



Royal College of  
General Practitioners



Faculty of Sport  
and Exercise  
Medicine UK



The Primary Care  
Rheumatology and  
Musculoskeletal  
Medicine Society



British Association of Sport  
& Exercise Medicine

## Form 5b – Patient feedback form

For GPs seeking accreditation as GPwER in Musculoskeletal Medicine with the  
Faculty of Sports and Exercise Medicine

	Strongly agree	Agree	Neutral	Disagree	Strongly disagree
I was happy with how quickly I was seen on the day of my appointment	<input type="checkbox"/>				
The doctor treated me with respect and dignity	<input type="checkbox"/>				
I was listened to	<input type="checkbox"/>				
I understood what was being discussed	<input type="checkbox"/>				
I was given the opportunity to ask questions	<input type="checkbox"/>				
I was satisfied with the explanation given to me about my condition	<input type="checkbox"/>				
I was offered additional information about my condition (patient information leaflet, and/or directed to patient support groups)	<input type="checkbox"/>				
I was fully involved in decisions about the management of my condition	<input type="checkbox"/>				
Overall, I was impressed	<input type="checkbox"/>				
I would recommend the doctor to family and friends	<input type="checkbox"/>				

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**Comments about your appointment today**

Please comment below about anything particularly good, and anything that could be improved.

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