

One+all | we care



## VR for symptom control and wellbeing

## PARTICIPANT SUBJECTIVE QUALITATIVE QUESTIONNAIRE

Participant ID:			
Date:			
Were there any negative side effects of the VR session?			
Yes		No	
If yes, please could you give the details?			

VR for Wellbeing & Symptom Control

IRAS: 296914

V1.0 Dated 14/05/2021

Participant Subjective Qualitative Questionnaire (Unvalidated)