

Patients Global Impression of Improvement (PGI-I) for Incontinence

Patient Name			
Date of Birth			
Date questionnaire completed		00 00 00	
Please indicate how long ago you	had you	r incontinence surgery?	
6 weeks			
3 months			
6 months			
1 year		Other	
What best describes how your pobefore you had the incontinence s	-		npared with how it was
Very much better			
Much better			
A little better			
No change			
A little worse			
Much worse			
Very much worse			

Thank you for taking the time to complete this questionnaire.

BSUG Audit and Database Committee.