

GP QUESTIONNAIRE

Thank you for taking the time to complete this short questionnaire. Please answer all the questions to the best of your knowledge, leaving unanswerable questions blank.

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|------------------|---|--|--|--|--|--|--|--|
| Patient Details: | | | | | | | | |
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Following ICU admission on the 1/1/1970

Were you aware that your patient was admitted to the ICU at the ABC Hospital on the 1/1/1970?

□Yes □No

Did you receive a letter from the ICON study informing you that your patient was at risk of depression / anxiety / post traumatic stress disorder?

□Yes □No

If No, thank you for completing this questionnaire

Did the letter from the ICON study warning of your patient's possible depression / anxiety / post traumatic stress disorder prompt further treatment? (please tick all those that apply)

- Repeat psychological screening assessment
- □ Follow-up appointment within 4 weeks time
- Prescription of an antidepressant drug
- □ Prescription of a anxiolytic drug
- □ Prescription of a psychotropic drug
- □ Referral to mental health or social services
 - Counsellor
 - Primary care mental health worker
 - □ Psychology
 - Social Services
 - Psychiatry
- No further action taken as patient known to suffer from pre-existing depression, anxiety or post traumatic stress disorder
- □ None of the above

Thank You!