

Diabetes Treatment Satisfaction Questionnaire: Parent (DTSQ Parent)

These questions are about your child's treatment for diabetes over the past few weeks.

This includes:

- ☐ medication
- ☐ blood sugar monitoring
- ☐ any eating requirements

Please answer each question by circling a number from 6 to 0 on the scale below it.

Continued on the next page...

2. How well controlled do you feel your child's diabetes has been lately?

very dissatisfied

very poorly
controlled