**Hospital Questions Survey**

**Have you ever left the hospital with unanswered questions?**

**This survey will help research teams learn the questions that patients, families, caregivers, and other healthcare stakeholders want answered.**

**How to complete this survey**

Are you a patient or caregiver? Think about your experience during and after any hospital stay.  Think about the questions that you had during the hospital stay or after you left the hospital that were left unanswered or that were confusing.

Are you a healthcare provider or a member of a healthcare-related organization?  Are there any uncertainties about patient care during and after the hospital stay, or areas where you feel there should be more evidence to guide care? This could include any aspect of care - treatments, processes, decision-making, discharge planning, etc.

Please share these questions with us!

The question(s) that you share about the hospital stay experience or about the after-hospital experience could lead to the development of helpful solutions that would improve care for patients and patient families in the future. Please participate in this survey by sharing your unanswered question(s) with us.

**Your questions will be confidential and your name will not be used.**

Please enter your first question here. After submitting your first question, you will be asked if you would like to submit additional questions, up to 3 questions).

By submitting a question, you are agreeing to allow us to use these questions for our research to improve hospital care.

**What happens next?**

The responses from this survey will help our committee identify the most important questions patients, families, caregivers, and other healthcare stakeholders have about care in the hospital or care immediately following a hospitalization.

**Who are we?**

We are the “Improving Hospital Outcomes through Patient Engagement” (i-HOPE) Steering Committee. The i-HOPE Study project is funded through the Patient-Centered Outcomes Research Institute (PCORI) Eugene Washington Engagement Award EAIN-3939.

**Want to learn more about this project?**

* Go to our website at <http://www.hospitalmedicine.org/Web/Quality___Innovation/ihope.aspx>
* Sign up on our email list, by writing in your email address here: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Read more about these kind of research projects that bring all voices together at [www.pcori.org](http://www.pcori.org)

**Please tell us about yourself. Check as many as apply. (Optional)**

* I am a patient
* I am a family member or caregiver
* I am a health care provider or employee of a health care organization (if this is clicked, go to the following options: case manager, nurse, pharmacist, physical therapist, physician, physician assistant, social worker, nurse practitioner, non-clinical employee, or other)
* I am a researcher in the area of health care or a related industry
* I represent a purchaser (those who purchase health benefits for employees and their dependents)
* I represent a payer, or insurer organization
* I represent a manufacturer of pharmaceuticals, devices, diagnostics, and / or applications related to the health care industry.
* I represent a hospital or health system
* I represent a policy maker organization
* I represent a training institution
* Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Please specify)

**If you are a health care provider or employee of a health care organization, where, or in what area do you primarily work? Check as many as apply. (Optional)**

* Acute care hospital
* Post-acute care (Skilled nursing, home health, long term care, hospice, other)
* Primary care
* Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Please specify)
* Not applicable

**What organization gave you access to this survey? (Optional) [will have drop down list including N/A]**

Thank you very much for completing this survey and for your help with this important topic.

If you would like more information, please contact [i-Hope@uthscsa.edu](mailto:i-Hope@uthscsa.edu).