

Appendix A Pre-Anesthesia Comfort Questionnaire

Thank you very much for your help with this comfort study. Below are statements that may describe your comfort before going into the operating room. Six numbers are provided for each question; please circle the number you think most closely matches your feeling. Relate these questions to your comfort prior to going to the operating room.

	Strongly Agree			Strongly Disagree		
	1	2	3	4	5	6
1. I was calm.	1	2	3	4	5	6
2. I was cold.	1	2	3	4	5	6
3. The environment was impersonal.	1	2	3	4	5	6
4. My condition gets me down.	1	2	3	4	5	6
5. My family/friends helped me to cope.	1	2	3	4	5	6
6. I had a chance to speak with my anesthetist before surgery.	1	2	3	4	5	6
7. My modesty was not protected.	1	2	3	4	5	6
8. My anxiety was high.	1	2	3	4	5	6
9. The anesthesia personnel did not care about my feelings.	1	2	3	4	5	6
10. The noises were disturbing.	1	2	3	4	5	6
11. My anesthetist was gentle.	1	2	3	4	5	6
12. I needed more information about my anesthesia.	1	2	3	4	5	6
13. I felt out of control.	1	2	3	4	5	6
14. The mood around here was reassuring.	1	2	3	4	5	6
15. The quality of my care was poor.	1	2	3	4	5	6
16. My wishes were carried out.	1	2	3	4	5	6
17. My sense of self-respect was not preserved.	1	2	3	4	5	6
18. I was able to visualize a successful recovery.	1	2	3	4	5	6
19. The environment here felt safe.	1	2	3	4	5	6
20. My care helped me feel confident.	1	2	3	4	5	6
21. I was not afraid to go to sleep.	1	2	3	4	5	6
22. My IV site was painful.	1	2	3	4	5	6
23. I am satisfied with the care I received here.	1	2	3	4	5	6
24. My anesthetist took good care of me.	1	2	3	4	5	6

