Magna Surgical Center Patient Satisfaction Questionnaire

Dear I	Patient:
--------	----------

We are pleased to have you at our Surgery Center. We hope that your stay with us was comfortable and pleasant.

Our goal is to provide high quality medical care to our patients and their family members. That is why we invite your response to this questionnaire.

With your help, our staff can evaluate how effectively we are meeting the challenge of providing you with quality care.

Your comments and response will be thoroughly reviewed and kept strictly confidential unless you specify otherwise.

Thank you for your comments.

Magna Surgical Center Chicago, Illinois

(Optional & Confidential) Name: ______ Address: ______ Phone: _____ Please offer any helpful comments or compliments on the back of this form.

Date of Surgery: _____

Please give us your confidential opinion using the following rating scale...

A=Highest **F**=Lowest **N**/**A**=not applicable

1) How would you rate the facility

A B C D E F

2) How would you rate the Front Desk and Admitting Staff?

Prompt A B C D E F
Efficient A B C D E F
Courteous A B C D E F
Concerned A B C D E F
Adequate
explanations or
directions? A B C D E F

3) Did our insurance verification/ or billing staff provide adequate explanation regarding your benefits, co-pay, deductibles etc. prior to/and or after your procedure?

A B C D E F N/A

4) How would you rate the Recovery Room Staff?

Prompt A B C D E F
Efficient A B C D E F
Courteous A B C D E F
Concerned A B C D E F
Did they explain
Post-operative
Instructions well? A B C D E F

5) How would you rate the Anesthetic experience?

Efficient A B C D E F
After your
procedure A B C D E F
Adequate
explanations A B C D E F

6) Was this your first surgical visit?

 \square Yes \square No

7) Would you return to our center should you require further health care services?

 \square Yes \square No

8) Would you be willing to refer a family member or a friend to our facility for treatment?

 \square Yes \square No

9) What was your **overall** impression of the care given at the center?

Clean A B C D E F
Comfortable A B C D E F
Atmosphere A B C D E F
Convenience A B C D E F