Dear Mr. Mrs. / Miss,

You participated in the mindfulness training for people with MS and severe fatigue. Because we not only want to evaluate the efficacy, but also the feasibility of mindfulness training for fatigued MS patients, we would like to ask you to complete this questionnaire and return it in the enclosed envelope. We’d like to use your experience and observations to further develop the training and treatment services for MS patients.

Of course this is completely voluntary and you can also choose not to fill out the list. When answering the questions please circle the letter behind the answer that is most appropriate for you.

1. What do you think of the quality of the mindfulness training you received?
   a. Bad
   b. Moderate
   c. Neutral
   d. Good
   e. Excellent

2. Did you receive the training you were hoping to get?
   a. No, not at all
   b. No, hardly
   c. Neutral
   d. Yes, in general
   e. Yes, definitely

3. Has the workbook from this mindfulness training met your needs?
   a. No, not at all
   b. No, hardly
   c. Neutral
   d. Yes, in general
   e. Yes, definitely

4. What did you think of the quality of the trainers?
   a. Bad
   b. Moderate
   c. Neutral
   d. Good
   e. Excellent

5. Did the mindfulness training help you cope with your fatigue?
   a. No, not at all
   b. No, hardly
   c. Neutral
   d. It helped a bit
   e. Yes, it helped considerably

6. Did the mindfulness training help you cope with your negative emotions?
   a. No, not at all
   b. No, hardly
   c. Neutral
   d. It helped a bit
   e. Yes, it helped considerably

7. Did the mindfulness training help you cope with your (negative) thoughts?
   a. No, not at all
   b. No, hardly
   c. Neutral
   d. It helped a bit
   e. Yes, it helped considerably

8. How satisfied are you overall with the mindfulness training?
Supplementary material to article by A. E. W. Hoogerwerf et al. “Mindfulness-Based Cognitive Therapy For Severely Fatigued Multiple Sclerosis Patients: A Waiting List Controlled Study”

9. Would you recommend the training to other MS patients?
   a. No, not at all
   b. No, hardly
   c. Neutral
   d. Yes, in general
   e. Yes, definitely

10. I would have preferred to follow the training individually instead of in a group
    a. Totally agree
    b. Agree
    c. Neutral
    d. Disagree
    e. Totally disagree

11. I would have preferred to follow the training in a smaller group.
    a. Totally agree
    b. Agree
    c. Neutral
    d. Disagree
    e. Totally disagree

12. I would have preferred to have followed a less intensive training; less sessions, less homework
    a. Totally agree
    b. Agree
    c. Neutral
    d. Disagree
    e. Totally disagree

13. I thought the length of the sessions (2 ½ hours) was too long
    a. Totally agree
    b. Agree
    c. Neutral
    d. Disagree
    e. Totally disagree

14. How much time have you spent on average on daily exercises and homework assignments?
    a. 60 minutes or more
    b. 30 - 60 minutes
    c. 15 - 30 minutes
    d. 0 - 15 minutes

15. If you were to grade this mindfulness training (on a scale from 1 to 10), which grade would you give?
    Grade: ....

Below there is space for comments / tips / improvements
........................................................................................................................................
........................................................................................................................................
........................................................................................................................................
........................................................................................................................................
........................................................................................................................................
........................................................................................................................................
........................................................................................................................................
........................................................................................................................................
........................................................................................................................................
........................................................................................................................................
........................................................................................................................................
........................................................................................................................................

Thank you very much for filling out the questionnaire!
Dear Mr, / Mrs. / Miss,

You participated in the mindfulness training for people with MS and severe fatigue. Unfortunately you were not able to complete the training. Because we not only want to evaluate the efficacy, but also the feasibility of mindfulness training for fatigued MS patients, we would like to ask you to fill out this questionnaire and return it in the enclosed envelope. We’d like to use your experience and observations to further develop the training and treatment services for MS patients.

Of course this is completely voluntary and you can also choose not to fill out the list. When answering the 10 questions please circle the letter behind the answer that is most appropriate for you.

1. Did you receive the training you hoped to get?
   a. No, not at all
   b. No, hardly
   c. Neutral
   d. Yes, in general
   e. Yes, definitely

2. I stopped the training because it did not meet my expectations.
   a. Totally agree
   b. Agree
   c. Neutral
   d. Disagree
   e. Totally disagree

3. I stopped the training because it was too intense and tiring.
   a. Totally agree
   b. Agree
   c. Neutral
   d. Disagree
   e. Totally disagree

4. I stopped the training, because the fatigue is not too bad, or because I have accepted the fatigue.
   a. Totally agree
   b. Agree
   c. Neutral
   d. Disagree
   e. Totally disagree

5. I stopped the training because I did not have time to practice at home.
   a. Totally agree
   b. Agree
   c. Neutral
   d. Disagree
   e. Totally disagree

6. I stopped the training because I did not have any energy to practice at home.
   a. Totally agree
   b. Agree
   c. Neutral
   d. Disagree
   e. Totally disagree

7. I stopped the training because the quality of the training did not meet my expectations.
   a. Totally agree
   b. Agree
   c. Neutral
   d. Disagree
   e. Totally disagree
8. I would have preferred to follow the training individually instead of in a group
   a. Totally agree
   b. Agree
   c. Neutral
   d. Disagree
   e. Totally disagree

9. Would you recommend the training to other MS patients?
   a. No, definitely not
   b. No
   c. Neutral
   d. Yes
   e. Yes, definitely

10. Would you like to start again at another time with the mindfulness training?
    a. No, definitely not
    b. No
    c. Neutral
    d. Yes
    e. Yes, definitely

Below there is space for comments / tips / improvements.
.............................................................................................................................
.............................................................................................................................
.............................................................................................................................
.............................................................................................................................
.............................................................................................................................
.............................................................................................................................
.............................................................................................................................
.............................................................................................................................

Thank you very much for filling out the questionnaire!