

Patient Questionnaire Breakdown- PHIN- 1 Week post-op

Consultant questions	
Patient Feedback Questions (Consultants)	Answer options
How likely are you to recommend our consultant to friends and family if they needed similar care or treatment?	Very likely
	Likely
	Neither likely nor unlikely
	Unlikely
	Very unlikely
	Don't know
Did your consultant show you understanding when assessing your need for treatment?	Yes, definitely
	Yes, to some extent
	No
Did your consultant explain everything to you in a way that was easy to understand?	Yes, definitely
	Yes, to some extent
	No
Did you have sufficient time with your consultant during this visit or hospital stay?	Yes, definitely
	Yes, to some extent
	No
Did you have confidence that your consultant would deliver the appropriate care for you?	Yes, definitely
	Yes, to some extent
	No

Hospital/site questions	
Were you involved as much as you wanted to be in decisions about your care and treatment?	Yes, definitely
	Yes, to some extent
	No
Did you find someone on the hospital staff to talk to about your worries and fears?	Yes, definitely
	Yes, to some extent
	No
	I had no worries or fears
Were you given enough privacy when discussing your condition or treatment?	Yes, always
	Yes, sometimes
	No
Did a member of staff tell you about medication side effects to watch for when you went home?	Yes, completely
	Yes, to some extent
	No
	I did not need an explanation
Did hospital staff tell you who to contact if you were worried about your condition or treatment after you left hospital?	Yes
	No
	Don't know
	Can't remember
Overall, did you feel you were treated with respect and dignity while you were in the hospital?	Yes, always
	Yes, sometimes
	No
Thinking about your stay in the hospital, overall, how was your experience of our service?	Very good
	Good
	Neither good nor poor
	Poor
	Very poor
	Don't know