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Appendix 1:

New ALS Patient Questionnaire

1.	Patient Demographics:			
		a. Age: b. Gender: M F c. Race: Hispanic Caucasian African American Other:		
2.	Health Care Utilization:			
		a. Where did you receive medical care for ALS prior to coming to the VA?		
		b. What type of doctor did you see?		
		c. Have you been seen by a Neurologist since you had ALS? Yes No		
3.	Health Information/Care: During your previous medical care:			
	Was education about <u>ALS Management</u> provided to you?			
		☐ Very satisfied ☐ Satisfied ☐ Neutral ☐ Dissatisfied ☐ Very dissatisfied		
	2.	Where you evaluated by a <u>Speech Therapist</u> ?		
		☐ Very satisfied ☐ Satisfied ☐ Neutral ☐ Dissatisfied ☐ Very dissatisfied		
	3.	Was <u>Tracheostomy placement</u> discussed with you?		
		☐ Very satisfied ☐ Satisfied ☐ Neutral ☐ Dissatisfied ☐ Very dissatisfied		
	4.	Was a <u>PEG Tube Placement</u> discussed with you? ☐ Yes ☐ No		
		If yes, please indicate how satisfied you were with the <u>ALS management</u> education that you received:		
		☐ Very satisfied ☐ Satisfied ☐ Neutral ☐ Dissatisfied ☐ Very dissatisfied		

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5.	Were you evaluated by an Occupational Therapist for Equipment Needs?	☐Yes	☐ No
	If yes, please indicate how satisfied you were with the <u>ALS r</u> that you received:	<u>nanagement</u> edu	ıcation
	☐ Very satisfied ☐ Satisfied ☐ Neutral ☐ Dissatisfied	☐ Very dissatis	sfied
6.	Was a <u>Home Evaluation</u> done? If yes, please indicate how satisfied you were with the <u>ALS r</u> that you received:	☐ Yes <u>management</u> edu	☐ No ucation
	☐ Very satisfied ☐ Satisfied ☐ Neutral ☐ Dissatisfied	☐ Very dissatis	sfied
7.	Was the prognosis of ALS (disease course & outcomes) dise	cussed with you?	, □No
	If yes, please indicate how satisfied you were with the <u>ALS r</u> that you received:		_
	☐ Very satisfied ☐ Satisfied ☐ Neutral ☐ Dissatisfied	☐ Very dissatis	fied
8.	Was the End of Life care discussed with you? If yes, please indicate how satisfied you were with the ALS rethat you received:	∐ Yes <u>management</u> ed∪	☐ No ucation
	☐ Very satisfied ☐ Satisfied ☐ Neutral ☐ Dissatisfied	☐ Very dissatis	fied