

**Pre-Counseling Questionnaire**

**Demographic Characteristics**

Patient Name:

MR Number:

Date:                      Day                      Time:

Age:

Sex:      Male                                      Female                                      Other

Vision (with glasses, if they have glasses): Right Eye:      Left Eye:

Best Corrected Visual Acuity: Right eye:      Left Eye:

Type of cataract?

Immature cataract      Mature cataract      Hypermature cataract

Patients Profile:

1. Are you literate? (If no go to question # 3)  
    Yes    No

2. Education:

Illiterate      Primary Schooling      Secondary Schooling

Higher Secondary      Above Higher Secondary

3. Occupation: Household work    Agriculture    Unskilled Labor

Not Working    Skilled Labor    Business/Shop    Professional    Other

4. Annual Family Income:

5. Insurance? Yes/No

6. Is this the first time you are coming to this hospital? Yes/No

7. Has anyone in your family had cataract surgery? Yes/No
8. Have you visited any other eye care provider or hospital in the past year? Yes/No
9. Are you wearing glasses? Yes No
10. Presenting complaint of the patient: At which stage did you realise that you have cataract?
  - a) Blurred vision
  - b) Pain in the eyes
  - c) When the pupil turned white
  - d) Other (specify)\_\_\_\_\_

11. Are you (the patient) the primary decision maker? Yes/No

If not, who is helping you make the decision to have cataract surgery? -----  
----- (Relationship)

### **Knowledge about Cataract**

1. Cataract is contagious.
  - a) Yes
  - b) No
  - c) I don't know
2. Cataract is a part of the natural aging process.
  - a) True
  - b) False
  - c) I don't know
3. Cataract develops when the lens becomes cloudy and no longer transmits light adequately.
  - a) Yes
  - b) No
  - c) I don't know
4. Can cataract be cured using medications or anything besides surgery?
  - a) Yes
  - b) No
  - c) I don't know

5. How long does the average cataract surgery take with the surgeons at Aravind??

- a) 15-20 minutes
- b) 2 minutes
- c) >2 hour
- d) I don't know

6. Is the plastic lens (IOL) that is placed inside the eye safe?

- a) Yes
- b) No
- c) I don't know

7. How long with the plastic lens (IOL) placed inside the eye last?

- a) 1 year
- b) lifetime
- c) 10 years
- d) I don't know

8. Will you receive anesthesia before surgery so that you won't feel pain?

- a) Yes
- b) No
- c) I don't know

9. How long will you need to rest after the surgery?

- a) 2 weeks to 1 month
- b) 6 months to 1 year
- c) 1 day
- d) I don't know

10. Can you eat normal food after surgery?

- a) Yes
- b) No
- c) I don't know

11. Are you worried about having cataract surgery?

|              |         |         |                 |                    |
|--------------|---------|---------|-----------------|--------------------|
| 1            | 2       | 3       | 4               | 5                  |
| Very Worried | Worried | Neutral | Not too worried | Not worried at all |

12. Do you think cataract surgery will improve your vision?

- a) Yes
- b) No
- c) I don't know

13. What kind of fears do you have about cataract surgery?

- a) \_\_\_\_\_
- b) \_\_\_\_\_
- c) \_\_\_\_\_

**Decisional Conflict Scale**

1. This decision to have cataract surgery is hard for me to make

1                      2                      3                      4                      5  
Strongly Agree      Agree              Neither Agree nor Disagree      Disagree      Strongly Disagree

2. I'm unsure what to do about if I should have cataract surgery

1                      2                      3                      4                      5  
Strongly Agree      Agree              Neither Agree nor Disagree      Disagree      Strongly Disagree

3. It's clear what choice is best for me regarding cataract surgery

1                      2                      3                      4                      5  
Strongly Agree      Agree              Neither Agree nor Disagree      Disagree      Strongly Disagree

**Decisional Helping factors**

1. I'm aware of the choices I have to treat my cataract

1                      2                      3                      4                      5  
Strongly Agree      Agree              Neither Agree nor Disagree      Disagree      Strongly Disagree

2. I feel I know the benefits of cataract surgery

1                      2                      3                      4                      5  
Strongly Agree      Agree              Neither Agree nor Disagree      Disagree      Strongly Disagree

3. I feel I know the risks and side effects of cataract surgery

|                |       |                            |          |                   |
|----------------|-------|----------------------------|----------|-------------------|
| 1              | 2     | 3                          | 4        | 5                 |
| Strongly Agree | Agree | Neither Agree nor Disagree | Disagree | Strongly Disagree |

4. I have the right amount of support from others in making this choice

|                |       |                            |          |                   |
|----------------|-------|----------------------------|----------|-------------------|
| 1              | 2     | 3                          | 4        | 5                 |
| Strongly Agree | Agree | Neither Agree nor Disagree | Disagree | Strongly Disagree |

5. I feel pressure from others in making this decision

|                |       |                            |          |                   |
|----------------|-------|----------------------------|----------|-------------------|
| 1              | 2     | 3                          | 4        | 5                 |
| Strongly Agree | Agree | Neither Agree nor Disagree | Disagree | Strongly Disagree |

Expected Decisional habits:

1. I feel I have made an informed choice

|                |       |                            |          |                   |
|----------------|-------|----------------------------|----------|-------------------|
| 1              | 2     | 3                          | 4        | 5                 |
| Strongly Agree | Agree | Neither Agree nor Disagree | Disagree | Strongly Disagree |

2. My decision shows what is most important for me

|                |       |                            |          |                   |
|----------------|-------|----------------------------|----------|-------------------|
| 1              | 2     | 3                          | 4        | 5                 |
| Strongly Agree | Agree | Neither Agree nor Disagree | Disagree | Strongly Disagree |

3. I expect to stick with my decision

|                |       |                            |          |                   |
|----------------|-------|----------------------------|----------|-------------------|
| 1              | 2     | 3                          | 4        | 5                 |
| Strongly Agree | Agree | Neither Agree nor Disagree | Disagree | Strongly Disagree |

4. I am satisfied with my decision

|                |       |                            |          |                   |
|----------------|-------|----------------------------|----------|-------------------|
| 1              | 2     | 3                          | 4        | 5                 |
| Strongly Agree | Agree | Neither Agree nor Disagree | Disagree | Strongly Disagree |

## Post-Counseling Questionnaire

Study No .....

### Knowledge about Cataract

2. Cataract is contagious.
  - d) Yes
  - e) No
  - f) I don't know
  
2. Cataract is a part of the natural aging process.
  - d) True
  - e) False
  - f) I don't know
  
3. Cataract develops when the lens becomes cloudy and no longer transmits light adequately.
  - d) Yes
  - e) No
  - f) I don't know
  
4. Can cataract be cured using medications or anything besides surgery?
  - d) Yes
  - e) No
  - f) I don't know
  
5. How long does the average cataract surgery take with the surgeons at Aravind??
  - a) 15-20 minutes
  - b) 2 minutes
  - c) >2 hour
  - d) I don't know
  
6. Is the plastic lens (IOL) that is placed inside the eye safe?
  - d) Yes
  - e) No
  - f) I don't know

7. How long with the plastic lens (IOL) placed inside the eye last?

- a) 1 year
- b) lifetime
- c) 10 years
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- a) Yes
- b) No
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9. How long will you need to rest after the surgery?

- a) 2 weeks to 1 month
- b) 6 months to 1 year
- c) 1 day
- d) I don't know

10. Can you eat normal food after surgery?

- a) Yes
- b) No
- c) I don't know

11. Are you worried about having cataract surgery?

Yes                  No                  Not really

12. Do you think cataract surgery will improve your vision?

- a) Yes
- b) No
- c) I don't know

13. What kind of fears do you have about cataract surgery?

- d) \_\_\_\_\_
  - e) \_\_\_\_\_
  - f) \_\_\_\_\_
- 

14. How long did the counsellor spend with you? -----

15. Did the counsellor clear your doubts on Cataract?

Yes No Not really

16. Did the counsellor influence your decision to have cataract surgery?

- a) Yes
- b) No
- c) Not sure

17. Were you satisfied with the way the counsellor answered your questions?

|                |           |         |               |      |
|----------------|-----------|---------|---------------|------|
| 1              | 2         | 3       | 4             | 5    |
| Very Satisfied | Satisfied | Neutral | Not Satisfied | Very |
| Dissatisfied   |           |         |               |      |

18. Were you satisfied with your overall experience with the counsellor?

|                |           |         |               |      |
|----------------|-----------|---------|---------------|------|
| 1              | 2         | 3       | 4             | 5    |
| Very Satisfied | Satisfied | Neutral | Not Satisfied | Very |
| Dissatisfied   |           |         |               |      |

19. Did the counsellor contribute to your overall satisfaction with your medical care at Aravind?

- a) Yes
- b) No
- c) Not really

### **Decisional Conflict Scale**

1. This decision to have cataract surgery is hard for me to make

|                |       |                            |          |                   |
|----------------|-------|----------------------------|----------|-------------------|
| 1              | 2     | 3                          | 4        | 5                 |
| Strongly Agree | Agree | Neither Agree nor Disagree | Disagree | Strongly Disagree |

2. I'm unsure what to do about if I should have cataract surgery

|                |       |                            |          |                   |
|----------------|-------|----------------------------|----------|-------------------|
| 1              | 2     | 3                          | 4        | 5                 |
| Strongly Agree | Agree | Neither Agree nor Disagree | Disagree | Strongly Disagree |

3. It's clear what choice is best for me regarding cataract surgery



1                      2                      3                      4                      5  
Strongly Agree      Agree              Neither Agree nor Disagree      Disagree      Strongly Disagree

### **Decisional Helping factors**

1. I'm aware of the choices I have to treat my cataract

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2. I feel I know the benefits of cataract surgery

1                      2                      3                      4                      5  
Strongly Agree      Agree              Neither Agree nor Disagree      Disagree      Strongly Disagree

3. I feel I know the risks and side effects of cataract surgery

1                      2                      3                      4                      5  
Strongly Agree      Agree              Neither Agree nor Disagree      Disagree      Strongly Disagree

4. I have the right amount of support from others in making this choice

1                      2                      3                      4                      5  
Strongly Agree      Agree              Neither Agree nor Disagree      Disagree      Strongly Disagree

5. I feel pressure from others in making this decision

1                      2                      3                      4                      5  
Strongly Agree      Agree              Neither Agree nor Disagree      Disagree      Strongly Disagree

### **Expected Decisional habits:**

1. I feel I have made an informed choice

1                      2                      3                      4                      5  
Strongly Agree      Agree              Neither Agree nor Disagree      Disagree      Strongly Disagree

2. My decision shows what is most important for me

|                |       |                            |          |                   |
|----------------|-------|----------------------------|----------|-------------------|
| 1              | 2     | 3                          | 4        | 5                 |
| Strongly Agree | Agree | Neither Agree nor Disagree | Disagree | Strongly Disagree |

3. I expect to stick with my decision

|                |       |                            |          |                   |
|----------------|-------|----------------------------|----------|-------------------|
| 1              | 2     | 3                          | 4        | 5                 |
| Strongly Agree | Agree | Neither Agree nor Disagree | Disagree | Strongly Disagree |

4. I am satisfied with my decision

|                |       |                            |          |      |
|----------------|-------|----------------------------|----------|------|
| 1              | 2     | 3                          | 4        | 5    |
| Strongly Agree | Agree | Neither Agree nor Disagree | Disagree | Stro |

### **Estimating the way counselling done**

1. I am satisfied with the information I have been given about cataract surgery.

|                |       |                            |          |                   |
|----------------|-------|----------------------------|----------|-------------------|
| 1              | 2     | 3                          | 4        | 5                 |
| Strongly Agree | Agree | Neither Agree nor Disagree | Disagree | Strongly Disagree |

2. I am satisfied with the way treatment information is presented to me. It is clear and easy to understand.

|                |       |                            |          |                   |
|----------------|-------|----------------------------|----------|-------------------|
| 1              | 2     | 3                          | 4        | 5                 |
| Strongly Agree | Agree | Neither Agree nor Disagree | Disagree | Strongly Disagree |

3. I am satisfied that I have enough opportunity to ask questions about the surgery for my cataract.

|                |       |                            |          |                   |
|----------------|-------|----------------------------|----------|-------------------|
| 1              | 2     | 3                          | 4        | 5                 |
| Strongly Agree | Agree | Neither Agree nor Disagree | Disagree | Strongly Disagree |

4. I am satisfied with the available information resources such as the handouts and counselling.

|                |       |                            |          |                   |
|----------------|-------|----------------------------|----------|-------------------|
| 1              | 2     | 3                          | 4        | 5                 |
| Strongly Agree | Agree | Neither Agree nor Disagree | Disagree | Strongly Disagree |

5. Overall, I am satisfied with the manner in which the information is provided. It is friendly, respectful and non-judgemental.

|                |       |                            |          |                   |
|----------------|-------|----------------------------|----------|-------------------|
| 1              | 2     | 3                          | 4        | 5                 |
| Strongly Agree | Agree | Neither Agree nor Disagree | Disagree | Strongly Disagree |

6. I am satisfied that I am able to make informed choices about treatment for my cataract.

|                |       |                            |          |                   |
|----------------|-------|----------------------------|----------|-------------------|
| 1              | 2     | 3                          | 4        | 5                 |
| Strongly Agree | Agree | Neither Agree nor Disagree | Disagree | Strongly Disagree |