Thinking about your most recent visit to the hospital clinic:

1. What would have been your <u>m</u>	nain activity if you had not attended the clinic?
Paid employment	
Looking after relatives	
Leisure activities	
Housework	
Studying at college	
Other	Please specify
If you are in paid employm question 3.	nent, please answer question 2, if not go to
2. What arrangements did you ma	ake to take time off work? (Please tick one box)
Paid absence from work	
Unpaid absence from wor	rk 🔲
Will make the time up	
Came to clinic outside wo	ork time
Took holiday	
Other arrangements	Please specify
3. How long did it take you to tra	avel to the clinic?
	hoursminutes
4. Approximately what distance of	did you have to travel to get to the clinic (one-way)?
	miles

a) How did you travel to the clinic? Please t	tick the main forms of transport.
Walking	
Private car	
Public transport - bus	
Public transport - train	
Taxi	
Other	Please specify
b) If you travelled by private car , were you	_
	Yes No
c) If you travelled by private car , how muc	
	£p
d) If you travelled by public transport (bus way fare? If you were given a return fare, six travel by public transport at all or you did no	mply halve it. Put zero if you did not
	£p
e) If you travelled by taxi what was the cos not travel by taxi at all or you did not pay a	st of the (one-way) fare? Put zero if you did fare.
£p	
6. Did anyone accompany you to the clinic	
and wait for you while you received your ca	are? Yes No
If yes, did they take time off work?	Yes No

7. If you have other dependants,	
Did you pay someone to look after them?	
Yes No	o Not Applicable
	p
Or Did someone take time off work to look after them? Ye	s No
8. How long did you spend waiting at the clinic before y	
If you have any comments about your costs for attending the study please write them below.	noursminutes ne clinic or anything else about this

Thank you for taking the time to complete this questionnaire.