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This report was generated on 19/12/18. Overall 2 respondents completed this questionnaire. The report has been filtered to show the responses for 'All Respondents'.

The following charts are restricted to the top 12 codes. Lists are restricted to the most recent 100 rows.

I have read the information above which explains the purpose of the project and how any information I provide will be used



I consent (agree) to NICE using the information I have given in the ways described in the information sheet



How did you hear about this survey?



Are you (the person completing the questionnaire):



Your age (in years)

Count	Sum	Mean	Sample Standard Deviation	Minimum	Maximum	Range
2	169	84.5	2.12	83	86	3

How long ago did you have the procedure?

0

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In years

Count	Sum	Mean	Sample Standard Deviation	Minimum	Maximum	Range
0	-	-	-	-	-	-

In months (OR In months)

Count	Sum	Mean	Sample Standard Deviation	Minimum	Maximum	Range
2	7	3.5	0.71	3	4	1

In months (OR In weeks)

Count	Sum	Mean	Sample Standard Deviation	Minimum	Maximum	Range
0	-	-	-	-	-	-

To which gender identity do you most identify?



Did the procedure work?



Did you have any side-effects following your procedure?



How long did it take you to recover from the procedure?

2 months

1 day. Second day took the steps test, no problem and no puffing.

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Did the procedure have any positive effects for you, your condition and/or your quality of life?

Please consider things such as:

- Your physical symptoms
- Your ability to perform daily activities
- Your quality of life, lifestyle and/or social life
- Your state of mind, emotional health and/or wellbeing
- The effect on family, friends and others

Yes, all

All of them. Can't believe how well I feel. I have got my life back. Wonderful.

Did the procedure have any negative effects for you, your condition and/or your quality of life?

Please consider things such as:

- Your physical symptoms
- Your ability to perform daily activities
- Your quality of life, lifestyle and/or social life
- Your state of mind, emotional health and/or wellbeing
- The effect on family, friends and others

Just felt very tired

I have no negative effects.

Did you require anymore treatment, including procedures or surgery after this procedure?

Yes (-)

No (2)  100%

Would you recommend this procedure to another patient with your condition?

Yes (2)  100%

No (-)

If yes, what might you tell them?

Procedure was perfect. No complaints at all everything perfect.

Definitely go for it. It is quality of life not quantity. I wanted to be well again and thanks to these clever doctors I am. The best thing I can say I have got my life back.

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If the procedure had an impact on any other areas of your life that are not covered by the questions above please tell us about them here.

My husband who has dementia is now in a residential home, who I visit regularly and feel strong enough to cope with the problems that can arise there. So the value in valve Tavi has not only helped me, but family and friends around me.