



PATIENT SERVICES RECEIVED SCHEDULE (POST-VISIT)

Thank you for taking some time out of your busy day in order to help us by participating in this study. We'd now like to ask you a few brief questions about your visit to [] today. Prior to your visit with the doctor, we asked about the type of help you hoped for today. Now we'd like to ask you about the type of help you actually received today. Please complete all of the questions to the best of your ability. There are no right or wrong answers.

Thank you very much for your help and cooperation!

→ Please read each item carefully, and circle either an **N** for **No** or **Y** for **Yes**.

	<u>No</u>	<u>Yes</u>
1. The doctor did something to find out if I have some kind of disease or other condition.....	N	Y
2. I told the doctor what I was concerned my problem might be.....	N	Y
3. The doctor prescribed medication for me.....	N	Y
4. The doctor agreed to treat some other members of my family.....	N	Y
5. I had some screening tests done to remain healthy.....	N	Y
6. The doctor told me the <u>name</u> of my problem.....	N	Y
7. I told the doctor about some home remedies or alternative medicines I've been using for my problem.....	N	Y
8. Something was done to relieve my emotional discomfort (e.g., nerves, stress).....	N	Y
9. Some tests were done to find out what's wrong.....	N	Y
10. I told the doctor about the way I've been treating my problem at home.....	N	Y
11. The doctor helped me understand more about my problem so that I could figure out what to do.....	N	Y
12. I received some advice about how to stay healthy (e.g., exercise, diet, rest).....	N	Y
13. The doctor wrote a letter and/or filled out some forms for me.	N	Y
14. The doctor examined me.....	N	Y
15. I shared some of my ideas, feelings, and concerns about my problem with the doctor.....	N	Y

→ Please read each item carefully, and circle either an **N** for **No** or **Y** for **Yes**.

	<u>No</u>	<u>Yes</u>
16. The doctor agreed to work with another healer I am seeing for this problem.....	N	Y
17. I spoke to the doctor about my concerns relating to the health of another member of my family.....	N	Y
18. I received some advice today about some personal health habits (e.g., how to lose weight, how to stop smoking, how to control my drinking).....	N	Y
19. I told the doctor about how my problem is affecting my life and family.....	N	Y
20. I received some help for some marital or family problems I am having.....	N	Y
21. The doctor told me what I can and what I can't do while I have this problem.....	N	Y
22. I was referred to a specialist for treatment of my problem.....	N	Y
23. I was comforted and felt that someone cared about me today.....	N	Y
24. I told the doctor what I think caused my problem.....	N	Y
25. The doctor told me whether my problem would get better, continue on, get worse, or come back again.....	N	Y
26. I found out my test results from a previous visit.....	N	Y
27. Something was done to relieve my physical discomfort (e.g., pain, cough).....	N	Y
28. The doctor agreed to help other members of my family understand more about my problem.....	N	Y
29. The doctor told me what caused my problem.....	N	Y
30. I received some help for some personal emotional problems I am having.....	N	Y

→ Now, some final questions about today's visit (Circle one number)

	<u>Not at all</u>	<u>A Little</u>	<u>Somewhat</u>	<u>Quite a Bit</u>	<u>Very</u>
1. How satisfied were you that the doctor <u>understood the reasons for your visit today?</u>	1	2	3	4	5
2. How satisfied were you that the doctor <u>understood the type of help you wanted today?</u>	1	2	3	4	5
3. How satisfied were you with <u>the type of help you actually received from the doctor today?</u>	1	2	3	4	5
4. How satisfied were you with <u>the amount of time the doctor was able to spend with you today?</u>	1	2	3	4	5
5. <u>Overall</u> , how satisfied were you with today's visit?..	1	2	3	4	5

6. Did you see your own personal family doctor today? (Circle one) **No** **Yes**

Comments:

THANK YOU VERY MUCH FOR YOUR HELP AND COOPERATION!

D CODE: _____

P CODE: _____