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## **Appendix 1: Patient satisfaction questionnaire (full instrument).**

(Originally administered through Google Forms; English and Bengali bilingual items)

### **Section A. Participant information**

1. Age (years)
2. Gender
3. Marital status
4. Education level
5. Religion
6. Occupation
7. Monthly household income
8. Distance from the healthcare facility
9. First visit to this facility (Yes/No/Maybe).

### **Section B. Facility environment**

- The healthcare facility was clean and well-maintained (1–5)
- Signage and directions were easy to follow (1–5)
- Toilets and drinking water were available and clean (1–5).

### **Section C. Patient flow and administrative process**

- Waiting area was comfortable (1–5)
- Registration staff were courteous and efficient (1–5)
- I was seen by the doctor without excessive waiting (1–5).

### **Section D. Doctor-patient communication**

- Doctor greeted me respectfully (1–5)
- Doctor explained my illness clearly (1–5)
- I was allowed to ask questions (1–5)
- No discrimination was shown by staff (1–5)
- My privacy was maintained (1–5).

### **Section E. Pharmacy and medication**

- I received all prescribed medicines (1–5)
- I understood how and when to take medicines (1–5)
- I was informed about follow-up or referrals (1–5).

### **Section F. Experience and satisfaction**

- I feel my problem was addressed properly (1–5)
- I am satisfied with the care I received (1–5)
- I will return to this facility if needed (1–5)
- I would recommend this facility to others (1–5).

### **Section G. Additional clinical communication**

- Did the doctor tell you the name/cause of illness? (Yes/No/Maybe)
- Did you understand your illness? (Yes/No/Maybe)
- Do you know how and when to take your medicines? (Yes/No/Maybe)
- Were you told what to do if symptoms worsen? (Yes/No/Maybe)
- Did the doctor give lifestyle/prevention advice? (Yes/No/Maybe).

### **Section H. Educational materials and self-management**

- Were posters/leaflets visible? Were they useful?
- Do you feel confident managing your illness after today's visit?
- Have you previously visited this center for preventive services?

### **Section I. Open-ended questions**

1. What was most helpful today?
  2. Was anything confusing or frustrating?
  3. What services should be improved?
  4. Any suggestions for staff or the facility?
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