Please enter a code so we can link all surveys filled out by a single physician. The code is your MOTHER’S DATE OF BIRTH (if unknown, please use father’s date of birth):

- **Month (1)** ▼ Jan (1) ... Dec (12)
- **Day (1)** ▼ 1 (1) ... 31 (31)
- **Year (1)** ▼ 1999 (1) ... 1900 (100)
Q1 Was this the first month you have conducted video visits?

- Yes (1)
- No (2)

Q2 What month was your last video visit?

- January (1) ...
- December (12)

Q3 Overall, how satisfied were you with your visits in the last month?

<table>
<thead>
<tr>
<th></th>
<th>Very satisfied (1)</th>
<th>Somewhat satisfied (2)</th>
<th>Neutral (3)</th>
<th>Somewhat dissatisfied (4)</th>
<th>Very dissatisfied (5)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Q4 Did any of these things happen at your visits in the last month? (Mark all that apply)

☐ I had technical issues. (1)

☐ I didn’t like interacting on video. (2)

☐ I was more than 15 minutes late. (3)

☐ The patient was late or not there. (4)

☐ I was not happy with how the visit went. (5)

☐ It would have been better to have had an in-person visit with this patient. (6)

☐ My MA or clinic staff didn't know how to set up or run the video visit (7)

☐ The visit took too long (8)

☐ I found using the technology stressful (9)

☐ The video visit disrupted my clinic flow (10)

☐ It wasn't a good fit for how I like to interact with patients (11)

☐ I need to examine the patient or to pick up non-verbal cues which I couldn't via video. (12)

☐ I don't think my patient(s) liked having a video visit (13)

☐ Patient brought up urgent complaints that needed a face-to-face discussion or examination (14)

☐ Other (please describe) (15)

________________________________________________
Q5 Thinking about your visit, how strongly do you agree or disagree with the following statements?

<table>
<thead>
<tr>
<th>Strongly disagree (1)</th>
<th>Disagree (2)</th>
<th>Agree (3)</th>
<th>Strongly Agree (4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>The video visit(s) were a good alternative to a face-to-face visit. (1)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>It was easy to connect to the video. (2)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I did NOT have enough time with my patient(s) on the video visits. (3)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I would do another video visit if I have the opportunity. (4)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I was able to complete all visit documentation during the visit or within 2 minutes of the visit ending. (5)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Having a video visit saved me time in clinic. (6)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Having a video visit INCREASED my stress level in clinic. (7)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Q6 Compared to a usual face-to-face visit, do you think your video visits took MORE or LESS time?

Include time for connecting on video, time with the patient, and documentation.
If multiple visits, please answer for your average or typical video visit.

- Video visit took **more** time (1)
- About the same amount of time (2)
- Video visit took **less** time (3)

Q36 On average, about how many minutes MORE did your video visit(s) take?
Include time for connecting on video, time with the patient, and documentation.

<table>
<thead>
<tr>
<th># Minutes ()</th>
</tr>
</thead>
</table>

Q37 On average, about how many minutes LESS did your video visit(s) take?
Include time for connecting on video, time with the patient, and documentation.

<table>
<thead>
<tr>
<th># Minutes ()</th>
</tr>
</thead>
</table>
Q7 Are you...

- Male  (1)
- Female  (2)
- Other  (3)

Q8 Was there anything you particularly liked or didn't like about your video visit?
________________________________________________________________
________________________________________________________________
________________________________________________________________
________________________________________________________________

Thank you for helping! We very much appreciate your time and hope to use this to improve our patient care and physician satisfaction. Click here for gift card drawing Click the link above to register your participation this month. If you complete 75% of your surveys, you will be entered in a drawing at the end of the study (12 months) for one of four $25 gift cards.

End of Block: Default Question Block