



## Customer Service Satisfaction Survey

*Please take a moment to complete our Customer Service Satisfaction Survey...  
We would love to hear from you!*

The Hartford Hospital Quality Management Department is conducting this survey to assess patient satisfaction at the Imaging Center.

The data is compiled and a report is generated quarterly by the Quality Management Department and evaluated by the Imaging Center.

### **INSTRUCTIONS:**

- 1) Print the survey form (found on the next page).
- 2) Fill out the survey as completely as possible.
- 3) Send your completed survey to us.

FAX: 860-545-1463

MAIL: The Imaging Center of Hartford Hospital  
Department of Radiology  
80 Seymour Street  
P.O. Box 5037  
Hartford, CT 06102

### **NOTE:**

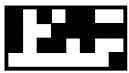
If you would rather save postage fees and complete this survey online, you can do so at the following website address:

[www.harthosp.org/imaging/ImagingResources/PatientSatisfactionSurvey](http://www.harthosp.org/imaging/ImagingResources/PatientSatisfactionSurvey)

### **IMPORTANT NOTICE:**

Information provided through this survey is confidential and anonymous. If you have a specific question or concern, please contact us directly through the telephone numbers provided on our website ([www.harthosp.org/imaging](http://www.harthosp.org/imaging)).

*Thank you for taking our patient satisfaction survey!*



40884



IMAGING CENTER  
HARTFORD HOSPITAL

# Customer Service Satisfaction Survey

- MRI    CT    Nuclear Medicine    Interventional Radiology    General Diagnostic/Fluoroscopy
- Ultrasound    Mammography    BW2R    Bone Densitometry

Please fill in bubble like this ( ● ).

1. Was your exam performed at the time of your appointment?       Yes    No    Waited greater than 20 minutes
2. Did the staff treat you with courtesy and respect?                       Yes    No
3. Was your exam explained to you in a way you could understand?       Yes    No
4. Did the staff listen carefully to you if you had a question or concern?       Yes    No
5. How did you hear about Hartford Hospital's Imaging Center?  
 Physician referral    Phone directory    Advertisement (radio/TV/newspaper)    Friend/Family    HH Website
6. How would you rate your overall experience at the Imaging Center at Hartford Hospital?  
 Excellent    Good    Fair    Poor    Very Poor
7. Would you recommend the Imaging Center of Hartford Hospital to others?  
 Definitely Would    Probably Would    Probably Would Not    Definitely Would Not

Is there anyone you would like to recognize for exceptional service? \_\_\_\_\_

Please share with us any positive comments or areas for improvement:

(Optional): Name: \_\_\_\_\_ Phone: \_\_\_\_\_