

HomeMed

University of Michigan Hospital & Health Centers • Home Care Services

We are committed to continuous improvement. Your satisfaction with our service is very important to us. Please complete this short survey and return it to us. **Circle one answer for each question.**

Type of care and/or service: (please indicate below)

Parenteral Nutrition (TPN) Chemotherapy
 Tube Feeding Antibiotic Pain Management

		Strongly Agree	Mostly Agree	Neither Agree / Disagree	Mostly Disagree	Disagree	Not Applicable
1. The medication(s) and/or supplies were delivered on time.....5		4	3	2	1	N/A	
2. The equipment was clean when delivered.....5		4	3	2	1	N/A	
3. The equipment has remained in good working order.....5		4	3	2	1	N/A	
4. Instructions provided were adequate to teach me or my caregiver how to give the intravenous (IV) medication..... 5		4	3	2	1	N/A	
5. The staff was courteous and helpful..... 5		4	3	2	1	N/A	
6. I was told who to call if I had problems with my intravenous (IV) medications..... 5		4	3	2	1	N/A	
7. I had the supplies I needed to take my intravenous (IV) medications on time..... 5		4	3	2	1	N/A	
8. I was satisfied with the response I received if I called for assistance on weekends or during evening hours..... 5		4	3	2	1	N/A	
9. I would recommend your service to my friends and family..... 5		4	3	2	1	N/A	
10. The services provided met my needs and expectations..... 5		4	3	2	1	N/A	
11. The patient information packet received was a helpful reference to me..... 5		4	3	2	1	N/A	
12. I am aware of the possible side effects caused of my intravenous (IV) medications.....Yes			No				
13. Patient rights and responsibilities were adequately explained to me.....Yes			No				
14. My financial responsibilities for the service and/or equipment were adequately explained to me.....Yes			No				
15. I was told what to do if my services were interrupted due to the weather or a natural disaster..... Yes			No				

Please give us suggestions to improve our services:

Name: *(Optional)* _____

Date: _____

If you desire to share your experience directly with us.
 Please contact our Coordinator of Pharmacy and Patient Care Services
 at HomeMed 1-800-862-2731 (ext. 7492).