

IBS TREATMENT SUITABILITY AND PATIENT EXPECTATION FORM

Therapist Version

Therapist	<div><div>0</div><div>1</div><div>2</div><div>3</div><div>4</div><div>5</div><div>6</div><div>7</div><div>8</div><div>9</div></div>									
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Year	<div><div>0</div><div>1</div><div>2</div><div>3</div><div>4</div><div>5</div><div>6</div><div>7</div><div>8</div><div>9</div></div>	<div><div>0</div><div>1</div><div>2</div><div>3</div><div>4</div><div>5</div><div>6</div><div>7</div><div>8</div><div>9</div></div>	<div><div>0</div><div>1</div><div>2</div><div>3</div><div>4</div><div>5</div><div>6</div><div>7</div><div>8</div><div>9</div></div>	<div><div>0</div><div>1</div><div>2</div><div>3</div><div>4</div><div>5</div><div>6</div><div>7</div><div>8</div><div>9</div></div>						
Week	<div><div>0</div><div>1</div><div>2</div><div>3</div><div>4</div><div>5</div><div>6</div><div>7</div><div>8</div><div>9</div></div>									

1. How suitable do you think the assigned treatment is for this patient's IBS symptoms?

Not at all	0	1	2	3	4	5	6	7	8	9	10	Extremely Suitable
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2. How successful do you think the assigned treatment will be for this patient's IBS symptoms?

Not at all	0	1	2	3	4	5	6	7	8	9	10	Completely Successful
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3. Based on your experience treating IBS patients, your clinical skills, and approach, what treatment condition would provide this patient the greatest likelihood of therapeutic benefit for his/her IBS symptoms? :

- ① Standard CBT
- ② Education and Supportive Psychotherapy
- ③ Minimal Contact CBT