

**Supplement 5 – Outcome measures (2): Participant Experience Questionnaire & Healthcare Utilisation Questions**

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**Please rate your responses to the following statements by ticking the appropriate box:**

	Strongly disagree	Disagree	Agree	Strongly agree
1. The clinician who saw me in the Spinal Clinic knew what they were talking about				
2. The clinician used simple, clear language that I could easily understand				
3. The information on the handout was relevant to me				
4. The information on the handout was helpful				
5. It was good to get the follow-up text messages				
6. Overall, I was satisfied with the care I received from the Spinal Clinic				
7. The information I have received from the Spinal Clinic will assist my recovery				

**Healthcare use since your Spinal Clinic appointment:**

1. In the past month, **have you seen a general practitioner** for your back pain?

Y / N                      If so, how many times? \_\_\_\_

2. In the past month, **have you seen a physiotherapist** for your back pain?

Y / N                      If so, how many times? \_\_\_\_

3. In the past month, **have you seen a chiropractor, massage therapist or other health care professional** for your back pain?

Y / N                      If so, how many times? \_\_\_\_