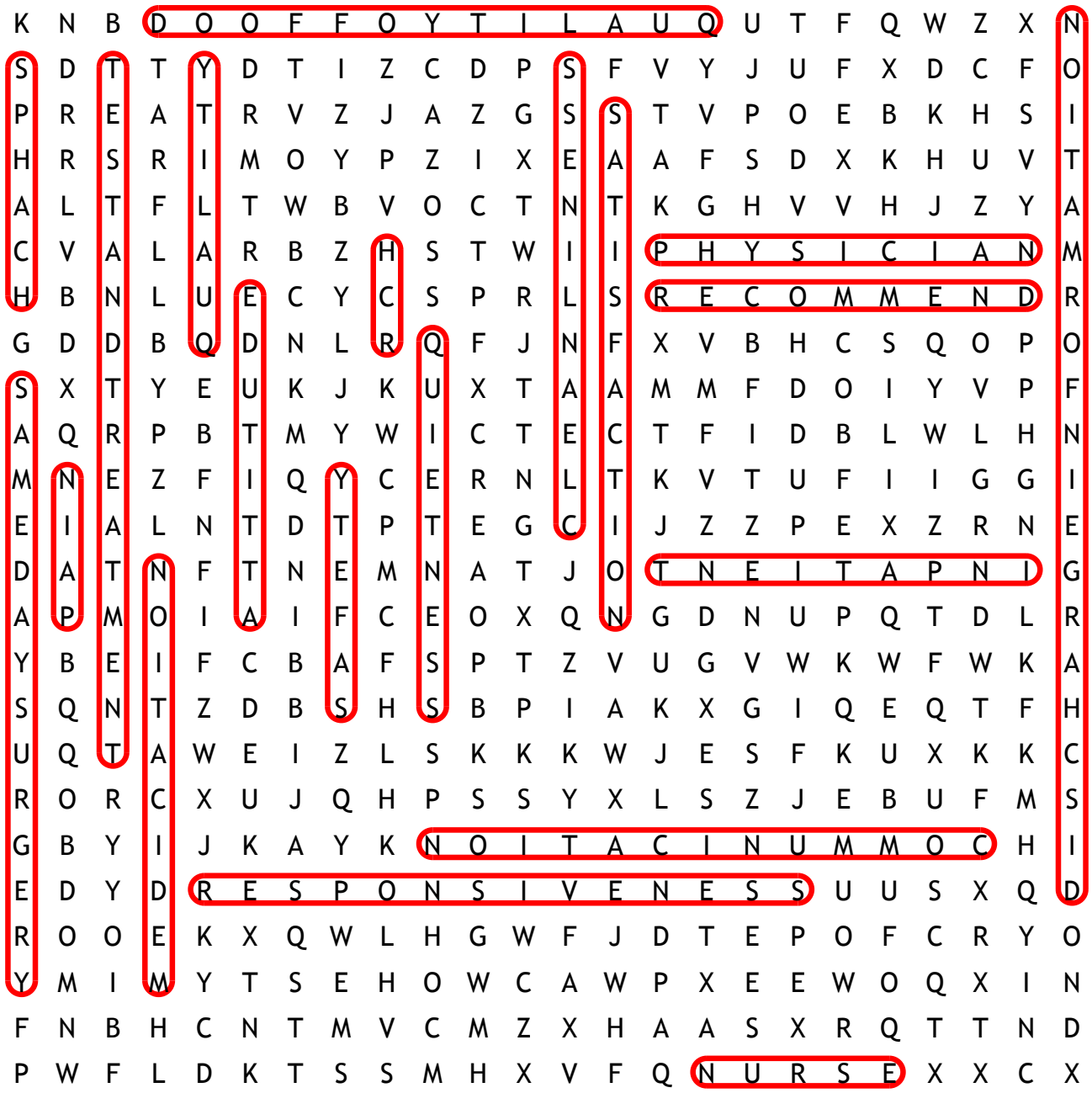
Name: _____ Date: _____

Patient Satisfaction



discharge information
quality of food
satisfaction
Inpatient
quietness
safety
pain
test and treatment
responsiveness
cleanliness
recommend
Attitude
HCAHPS
rch
same day surgery
communication
medication
physician
quality
nurse