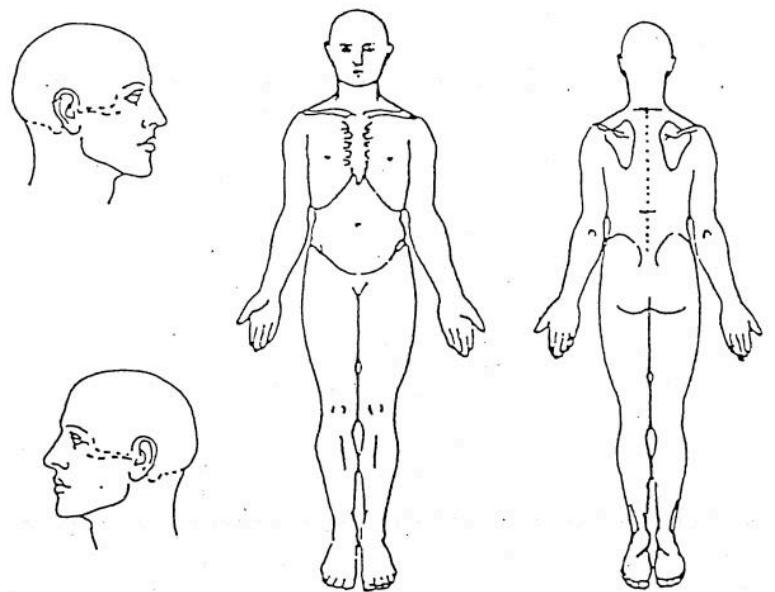


Acupuncture POST-Survey
針灸療程後問卷



1. How satisfied are you with your experience at our acupuncture clinic?
請問您對我們的針灸療程滿意嗎？

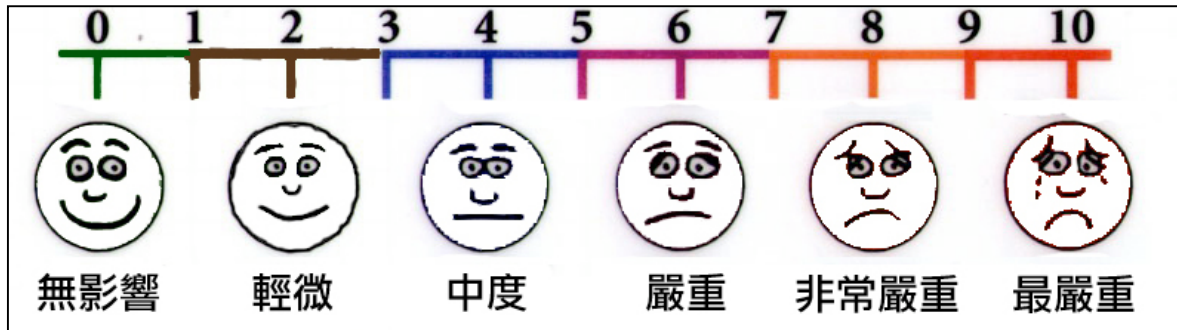
不滿意 1 2 3 4 5 滿意
Not satisfied Satisfied

2. Would you recommend our clinic?
請問您會介紹我們的針灸給您的朋友嗎？

YES / 會 NO / 不會

3. Using the scale, how **SEVERE** is your pain (or condition) for **each** area?
請用以下的量尺來形容您目前的疼痛/不適指數（不同部位請分開）。

① [] ② []



4. Using the scale, how strongly does your pain (or condition) affect your **daily** activities?
請用以下的量尺來形容您的疼痛（症狀）如何影響您的日常生活。

① [] ② []



MD NOTES

Duration:
Frequency:
Med Use:
Function/QOL:

Duration:
Frequency:
Med Use:
Function/QOL:

CC1:

CC2: