To be completed after consultations with consenting patients.

1. How did the cor	nsultation go?								
U Very wel	1 🗆 OK	□ Not particular	ly well 🔲 Badly						
2. Do you think the patient raised all the health concerns they wanted to today?									
□ Yes	🗆 No	I don't know							
3. Did you need to encourage the patient to raise the concerns they had come with?									
□ Yes	🗆 No								
<u>Health Problem 1</u>									
4. What was the main health problem raised?									
•••••	• • • • • • • • • • • • • • • • • • • •								
5. Did you feel you	ı understood the pati	ent's views about this	s health problem?						
□ Yes	🗆 No	□ I don't know							
6. Did you feel you understood the patient's views about the treatment they would find acceptable?									
□ Yes	🗆 No	□ I don't know							
7. Did you think the think the think the theorem and the	he patient wanted a p	prescription for this h	ealth problem?						
Definitel	y 🛛 Probabl	ly 🗌 Probably	not 🗆 Definitely						
🗆 I don't kr	now 🗆 Don't th	hink patient knew	not						
8. Did you feel pressured by the patient to write a prescription for this problem?									
Definitel	y 🗆 A little	pressured 🗆 N	Not at all pressured						
9. Did you write a prescription for this problem?									
□ Yes	🗆 No								
If yes, please complete the table below (one row per drug)									
Drug	Dose	New or repeat?	Strictly indicated?						
		New/ Repeat	Yes/ No						

Drug	Dose	New or repeat?	Strictly indicated?		
		New/ Repeat	Yes/ No		
		New/ Repeat	Yes/ No		
		New/ Repeat	Yes/ No		

10. Did you feel comfortable about this prescribing decision?											
Definite comfort	•	Fairly comforta	able	Slightly uncomfor	rtable	Defini uncon	itely nfortable				
If a second health problem was raised, please also complete this side.											
1) a secona neatin problem was raisea, piease aiso complete this stae.											
Health Problem 2											
	11. What was the second health problem raised?										
	••••••	• • • • • • • • • • • • • • • •	• • • • • •								
12. Did you feel yo	u understoo	d the pati	ent's views	about this	s health pro	oblem?					
□ Yes] No	□ I don't know								
12 Didagan Galas			•	- 1 4. 41							
13. Did you feel yo would find acc		od the pat	ient's views	about the	etreatment	t they					
□ Yes											
14. Did you think	the patient v	vanted a p	orescription	for this h	ealth prob	lem?					
Definite	5	Probabl	y Definitely								
🔲 I don't k	inow [Don't tl	hink patient	knew							
15. Did you feel pr	essured by t	the patien	t to write a	prescripti	on?						
Definite	ly [A little	pressured	□ N	lot at all pre	essured					
			•		Ĩ						
16. Did you write a	a prescriptio		problem?								
Yes			1)							
If yes, please compl	1	below (on	-		G(• 4] •	1. (10	1				
Drug	Dose		New or re		Strictly in Yes/ No	idicated?					
				beat	Yes/ No						
			1	peat	Yes/ No						
15 0 1	6 4 1 1		•1 •	1			<u>.</u>				
17. Did you feel co	_	bout this j	prescribing	decision?		_					
	□ Definitely □ Fairly □ Slightly □ Definitely										
comfortable comfortable uncomfortable uncomfortable											
Please use the space below if you would like to make any further comments.											
THANK YOU FOR COMPLETING THIS. PLEASE RETURN THE COMPLETED QUESTIONNAIRE TO THE RESEARCHER.											
COMPL	LIED QUE	SIIUMA	AIKE IU I	IIE KESE	ARCHER	•					