

Procedure Satisfaction Survey

1. Please rate your satisfaction with the following aspects of your procedure experience using the scale below.

Your overall procedure experience	Very Dissatisfied	Dissatisfied	Neutral	Satisfied	Very Satisfied	N/A
Explanation of the procedure, risks and benefits before the procedure	Very Dissatisfied	Dissatisfied	Neutral	Satisfied	Very Satisfied	N/A
Pain control during the procedure	Very Dissatisfied	Dissatisfied	Neutral	Satisfied	Very Satisfied	N/A
Expertise/skill of the physicians performing your procedure	Very Dissatisfied	Dissatisfied	Neutral	Satisfied	Very Satisfied	N/A
Courtesy and bedside manner of the physicians performing your procedure	Very Dissatisfied	Dissatisfied	Neutral	Satisfied	Very Satisfied	N/A
The time it took to perform your procedure	Very Dissatisfied	Dissatisfied	Neutral	Satisfied	Very Satisfied	N/A
Improvement in your symptoms following this procedure	Very Dissatisfied	Dissatisfied	Neutral	Satisfied	Very Satisfied	N/A

2. Did the physicians performing your procedure discuss the steps of the procedure with you as the procedure was happening?

Yes

No

3. Did the physicians performing your procedure discuss the steps of the procedure with each other as the procedure was happening?

Yes

No

4. Please rate your agreement or disagreement with the following statements using the scale below:

I felt that the physicians talking to each other about my procedure was reassuring to me	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
I felt that the physicians talking to each other about my procedure was distressing to me	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
Having the physicians talking to each other about my procedure made me worry that something was going wrong	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
Physicians talking to each other while doing a procedure is a normal part of doing a procedure	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree

5. Please tell us what went well with this procedure:

Free Text Responses

6. Please tell us what we could improve with this procedure experience:

Free Text Responses

7. Please feel free to give us your comments:

Free Text Responses

**Questions below are for the Procedure Team only
Do not write below this Line**

8. Hospitalist:

9. Date of Procedure:

10. Procedure Type:

Diagnostic Paracentesis

Therapeutic Paracentesis

Diagnostic Thoracentesis

Therapeutic Thoracentesis

Lumbar Puncture

Other, please specify

11. Demographic Data

Patient Age:

Patient Gender: