



Blood Sugar Testing in Dental Practice: Patient Questionnaire

Thank you very much for participating. Your answers will help us evaluate blood sugar testing in dental practice.

When you are finished, please fold this paper, then place it in the sealed box marked "Blood Sugar Testing". This box will be returned to the study coordinator for processing. All information is and will remain strictly confidential.

We appreciate your help!

For the following statements, please circle a number from 1 (strongly disagree) to 5 (strongly agree). There are no right or wrong answers. Please provide only one answer for each question.

| | Strongly Disagree | Disagree Neutral | | Agree | Strongly Agree | |
|--|----------------------|------------------|---|-------|-------------------|--|
| Overall, I think blood sugar testing in the dental office is a good idea. | 1 | 2 | 3 | 4 | 5 | |
| Testing for glucose shows a high level of care in this office. | 1 | 2 | 3 | 4 | 5 | |
| I am more likely to refer friends and family to this practice because blood sugar testing is offered here. | 1 | 2 | 3 | 4 | 5 | |

If you got your blood sugar tested today, then please answer these two statements:

| Having my blood sugar tested today was easy. | 1 | 2 | 3 | 4 | 5 |
|--|---|---|---|---|---|
| This test gave me useful information. | 1 | 2 | 3 | 4 | 5 |

Thank you!

Please place this paper into the box marked "Blood Sugar Testing".