COVID19-Prevention Treatment Satisfaction Questionnaire (CV19-PrevTSQs)

The following questions are concerned with your medical treatment for the prevention of COVID19 and your experience over the past few weeks. Please answer each question by circling a number on each of the scales.

1.	How satisfied are you with your current treatment to prevent COVID19?								
	very satisfied	6	5	4	3	2	1	0	very dissatisfied
2.	How effective do you feel the treatment is in protecting you against COVID19?								
	very effective	6	5	4	3	2	1	0	very ineffective
3.	How satisfied are you with any side effects of your present treatment?								
	very satisfied	6	5	4	3	2	1	0	very dissatisfied
4.	How satisfied are you with the safety of your present treatment?								
	very satisfied	6	5	4	3	2	1	0	very dissatisfied