

**HCSUS 2nd Follow-up**  
**9. Social Support and Coping**  
**Section C: Patient Satisfaction**

INTERVIEWER: RECORD TIME THIS SECTION BEGINS HERE:,,:,,A.M./P.M.

RANDOMLY ASSIGN R A VALUE OF 1 OR 2  
IF RANDOM NUMBER = 1 GO TO C2

C1. Overall, how would you rate the quality of the medical care you received since FU1DATE? Would you say it was:

Poor, .....	1	(G09C01)
Fair,.....	2	
Good, .....	3	
Very good, or .....	4	
Excellent? .....	5	

C2. HAND CARD #39

IF RANDOM NUMBER = 2 SAY:

I'd like to ask you the same question a different way.

FOR ALL SAY:

Please look at this card and tell me overall, what is the rating of the care you've received from all doctors and other health care professional since we last interviewed you on FU1DATE?

(IF PHONE INTERVIEW: A 0 to 10 scale where 0 is as bad as doctors or nurses can be, and 10 is as good as doctors or nurses can be.)

	(G09C02)
0 AS BAD AS DOCTORS OR NURSES CAN BE	
1	
2	
3	
4	
5 OK OR AVERAGE	
6	
7	
8	
9	
10 AS GOOD AS DOCTORS OR NURSES CAN BE	

IF RANDOM NUMBER = 2, GO TO C4

## HCSUS 2nd Follow-up

### 9. Social Support and Coping

C3. I'd like to ask you the same question a different way.

Overall, how would you rate the quality of the medical care you received since FU1DATE? Would you say it was:

- |                  |   |          |
|------------------|---|----------|
| Poor, .....      | 1 | (G09C03) |
| Fair, .....      | 2 |          |
| Good, .....      | 3 |          |
| Very good, ..... | 4 |          |
| Excellent? ..... | 5 |          |

C4. Since we last interviewed you on FU1DATE, how often did your doctors or other health care professionals know what you thought they should know about your medical history?

- |  |   |          |
|--|---|----------|
| Never .....  | 1 | (G09C04) |
| Sometimes.....   | 2 |          |
| Usually.....   | 3 |          |
| Always .....   | 4 |          |
| HAVE NOT SPOKEN WITH ANY DOCTORS OR<br>HEALTH CARE PROFESSIONALS SINCE LAST<br>INTERVIEW ..... | 5 |          |

C5. Do you have one person you consider to be your personal doctor or nurse?  
This is the health care professional who knows you best and can be a doctor, nurse practitioner, physician's assistant, or nurse.

(If you have more than one personal doctor or nurse, choose yes.)

- |          |   |          |
|----------|---|----------|
| YES..... | 1 | (G09C05) |
| NO ..... | 2 |          |

IF C5 <> 1, GO TO C7

C6. Does your personal doctor or nurse know all the important decisions other doctors or other health professionals make about your medical care?

- |  |   |          |
|--|---|----------|
| YES.....   | 1 | (G09C06) |
| NO .....   | 2 |          |
| HAVEN'T NEEDED ANY IMPORTANT DECISIONS<br>MADE ABOUT MY MEDICAL CARE ..... | 3 |          |



**HCSUS 2nd Follow-up**  
**9. Social Support and Coping**

C10. I'd like to ask you the same question a different way.

Overall, how would you rate the quality of care on this visit? Would you say it was:

- |                  |   |          |
|------------------|---|----------|
| Excellent, ..... | 1 | (G09C10) |
| Very good, ..... | 2 |          |
| Good, .....      | 3 |          |
| Fair, or .....   | 4 |          |
| Poor? .....      | 5 |          |

C11. Would you recommend the place you got the majority of your care, other than hospital care, to other people with HIV infection?

- |                       |   |          |
|-----------------------|---|----------|
| YES, DEFINITELY ..... | 1 | (G09C11) |
| YES, PROBABLY .....   | 2 |          |
| NO, NOT AT ALL .....  | 3 |          |

C12. SHOW CARD #41

Please look at this card and tell me how much do you trust your doctor or clinic to offer you high quality medical care?

- |                  |   |          |
|------------------|---|----------|
| COMPLETELY ..... | 1 | (G09C12) |
| MOSTLY .....     | 2 |          |
| SOMEWHAT .....   | 3 |          |
| A LITTLE .....   | 4 |          |
| NOT AT ALL ..... | 5 |          |

C13. SHOW CARD #41

Please look at this card and tell me how much do you trust your doctor or clinic to know all about the very best treatments and care for HIV?

- |                  |   |          |
|------------------|---|----------|
| COMPLETELY ..... | 1 | (G09C13) |
| MOSTLY .....     | 2 |          |
| SOMEWHAT .....   | 3 |          |
| A LITTLE .....   | 4 |          |
| NOT AT ALL ..... | 5 |          |

## HCSUS 2nd Follow-up

### 9. Social Support and Coping

C14. SHOW CARD # 41

(Please look at this card and tell me) How much do you trust your doctor or clinic to give you enough information about your condition to make decisions?

COMPLETELY.....	1	(G09C14)
MOSTLY.....	2	
SOMEWHAT.....	3	
A LITTLE.....	4	
NOT AT ALL.....	5	

C15. SHOW CARD #41

(Please look at this card and tell me) How much do you trust your doctor or nurse to keep personal information private?

COMPLETELY.....	1	(G09C15)
MOSTLY.....	2	
SOMEWHAT.....	3	
A LITTLE.....	4	
NOT AT ALL.....	5	

C16. SHOW CARD #41

(Please look at this card and tell me)How much do you trust your doctor or nurse to respond to things you tell him or her in a caring and non-judgmental way?

COMPLETELY.....	1	(G09C16)
MOSTLY.....	2	
SOMEWHAT.....	3	
A LITTLE.....	4	
NOT AT ALL.....	5	

C17. SHOW CARD #41

(Please look at this card and tell me) How much do you trust your doctor or nurse to offer you high quality medical care regardless of insurance company rules or cost?

COMPLETELY.....	1	(G09C17)
MOSTLY.....	2	
SOMEWHAT.....	3	
A LITTLE.....	4	
NOT AT ALL.....	5	

## HCSUS 2nd Follow-up

### 9. Social Support and Coping

C18. SHOW CARD #41

(Please look at this card and tell me) How much do you trust your doctor or nurse to put your needs ahead of scientific or research goals?

COMPLETELY.....	1	(G09C18)
MOSTLY.....	2	
SOMEWHAT.....	3	
A LITTLE.....	4	
NOT AT ALL.....	5	

IF MODULE 6 A1 <> 1, GO TO MODULE 10

C19. Thinking back to your most recent hospital stay since FU1DATE, did you have enough say about your treatment in the hospital?

YES.....	1	(G09C19)
NO.....	2	

C20. Was there one particular doctor who was in charge of your care in the hospital?

YES.....	1	(G09C20)
NO.....	2	

C21. Was it easy for you to find someone on the hospital staff to talk to about your personal concerns?

YES.....	1	(G09C21)
NO.....	2	
VOLUNTEERED: HAD NO CONCERNS.....	3	

C22. When you needed help with things like eating, bathing, or getting to the bathroom, did you usually get it in time?

YES.....	1	(G09C22)
NO.....	2	
VOLUNTEERED: DID NOT NEED HELP.....	3	

## HCSUS 2nd Follow-up

### 9. Social Support and Coping

C23. When you had important questions to ask a doctor or nurse, did you always get answers you could understand?

YES..... 1 (G09C23)  
NO ..... 2  
VOLUNTEERED: DID NOT  
HAVE ANY QUESTIONS3 ..... 3

C24. Did you feel like you were treated with respect and dignity while you were in the hospital?

YES..... 1 (G09C24)  
NO ..... 2

C25. Do you think that much of your pain could have been eliminated if the hospital staff had acted more promptly?

YES..... 1 (G09C25)  
NO ..... 2  
VOLUNTEERED: HAD NO PAIN ..... 3

C26. Sometimes, in the hospital, one doctor or nurse will say one thing and another will say something quite different. Did this ever happen to you during your hospital stay?

YES..... 1 (G09C26)  
NO ..... 2

C27. If you had any anxieties or fears about your condition or treatment, did a doctor or nurse discuss them with you?

YES..... 1 (G09C27)  
NO ..... 2  
VOLUNTEERED: HAD NO  
ANXIETIES OR FEARS ..... 3

## HCSUS 2nd Follow-up

### 9. Social Support and Coping

C28. After major tests were done, did a doctor or nurse always explain the results in a way you could understand?

YES..... 1 (G09C28)  
NO ..... 2  
VOLUNTEERED: HAD NO TESTS..... 3

IF RANDOM NUMBER = 1, GO TO C30

C29. Overall, how would you rate the care you received during your most recent hospital stay? Would you say it was:

Poor ..... 1 (G09C29)  
Fair..... 2  
Good ..... 3  
Very Good..... 4  
Excellent ..... 5

C30. HAND CARD #42

IF RANDOM NUMBER =2 SAY:

I'd like to ask you the same question in a different way.

FOR ALL SAY:

Please look at this card and tell me overall, how would you rate the care you received at the hospital?

(IF PHONE INTERVIEW: Use a 0 to 10 scale where 0 is the worst hospital care possible and 10 is the best hospital care possible.)

(G09C30)

0 WORST HOSPITAL CARE POSSIBLE

1

2

3

4

5 OK OR AVERAGE

6

7

8

9

10 BEST HOSPITAL CARE POSSIBLE

IF RANDOM NUMBER =2, GO TO C32

## HCSUS 2nd Follow-up

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C31. I'd like to ask you the same question in a different way.

Overall, how would you rate the care you received during you most recent hospital stay? Would you say it was:

- |                     |   |          |
|---------------------|---|----------|
| Poor, .....         | 1 | (G09C31) |
| Fair,.....          | 2 |          |
| Good, .....         | 3 |          |
| Very good, or ..... | 4 |          |
| Excellent? .....    | 5 |          |

C32. Would you recommend the hospital to other persons with HIV?

- |                       |   |          |
|-----------------------|---|----------|
| YES, DEFINITELY ..... | 1 | (G09C32) |
| YES, PROBABLY .....   | 2 |          |
| NO, NOT AT ALL.....   | 3 |          |