Participant Costs Questionnaire

Part A

1a. Have you seen or contacted a GP during the last 6 months (after you were discharged from your initial stay at the hospital) due to problems you had when you were in critical care?

YES
NO

If yes to Question 1a, please answer questions 1b-d; if no, please go to question 2:

1b. How many appointments did you attend with a GP?

1c. How many times did a GP visit you at home?

1d. How many times did you have a telephone conversation with a GP?

2a. Have you seen a general practice nurse during the last 6 months (after you were discharged from your initial stay at the hospital) due to problems you had when you were in critical care?

YES
NO

2b. If yes to Question 2a, how many times?

3a. Have you seen a hospital specialist except your scheduled visits to the physiotherapist during the last 6 months (after you were discharged from your initial stay at the hospital) due to problems you had when you were in critical care?

YES
NO

3b. If yes to Question 3a, how many times?

4a. Have you been readmitted to hospital during the last 6 months (after you were discharged from your initial stay at the hospital) due to problems you had when you were in critical care?

YES
NO

4b. If yes to Question 4a, how many days were you in hospital?
5a. Have you had prescription medicine during the last 6 months (after you were discharged from your initial stay at the hospital) due to problems you had when you were in critical care?

   YES
   NO

5b. If yes to Question 5a, how many times?

6a. Have you purchased over the counter medicine during the last 6 months (after you were discharged from your initial stay at the hospital) due to problems you had when you were in critical care?

   YES
   NO

6b. If yes to Question 6a, how much did you pay in total?

7a. Have you paid for any other private health care during the last 6 months (after you were discharged from your initial stay at the hospital) due to problems you had when you were in critical care?

   YES
   NO

7b. If yes to Question 8a, what type of care did you pay for?

7c. If yes to Question 8a, how much in total did it cost?
Part B

Part 1 - Your most recent admission to hospital (after you were discharged from your initial stay at the hospital), due to problems you had when you were in critical care

If in the last 6 months you were not admitted to hospital please go to Part 2

1. Please circle the number that best describes how you travelled. If you used more than one form of transport please indicate the way you travelled for the main (longest in terms of distance) part of your journey.
   - Bus………………………………………………………………………………………………..1
   - Train………………………………………………………………………………………………2
   - Taxi………………………………………………………………………………………………..3
   - Private car………………………………………………………………………………………..4
   - Hospital car………………………………………………………………………………………5
   - Ambulance……………………………………………………………………………………….6
   - Other (please specify) ___________________________________________________7

2. Please put zero if you did not travel by bus, train or taxi at all or if you did not pay a fare. If you travelled by bus, train or taxi to hospital what was the total cost of the (one-way) journey? Please write the cost in the box below.
   - Cost of (one-way) fare (£) \[\underline{\underline{2}}\] \[\underline{\underline{\phantom{0}0}}\] Pence

3. Please put zero if you did not travel by private car at all. If you travelled by private car about how many miles did you travel one-way? Please write the number of miles in the box below.
   - Number of miles one-way \[\underline{\underline{1}}\] \[\underline{\underline{0}}\] \[\underline{\underline{0}}\]

4. Please put zero if you did not pay a parking fee. If you travelled by private car and you or your companion had to pay a parking fee how much did this cost? Please write the cost in the box below.
   - Expenditure on parking fee (£) \[\underline{\underline{2}}\] \[\underline{\underline{8}}\] \[\underline{\underline{0}}\] Pence

5. When you were admitted to the hospital, how many days did you spend there? Please write the number of days in the box below.
   - Number of days \[\underline{\underline{1}}\] \[\underline{\underline{0}}\]

6. What would you otherwise have been doing as your main activity if you had not had to be admitted to hospital? Please circle the number that best applies to you.

EPICC study Participant Costs Questionnaire v 1.0, 17 October 2013
Paid work.................................................................1
Housework............................................................2
Childcare...............................................................3
Caring for someone else............................................4
Voluntary work.......................................................5
Leisure activities.....................................................6
Other (please specify) _________________________________7

7. When you were admitted to hospital, did anyone come with you? Please circle the appropriate response.
   Yes (continue with question 8)..............................1
   No (go to Part 2)...................................................2

8. Please circle the number that best describes what your main companion would otherwise have been doing as their main activity if they had not gone with you to the hospital.
   Paid work.............................................................1
   Housework..........................................................2
   Childcare............................................................3
   Caring for someone else.........................................4
   Voluntary work....................................................5
   Leisure activities..................................................6
   Other (please specify) ________________________________7

9. Did your main companion take time off from paid work (or business activity if self-employed)?
   Please circle the appropriate response.
   Yes (continue with question 10).........................1
   No (go to Part 2).....................................................2

10. Please put zero if your main companion did not take time off from paid work (or business activity if self-employed) to accompany you to the hospital. Please write the number of hours your companion took off from paid work (or business activity if self-employed) in the box below.
    Number of hours _______ _______

11. Whilst you were in hospital, approximately how many times did your main companion come to visit you?
    Number of times _______ _______
Part 2 - Your most recent outpatient visit except your scheduled visits to the physiotherapist (after you were discharged from your initial stay at the hospital), due to problems you had when you were in critical care

If in the last 6 months you did not have an outpatients appointment please go to Part 3

1. Please circle the number that best describes how you travelled. If you used more than one form of transport please indicate the way you travelled for the main (longest in terms of distance) part of your journey.

   Bus………………………………………………………………………………………………..1
   Train………………………………………………………………………………………………2
   Taxi………………………………………………………………………………………………..3
   Private car………………………………………………………………………………………..4
   Hospital car………………………………………………………………………………………5
   Ambulance………………………………………………………………………………………6
   Other (please specify) ___________________________________________________7

2. Please put zero if you did not travel by bus, train or taxi at all or if you did not pay a fare. If you travelled by bus, taxi or train to your outpatients appointment what was the total cost of the (one-way) journey? Please write the cost in the box below.

   Cost of (one-way) fare (£) □□□ - □□□ pence

3. Please put zero if you did not travel by private car at all. If you travelled by private car about how many miles did you travel one-way? Please write the number of miles in the box below.

   Number of miles one-way □□□□

4. Please put zero if you did not pay a parking fee. If you travelled by private car and you or your companion had to pay a parking fee how much did this cost? Please write the cost in the box below.

   Expenditure on parking fee (£) □□□□ - □□□□ pence

5. When you visited outpatients, how long did it take to travel there? Please write the number of hours and minutes in the box below.

   Number of hours □□□ - □□□□ minutes
6. When you visited outpatients, how long did you spend there? Please write the number hours and minutes in the box below.

Number of hours [ ] – [ ] minutes

7. Please circle the number that best describes what you otherwise would have been doing as your main activity if you had not been visiting outpatients?

- Paid work……………………………………………………………………………………….1
- Housework……………………………………………………………………………………..2
- Childcare………………………………………………………………………………………..3
- Caring for someone else……………………………………………………………………4
- Voluntary work………………………………………………………………………………5
- Leisure activities………………………………………………………………………………6
- Other (please specify)___________________________________________________7

8. When you visited outpatients did anyone come with you? Please circle the appropriate response.

Yes (continue with question 9).................................................................1
No (go to Part 3) .....................................................................................2

9. Please put zero if your main companion did not travel by bus or train at all. If your main companion travelled with you by bus or train approximately how much did they pay (one-way) in fares? Please write the approximate cost in the box below.

Cost of (one-way) fare (£) [ ] – [ ] pence

10. Please circle the number that best describes what your main companion would otherwise have been doing as their main activity if they had not gone with you to outpatients.

- Paid work……………………………………………………………………………………….1
- Housework……………………………………………………………………………………..2
- Childcare………………………………………………………………………………………..3
- Caring for someone else……………………………………………………………………4
- Voluntary work………………………………………………………………………………5
- Leisure activities………………………………………………………………………………6
- Other (please specify)___________________________________________________7
Part 3 - Your most recent GP appointment (after you were discharged from your initial stay at the hospital), due to problems you had when you were in critical care

If in the last 6 months you did not have a GP appointment, please go to Part 4

1. Please circle the number that best describes how you travelled to your most recent GP appointment. If you used more than one form of transport please indicate the way you travelled for the main (longest in terms of distance) part of your journey.

   Bus…………………………………………………………………………………………………1
   Train………………………………………………………………………………………………2
   Taxi………………………………………………………………………………………………..3
   Private car………………………………………………………………………………………4
   Bike……………………………………………………………………………………………..5
   Walk……………………………………………………………………………………………6
   Other (please specify) ___________________________________________________7

2. Please put zero if you did not travel by bus or taxi or if you did not pay the fare. If you travelled by bus, taxi or train, what was the cost of the (one-way) fare? Please write the cost in the box below.

   Cost of (one-way) fare (£) __________ - ________ pence

3. Please put zero if you did not travel by private car at all. If you travelled by private car about how many miles did you travel one-way? Please write the number of miles in the box below.

   Number of miles one-way __________

4. Please put zero if you did not pay for parking. If you travelled by private car and you or a companion had to pay a parking fee how much did this cost? Please write the cost in the box below.

   Expenditure on parking fee (£) __________ - ________ pence

5. When you visited the GP, how long did it take to travel there? Please write the number of minutes in the box below.

   Number of minutes __________
6. When you visited the GP, how long did you spend there? Please write the number minutes in the box below. Please include in your answer the time spent waiting and also the time spent with the doctors and nurses

Number of minutes □□□

7. Please circle the number that best describes what you otherwise would have been doing as your main activity if you had not visited the GP.

Paid work……………………………………………………………………………………………1
Housework…………………………………………………………………………………………2
Childcare……………………………………………………………………………………………3
Caring for someone else…………………………………………………………………………4
Voluntary work……………………………………………………………………………………5
Leisure activities……………………………………………………………………………………6
Other (please specify) _____________________________________________________________7

8. When you visited the GP did anyone come with you? Please circle the appropriate response.

Yes (continue with question 9)…………………………………………………………1
No (go to Part 4)............................................................................................................2

9. Please put zero if your main companion did not travel by bus at all. If your main companion travelled with you by bus how much approximately did they pay (one-way) in fares (if anything)? Please write the cost in the box below.

Cost of (one-way) fare (£ □□□ – □□□ pence

10. Please circle the number that best describes what your main companion would otherwise have been doing as their main activity if they had not gone with you to the GP's surgery.

Paid work…………………………………………………………………………………………1
Housework…………………………………………………………………………………………2
Childcare……………………………………………………………………………………………3
Caring for someone else…………………………………………………………………………4
Voluntary work……………………………………………………………………………………5
Leisure activities……………………………………………………………………………………6
Other (please specify) _____________________________________________________________7
Part 4 - Your most recent practice nurse appointment (after you were discharged from your initial stay at the hospital), due to problems you had when you were in critical care

If in the last 6 months you did not have a physiotherapist appointment, please return the questionnaire in the envelope provided. Thank you!

1. Please circle the number that best describes how you travelled to your most recent practice nurse appointment. If you used more than one form of transport please indicate the way you travelled for the main (longest in terms of distance) part of your journey.

   Bus………………………………………………………………………………………………..1
   Train………………………………………………………………………………………………2
   Taxi………………………………………………………………………………………………..3
   Private car………………………………………………………………………………………4
   Bike………………………………………………………………………………………………5
   Walk………………………………………………………………………………………………6
   Other (please specify) _____________________________________________ 7

2. Please put zero if you did not travel by bus or taxi or if you did not pay the fare. If you travelled by bus, taxi or train, what was the cost of the (one-way) fare? Please write the cost in the box below.

   Cost of (one-way) fare (£) ___________ - ___________ pence

3. Please put zero if you did not travel by private car at all. If you travelled by private car about how many miles did you travel one-way? Please write the number of miles in the box below.

   Number of miles one-way ___________

4. Please put zero if you did not pay for parking. If you travelled by private car and you or a companion had to pay a parking fee how much did this cost? Please write the cost in the box below.

   Expenditure on parking fee (£) ___________ - ___________ pence

5. When you visited the practice nurse, how long did it take to travel there? Please write the number of minutes in the box below.

   Number of minutes ___________
6. When you visited the practice nurse, how long did you spend there? Please write the number minutes in the box below. Please include in your answer the time spent waiting and also the time spent with the doctors and nurses
   Number of minutes

7. Please circle the number that best describes what you otherwise would have been doing as your main activity if you had not visited the practice nurse.
   Paid work
   Housework
   Childcare
   Caring for someone else
   Voluntary work
   Leisure activities
   Other (please specify)

8. When you visited the practice nurse did anyone come with you? Please circle the appropriate response.
   Yes (continue with question 9)
   No (Your questionnaire is complete)

9. Please put zero if your main companion did not travel by bus at all. If your main companion travelled with you by bus how much approximately did they pay (one-way) in fares (if anything)? Please write the cost in the box below.
   Cost of (one-way) fare (£) pence

10. Please circle the number that best describes what your main companion would otherwise have been doing as their main activity if they had not gone with you to see the practice nurse.
    Paid work
    Housework
    Childcare
    Caring for someone else
    Voluntary work
    Leisure activities
    Other (please specify)