not included.

**Response Rate:**

**The email survey response rate** is approximately 5-7% for typical research. The researcher should estimate their effective sample size based on 5-7%, although the AANA **cannot guarantee** that your response rate will reach that percentage. Recently the survey response rate has dramatically declined to as low as 3%.

**American Association of Nurse Anesthesiology**  
**AANA Electronic Survey Policy and Order Form**

Version 6-1-22

## **Security and Privacy of the Survey**

- **Security and Privacy of Data:**

The survey site is periodically reviewed and updated with security measures to ensure the best possible protection for your data. The survey site stores personal information of members and panelists in secure databases protected by passwords as well as database and network firewalls to prevent the loss, misuse or alteration of personal or survey information. The network operations staff performs regular security audits on the servers. In addition, the hosting facility conducts regular and ongoing independent audits and supplies with data for optimization. Data from surveys is stored at a secure hosting facility with both physical and software-based security systems. The survey site provides SSL encryption for survey participants.

- At **no time** will the researcher have access to AANA member email addresses or any members' identified information.

- **Who has access to the files?**

Only authorized personnel from AANA in charge of the survey can access the files.

- **What happens to the data at the AANA after it is given to the researchers?**

The responses and surveys are destroyed 12 months after launching the survey.

- **Does the AANA keep any hard copies of the electronic surveys?**

The AANA does not keep any hard copies of the electronic surveys.

**American Association of Nurse Anesthesiology**  
**AANA Electronic Survey Policy and Order Form**

Version 6-1-22

**AANA Electronic Survey**

**Frequent Questions and Answers:**

**1) Will I see a preview of the survey before it is deployed?**

Yes, AANA will send a survey preview for the researcher to check his/her survey and correct any errors before the formal survey launch. It is preferred that the instrument is field tested prior to final submission for data collection and the survey is launched. Once the survey is deployed, there is **no way to make any changes** for the launched instrument.

**2) How often are reminders sent to participants who may not have responded to the initial invitation?**

One reminder is sent seven days before the survey is closed to all non-respondents and respondents who did not finish the survey.

**3) What is the targeted period of time for the survey?**

The survey typically remains open up to 4 weeks.

**4) What can I anticipate as the cost for this email survey?**

For example, a survey sent to ***two thousand*** recipients having an instrument of ***twenty-four*** questions and ***three*** skip logics (branching questions), the fee will be \$2,350. The \$2,350 is summed by the following items: \$600 (a set up fee) + \$250 (for *twenty-four* questions in the instrument) + \$1,000 (for reaching *two thousand* members) + \$500 (*more than two* branching (skip logic) questions). Please refer to the fee schedule section to estimate your fee for more details.

**5) How does opt-out work during the survey process, and what is the opt-out rate?**

The AANA will send the survey invitations to the number of recipients you request. The recipients can choose to opt-out or take the survey after they receive the invitation. The opt-out option is listed ***at the end*** of ***each*** invitation message. When a recipient chooses the opt-out option, the system places the email address in the opt-out pool, and future surveys from this researcher will not be sent. Approximately ***1% to 3 %*** of all recipients choose to opt-out of the survey. Those recipients who opt-out will not be directed to the survey site; they will be directed to a webpage that indicates that they have been placed on the opt-out list.

**American Association of Nurse Anesthesiology**  
**AANA Electronic Survey Policy and Order Form**

Version 6-1-22

Page 1/6

**Name:** \_\_\_\_\_ **AANA #** \_\_\_\_\_

**Title, affiliated institute/company:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Address (cont):** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Email address:** \_\_\_\_\_

**Telephone :**(\_\_\_\_\_) \_\_\_\_\_ ( \_\_Office \_\_ Home \_\_ Cell)

**Survey Title:** \_\_\_\_\_

*Maximum character (not word) count is 80 characters, including spaces. This title will be used as the subject line and incur a change fee if not compliant. You must include this same text verbatim within your cover letter.*

➤ **SELECT THE SERVICE:** *See the Fee Schedule Section describing the two services.*

**Full-Service\*** (see page two for submission instructions)

**Instrument Deployment Only\*** (see page two for submission instructions)

*\*Cover letter should include an active link to the survey tool, and survey tool should display all questions and answers.*

➤ **YOUR CURRENT MEMBERSHIP STATUS:**

\_\_\_\_\_ Certified (Passed exam within past 2 years – practicing)

\_\_\_\_\_ Recertified (Passed exam over 2 years ago – practicing)

\_\_\_\_\_ Life (Life Members typically are not practicing)

\_\_\_\_\_ Student (Currently enrolled in a nurse anesthesia program)

\_\_\_\_\_ Not a member

➤ **CUSTOMER TYPE:**

Please indicate which type applies to you as a customer (check only one).

\_\_\_\_\_ **AANA Member**

\_\_\_\_\_ **External Entity** (add \$500 to total)

\_\_\_\_\_ Corporation

\_\_\_\_\_ Researcher

>  *I verify each of my survey questions indicates if the answers should be formatted as “select all that apply” or “select only one.”*

**SURVEY FORMAT: (Check one. If blank, all questions will be marked optional to answer.)**

Respondents are required to answer all survey questions.

Respondents are not required to answer any survey questions (all are optional).

Survey questions are a mix of required and optional. Data tool specifies this information.



**American Association of Nurse Anesthesiology**  
**AANA Electronic Survey Policy and Order Form**

Version 6-1-22

SURVEY ORDER FORM, Page 2/6 Name: \_\_\_\_\_

**SELECTION CRITERIA OF THE SURVEY SAMPLE**

**SAMPLE SIZE REQUESTED:** \_\_\_\_\_<sup>2</sup>(Number (Not Range) Required).

**SELECTING THE MEMBER TYPES OF YOUR SAMPLE:** (Select all that apply)

- |                   |  |
|-------------------|--|
| _____ Certified   | (Passed exam within past 2 years – practicing)     |
| _____ Recertified | (Passed exam over 2 years ago – practicing)        |
| _____ Student     | (Currently enrolled in a nurse anesthesia program) |

**SELECTING THE PRACTICE SETTINGS AND LOCATIONS OF YOUR SAMPLE:** (Select all that apply)<sup>3</sup>

a. \_\_\_\_\_ All states or \_\_\_\_\_ Specific state(s) : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

b. Selecting the above states(s) based on (*choose one, not both*):  
\_\_\_\_\_ State of Residence (Live) or \_\_\_\_\_ State of Membership (Work<sup>4</sup>)

**NOTE: Choosing any of the following items may dramatically decrease the email addresses that we can provide. Because these items are not required to be answered on the membership profile, we can only provide those names who have provided this information. We recommend that you refrain from narrowing down your list whenever possible.**

- c. \_\_\_\_\_ Primary Employment Arrangement/Source of Income (the employment arrangement that provides the greatest portion of income): (Select all that apply)
- \_\_\_\_\_ Employee of hospital
  - \_\_\_\_\_ Employee of office/clinic
  - \_\_\_\_\_ Employee of freestanding surgical center
  - \_\_\_\_\_ Employee of surgicenter in other institution
  - \_\_\_\_\_ Employee of college/university
  - \_\_\_\_\_ Employee of joint CRNA/physician group
  - \_\_\_\_\_ Employee of CRNA-only group
  - \_\_\_\_\_ Employee of physician-only group
  - \_\_\_\_\_ Army
  - \_\_\_\_\_ Navy
  - \_\_\_\_\_ Air Force
  - \_\_\_\_\_ Veterans Administration
  - \_\_\_\_\_ U.S. Public Health Service
  - \_\_\_\_\_ Owner/partner of CRNA-only group

**American Association of Nurse Anesthesiology**  
**AANA Electronic Survey Policy and Order Form**

Version 6-1-22

- Owner/partner of joint CRNA/physician group
- Owner/partner of locum tenens agency
- Independent contractor for locum tenens agency
- Independent contractor for joint CRNA/physician group
- Independent contractor for physician-only group
- Independent contractor for CRNA-only group
- Independent contractor for hospital
- Independent contractor for surgicenter
- Independent contractor for various arrangements
- Independent contractor for office/clinic
- Other employment arrangement/source of income

- d.  Primary Position Description (51% or greater time in these areas)  
 Practice  Education  Management  Research  Other
  
- e.  Highest Level of Education  
 Diploma/Certificate  Baccalaureate  Master  Doctorate
  
- f.  Other (Additional fee may apply)

Describe the selection variable(s): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

<sup>2</sup> **The sample will be randomly selected from the pool of your selection criteria. Members that opted out of mass email communication will not be included.**

<sup>3</sup> **Due to high demand, AANA cannot guarantee that we will be able to meet your list preferences. Whenever possible, please provide a broad list selection upon application.**

<sup>4</sup> **Work addresses and emails are extremely limited. If you choose that option, AANA cannot guarantee a sufficient quantity, and will complete the order with home contact information.**

**American Association of Nurse Anesthesiology**  
**AANA Electronic Survey Policy and Order Form**

Version 6-1-22

SURVEY ORDER FORM, Page 4/6 Name: \_\_\_\_\_

**Fee Calculation**

(See Fee Schedule section for detailed item list)

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**A. SELECT THE SERVICE THAT YOU WOULD LIKE TO PURCHASE:** (Required)

- Full-Service (\$600)**  
 **Instrument Deployment Only Service (\$300)**

**B. INDICATE NUMBER OF QUESTIONS AND FEE** (Required for Full-service)  
(Waived for Instrument Deployment Only)

Matrix question will be count differently from the normal question. The number for a matrix question will be counted as **1/3** of the number on the questions that are **nested** in a matrix question.

**Number of Questions:** \_\_\_\_\_ **Fee:** \_\_\_\_\_

**C. INDICATE NUMBER OF ADDRESSES AND FEE** (Required)

This fee is required for either service (Full-service or Instrument Deployment Only).

**Number of Addresses:** \_\_\_\_\_ **Fee:** \_\_\_\_\_

**D. INDICATE NUMBER OF REMINDERS AND FEE** (Required, if you have more than one reminder for full service): (Instrument Deployment Only Service is limited to one reminder)

**Number of Additional Reminders:** \_\_\_\_\_ **Fee:** \_\_\_\_\_

**E.  CHECK HERE IF YOUR SURVEY HAS MORE THAN TWO SKIP LOGICS OR THREE MATRIX QUESTIONS (\$500):** (Required for Full-service, if your instrument has several skip logics or matrix questions)

**TOTAL OF ALL CHARGES\***  
(Adding items A through E):

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(\*AANA reserves the right to confirm the fee calculations.)

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**PAYMENT**

***NEW: Instructions for payment online will be emailed to the primary researcher after survey approval and fee confirmation.*** Approved requests will NOT be filled without RECEIPT OF FULL PAYMENT for the service and a signed survey agreement. Payment will not be processed until the survey has been approved.

**American Association of Nurse Anesthesiology**  
**AANA Electronic Survey Policy and Order Form**

Version 6-1-22

SURVEY ORDER FORM, Page 5/6 Name: \_\_\_\_\_

**\* *Third party payers* are required to provide their contact information.**

**Name:** \_\_\_\_\_

**AANA # (if applicable):** \_\_\_\_\_

**Title, affiliated institute/company:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Address (cont):** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Email address:** \_\_\_\_\_

**Telephone:** ( \_\_\_\_\_ ) \_\_\_\_\_ (  Office  Home  Cell)

**American Association of Nurse Anesthesiology**  
**AANA Electronic Survey Policy and Order Form**

Version 6-1-22

SURVEY ORDER FORM, Page 6/6 Name: \_\_\_\_\_

**ELECTRONIC SURVEY AGREEMENT**

- 1) In placing this order for the electronic survey, I agree that if I gain access to the email addresses or any identifiable information, I will not use, disclose, transfer, or retain any portion of the email addresses and/or the information to identify any individual who participated in the survey.
- 2) In placing this order for the electronic survey, I agree that I will not use, disclose, transfer any portion of the AANA members' responses to identify any individual who participated in the survey.
- 3) In placing this order for the electronic survey, I agree that the approval of this order **does not imply any endorsement** of the research and/or its findings by the AANA. In addition, the survey contents, development and findings are the sole responsibility of the individual conducting the survey.  
Any study and/or report of the members' responses **MUST** be reported **in aggregate** so respondents cannot be identified. Any expression of a quote response cannot identify the respondent.
- 4) In placing this order for the electronic survey, I agree that a final abstract of the findings and documentation of the results will be submitted to the AANA at **researchsurvey@aana.com** within **one month after completing** the study. The AANA may share the submitted report and findings. The researcher will receive full credit for their work.

Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date \_\_\_\_\_

**Disclaimer:**

1. AANA reserves the right to refuse fulfillment of any survey order if the AANA does not approve the purposes or context of the research.
2. The volume of requests may lead to a delay in deployment of the instrument to preserve a proper response rate. You will be notified of the anticipated date of deployment. It *may* take up to 8 weeks for your survey to be deployed after the approval if *extensive* demands occur. Due to extenuating circumstances, the volume of requests may also prevent deployment for up to six months.
3. If any special requests are approved by the AANA, the request is only valid for 60 days.

**For Staff Only**

Research Director Approval: _____		_____
Date		Initials
Survey Processed: _____	By _____	_____
Date		Initials