

Provider Satisfaction Survey

The Chronic pain Coordination Project is a new clinical demonstration pilot that uses telecommunication technology to improve chronic pain perception and management for those veterans with chronic non-malignant pain diagnoses. As part of our performance improvement plan, we want your input as to how we may serve you and your patient's better through this project. Please answer the questions below and provide comments on how you think the technology/project has helped your participating patients.

1. Do you think you have a good understanding of how the project augments patient care?
YES **NO, if no – why not?**

2. Do you or would you refer patients to this project?
YES **NO, if no – why not?**

3. Do you get timely CPRS notes, phone calls, etc ... about changes in your patient's condition?
YES **NO, if no – why not?**

4. Do you feel that the project has positively influenced care management of your patient's chronic pain?
YES **No, if no – why not?**

5. Do you feel that phone calls are decreased due to the monitoring and care coordination?
YES **NO, if no – why not?**

6. Do you think this project has made a difference in the pain management of your patient(s)?
YES **NO, if no – why not?**

ANY ADDITIONAL COMMENTS ARE APPRECIATED

Thanks for your participation. Please return survey to _____