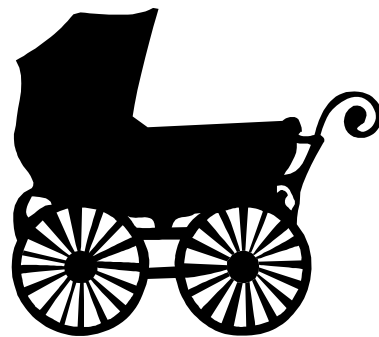




***Congratulations  
On the Birth  
of your  
New Baby***



Your  
Hospital's  
Logo  
Here

Street Address  
City, State Zip



Your  
Hospital's  
Logo  
Here

Street Address

City, State Zip

*Dear Parents,*

*CONGRATULATIONS on the birth of your new baby! The nurses and doctors on The Maternity Unit hope they have been helpful in getting you and your baby off to a good start. Please help us to see how we are doing by completing this brief questionnaire. You may leave it with your nurse or at the Secretary's desk.*



*Thank you very much!*

*Sharon McMillian, RN  
Nurse Manager*

*Brenda Lewis, RN  
Assistant Nurse Manager*

*And the MATERNAL  
INFANT HEALTH STAFF*



Date of Delivery: \_\_\_\_\_

Type of Delivery (check one)

- Vaginal
- Cesarean section

Name (optional) \_\_\_\_\_

Room (optional) \_\_\_\_\_

Please check either "Yes" or "No" to answer each question. We welcome your additional comments.

1. Were you satisfied with your birth experience at this Hospital?

- Yes
- No

2. What did you like the most? (please comment)

3. What could we have done to improve your stay with us?



4. Would you change anything?

- Yes
- No

If so, what?

5. Did Labor & Delivery nurse(s) provide you with enough help and explanation during your labor?

- Yes
- No

6. Did the nurses who took care of you and your baby after delivery provide you with help and information to care for yourself and your baby?

- Yes
- No



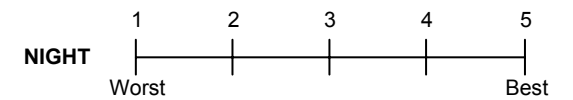
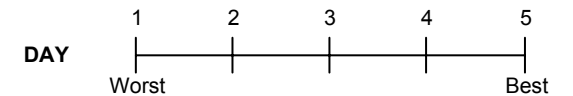
7. Would you return to this Hospital or recommend it to a friend?

- Yes
- No

8. We all try to personalize care to meet your individual needs. Which staff members "made the difference" in helping to make you feel good about your stay with us?

Please explain

9. Please rate quality of nursing care you received by drawing an "X" on bar graphs below.



10. Is there any other information you wish to share with us?