

Care Received from your Doctor(s)**Follow-up:**

We recognise that it is not always possible or necessary for doctors to do all the things mentioned. Please think about the GP(s) you have seen most since being part of the study.

- 1 Did your doctor(s) discuss practical problems which have been facing you? (For example: problems at work, at home, with family responsibilities, housing, or money worries.)

No

Yes a little

Yes a lot

I can't remember

- 2 Did the doctor(s) discuss with you ways in which you could work to solve the problems facing you?

No

Yes a little

Yes a lot

I can't remember

- 3 Did the doctor(s) discuss whether you should do more physical exercise?

No

Yes a little

Yes a lot

I can't remember

- 4 Did the doctor(s) discuss whether you should do relaxation exercises?

No

Yes a little

Yes a lot

I can't remember

- 5 Did the doctor(s) discuss whether you could find more leisure time for yourself?

No

Yes a little

Yes a lot

I can't remember

- 6 Did the doctor(s) discuss the possibility that you could start or restart activities which you might enjoy?

No

Yes a little

Yes a lot

I can't remember

- 7 Did the doctor(s) discuss addressing your relationships with friends, family, or loved ones?
- No
- Yes a little
- Yes a lot
- I can't remember
- 8 Did the doctor(s) discuss whether you could talk things through with trusted family or friends?
- No
- Yes a little
- Yes a lot
- I can't remember
- 9 Did the doctor(s) discuss referring you for counselling, psychology treatment, or talking treatments?
- No
- Yes a little
- Yes a lot
- I can't remember
- 10 Did the doctor(s) discuss with you the possibility of changing your work patterns?
- No
- Yes a little
- Yes a lot
- I can't remember
- 11 Did the doctor discuss whether the way you think about things could be changed to improve your symptoms?
- No
- Yes a little
- Yes a lot
- I can't remember
- 12 Did the doctor discuss antidepressant medication with you?
- No
- Yes a little
- Yes a lot
- I can't remember
- 13 Have you been prescribed antidepressants? Yes No

You only need to complete the following questions if you have answered YES to Question 13 above and you have been prescribed antidepressant medication by your doctor.

We realise that there are lots of reasons why people do not like taking antidepressants and sometimes do not take the antidepressant medication which is prescribed to them. We are interested in your experience. If you have been prescribed antidepressant medication, please list below what it was and how long you have taken it for. If you have taken more than one please write down which ones they were and for how long.

14 How many weeks did you actually take your medicine for during the past 12 weeks? (*Do not worry if you cannot recall the name of the medicine.*)

Antidepressant medication

Name

Taken for week(s)

15 Do you ever forget to take your medicine?

Yes No

16 Are you careless at times about taking your medicine?

Yes No

17 When you feel better do you sometimes stop taking your medicine?

Yes No

18 Sometimes if you feel worse when you take the medicine, do you stop taking it?

Yes No

19 Have you suffered any side-effects from the medication? Yes No

20 If yes, what were these?

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Date completed: