

PATIENT EXPERIENCE FORM

We would be glad if you can share your experience of using B-Cure laser device.

Full Name: <u>Antika</u>	Clinic Name: <u>Ample Physiotherapy</u>
Age: <u>34</u>	& Profession: _____
Brief Address only: <u>GTB</u>	
Condition/Treatment Area (Chronic back pain, Joint pain, Arthritis, Tendonitis, Muscle strain, Sports injury, etc.): <u>Wound Swelling</u>	
Date of Treatment: <u>10/2/25</u>	Treatment Days: <u>5 days</u>

Kindly share your experience :

<p>It was good experience from b-cure laser may pain and swelling gone in 5 days (5 settings)</p> <p>Thank you B-cure laser <u>Antika Gupta</u></p>

Would you recommend Low Level Laser Therapy for others with similar pain conditions?

☒ Yes / No.

If No, why?

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Consent for Use:

- Would you be willing to allow us to use your testimonial in marketing materials (website, brochures, social media, etc.)? Yes/ No
- Do you consent to using your name and/or photo alongside your testimonial? Yes/No

(Patient's Signature)

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We would be glad if you can share your experience of using B-Cure laser device.

Full Name: <u>Mis- Rakha</u>	Clinic Name: <u>Quantum Physical Therapy</u>
Age: <u>70</u>	& Profession : _____
Brief Address only : <u>Green Park</u>	
Condition/Treatment Area (Chronic back pain, Joint pain, Arthritis, Tendonitis, Muscle strain, Sports injury, etc.) : <u>Chronic shoulder Pain</u>	
Date of Treatment: <u>28/03/25</u>	Treatment Days: <u>3-days</u>

Kindly share your experience :

It was a great experience and I got the relief in Pain. It's a good Product.

Would you recommend Low Level Laser Therapy for others with similar pain conditions?

☒ Yes / No.

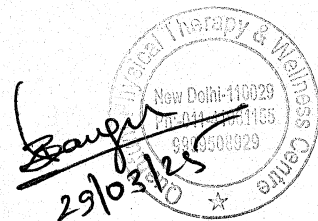
If No, why?

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(Patient's Signature)

Rakha
27/03/25



PATIENT EXPERIENCE FORM

We would be glad if you can share your experience of using B-Cure laser device.

Full Name: <u>Vaibhav gupta</u>	Clinic Name: <u>QUANTUM Physical Therapy</u>
Age: <u>30</u>	& Profession : _____
Brief Address only : <u>Green Park</u>	
Condition/Treatment Area (Chronic back pain, Joint pain, Arthritis, Tendonitis, Muscle strain, Sports injury, etc.) : <u>Knee</u>	
Date of Treatment: <u>25/03/25 / 27/03/25</u> Treatment Days: <u>5-day</u>	

Kindly share your experience :

Product is good, but slow, I got pain relief 50% after 4 session,

Would you recommend Low Level Laser Therapy for others with similar pain conditions?

Yes / No. Yes

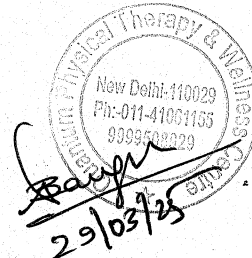
If No, why?

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- b) Do you consent to using your name and/or photo alongside your testimonial? Yes/No No

Vaibhav Gupta
(Patient's Signature)



PATIENT EXPERIENCE FORM

We would be glad if you can share your experience of using B-Cure laser device.

Full Name:	<u>Ashika Malik</u>	Clinic Name:	<u>Ample Physiotherapy</u>
Age:	<u>22</u>	& / Profession:	<u>Student</u>
Brief Address only:	<u>GTB Nagar</u>		
Condition/Treatment Area (Chronic back pain, Joint pain, Arthritis, Tendonitis, Muscle strain, Sports injury, etc.):	<u>Chronic back pain</u>		
Date of Treatment:	<u>24 Feb - 26 Feb</u>	Treatment Days:	<u>3 days</u>

Kindly share your experience :

Got Relief in 2 sittings. The best magical product have ever known and also would like to recommend it to all and have the best experience of pain relief.
and
Ashika Malik

Quite

Would you recommend Low Level Laser Therapy for others with similar pain conditions?

☒ Yes / ☐ No.

If No, why?

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(Patient's Signature)

PATIENT EXPERIENCE FORM

We would be glad if you can share your experience of using B-Cure laser device.

Full Name: <u>Vikas kumar</u>	Clinic Name: <u>A</u>
Age: _____	& Profession : _____
Brief Address only : _____	
Condition/Treatment Area (Chronic back pain, Joint pain, Arthritis, Tendonitis, Muscle strain, Sports injury, etc.) : _____	
Date of Treatment: _____	Treatment Days: _____

Kindly share your experience :

<p>मेरी घेरे में मोन्य आ गई थी खेले हूँ मैं B-CURE LASER की सिर्फ 2 बार इलाज लिया और मेरा पच हीन हो गया। मैं यह सबकी इस्तेमाल करने का सुझाव देना चाहता हूँ।</p> <p>नाम - विष्णु कुमार</p>

Would you recommend Low Level Laser Therapy for others with similar pain conditions?

Yes / No.

If No, why?

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- Do you consent to using your name and/or photo alongside your testimonial? Yes/No

Vikas
(Patient's Signature)

PATIENT EXPERIENCE FORM

We would be glad if you can share your experience of using B-Cure laser device.

Full Name: <u>Balaxam</u>	Clinic Name: <u>SPINE EASY PhysioTherapy</u>
Age: <u>47</u>	& Profession : _____
Brief Address only : <u>Rithala</u>	
Condition/Treatment Area (Chronic back pain, Joint pain, Arthritis, Tendonitis, Muscle strain, Sports injury, etc.): <u>frozen shoulder</u>	
Date of Treatment: <u>18/03/25</u>	Treatment Days: <u>3-days</u>

Kindly share your experience :

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Would you recommend Low Level Laser Therapy for others with similar pain conditions?

Yes / No.

If No, why?

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- Do you consent to using your name and/or photo alongside your testimonial? Yes/No

(Patient's Signature)

Gomalin

PATIENT EXPERIENCE FORM

We would be glad if you can share your experience of using B-Cure laser device.

Full Name: <u>Achil</u>	Clinic Name: <u>Panacea Care</u>
Age: <u>23</u>	& Profession: <u>Accountant</u>
Brief Address only: <u>Sec 83 F Bb</u>	
Condition/Treatment Area (Chronic back pain, Joint pain, Arthritis, Tendonitis, Muscle strain, Sports injury, etc.): <u>Left Shoulder pain</u>	
Date of Treatment: <u>29/11/25</u>	Treatment Days: <u>3 days</u>

Kindly share your experience :

<p>Product of B-Sure laser is very good product. It relief fast & quick. I had pain for many days. My pain went away in 3 days. the thank's to B-Sure.</p>
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Would you recommend Low Level Laser Therapy for others with similar pain conditions?

☒ Yes / No.

If No, why?

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(Patient's Signature)

Achil