

total

1. How Helpful were the different parts of the program?

	<i>Not at all Helpful</i>		<i>Somewhat Helpful</i>			<i>Very Helpful</i>		
	<i>0</i>	<i>1</i>	<i>2</i>	<i>3</i>	<i>4</i>	<i>5</i>	<i>6</i>	total
a) Medical Intervention								
# of patients	0	0	6	10	11	10	22	59
Percentage	0.00%	0.00%	10.17%	16.95%	18.64%	16.95%	37.29%	
b) Chiropractic Intervention								
# of patients	0	0	4	6	12	18	21	61
percentage	0.00%	0.00%	6.56%	9.84%	19.67%	29.51%	34.43%	
c) Exercise								
# of patients	0	0	1	7	8	11	34	61
Percentage	0.00%	0.00%	1.64%	11.48%	13.11%	18.03%	55.74%	
d) Education								
# of patients	1		3	5	10	16	26	61
Percentage	1.64%	0.00%	4.92%	8.20%	16.39%	26.23%	42.62%	
e) Acupuncture								
# of patients	1	1	6	4	10	13	23	58
Percentage	1.72%	1.72%	10.34%	6.90%	17.24%	22.41%	39.66%	
f) Psychological- Individual Sessions								
# of patients	0	1	1	9	13	11	24	59
Percentage	0.00%	1.69%	1.69%	15.25%	22.03%	18.64%	40.68%	
g) Psychological-Group Sessions								
# of patients	1	3	4	6	8	17	21	60
Percentage	1.67%	5.00%	6.67%	10.00%	13.33%	28.33%	35.00%	

2. What is your overall level of satisfaction with this treatment program?

	<i>Not at all Helpful</i>		<i>Somewhat Helpful</i>			<i>Very Helpful</i>		
	<i>0</i>	<i>1</i>	<i>2</i>	<i>3</i>	<i>4</i>	<i>5</i>	<i>6</i>	total
# of patients	0	0	2	4	6	16	31	59
Percentage	0.00%	0.00%	3.39%	6.78%	10.17%	27.12%	52.54%	

3. Please rate the level of change in the following areas:

	<i>No Change/Worse</i>		<i>Moderate Improvmnt</i>			<i>Great Improvement</i>		
	<i>0</i>	<i>1</i>	<i>2</i>	<i>3</i>	<i>4</i>	<i>5</i>	<i>6</i>	total
a) Ability to work								
# of patients	12	7	7	15	13	0	2	56
Percentage	21.43%	12.50%	12.50%	26.79%	23.21%	0.00%	3.57%	
b) Family life								
# of patients	5	5	13	23	11	2	2	61
Percentage	8.20%	8.20%	21.31%	37.70%	18.03%	3.28%	3.28%	
c) Social activities								
# of patients	6	8	10	20	8	2	1	55
Percentage	10.91%	14.55%	18.18%	36.36%	14.55%	3.64%	1.82%	
d) Hobbies								
# of patients	7	19	14	12	7	1	1	61
Percentage	11.48%	31.15%	22.95%	19.67%	11.48%	1.64%	1.64%	

e) Ability to complete housekeeping	0	1	2	3	4	5	6	total
# of patients	5	12	8	23	10	1	1	60
Percentage	8.33%	20.00%	13.33%	38.33%	16.67%	1.67%	1.67%	

f) Ability to complete home maintenance	0	1	2	3	4	5	6	total
# of patients	6	11	14	14	3	1	1	50
Percentage	12.00%	22.00%	28.00%	28.00%	6.00%	2.00%	2.00%	

4. Pain Perception:

a) Rate the level of your pain when you started this program?

	No Pain										Severe Pain		total
	0	1	2	3	4	5	6	7	8	9	10		
# of pts				1	1	2	2	3	19	10	12	50	
%	0.00%	0.00%	0.00%	2.00%	2.00%	4.00%	4.00%	6.00%	38.00%	20.00%	24.00%		

b) Rate the level of your pain today?

	0	1	2	3	4	5	6	7	8	9	10	total
# of pts			2		2	11	16	15	10	3	1	60
%	0.00%	0.00%	3.33%	0.00%	3.33%	18.33%	26.67%	25.00%	16.67%	5.00%	1.67%	

5. Coping Perception:

a) Rate how well you were coping prior to this program.

	Not Coping		Satisfactorily			Very Well		total
	0	1	2	3	4	5	6	
# of patients	15	15	15	7	5	2	1	60
Percentage	25.00%	25.00%	25.00%	11.67%	8.33%	3.33%	1.67%	

b) Rate how well you are now coping with your condition.

	0	1	2	3	4	5	6	total
# of patients	3	2	13	18	17	8	1	62
Percentage	4.84%	3.23%	20.97%	29.03%	27.42%	12.90%	1.61%	

6. Psychological / Emotional Adjustment:

a) Rate your psychological emotional adjustment prior to this program (e.g. depression, anxiety, irritability etc.)

	No Emotional Difficulties		Moderate Emotional Difficulties			Severe Emotional Difficulties		total
	0	1	2	3	4	5	6	
# of patients	2		7	8	9	14	21	61
Percentage	3.28%	0.00%	11.48%	13.11%	14.75%	22.95%	34.43%	

b) Rate your psychological emotional adjustment currently (e.g. depression, anxiety, irritability etc)

	0	1	2	3	4	5	6	total
# of patients		2	8	21	17	10	3	61
Percentage	0.00%	3.28%	13.11%	34.43%	27.87%	16.39%	4.92%	

7. Would you recommend our program to a friend?

	Yes	No	total
# of patients	61		61
Percentage	100%	0%	