Patients Feedback Form

Name: MRS. MANTUSHA A. BAGAL

Date of admission: JULY 01, 2014

How did you know about this hospital?

Known earlier / Referred by other doctor/Insurance / Any other

Your impression	Above Average	Average	Below Average		
Nursing staff:	V				
Support staff:	~				
Cleanliness of wards, toilets:		V	,		
Information about various procedures :	~		***		
Response time to bell :	~	,			
Adequacy of facilities :	/				
Linen cleanliness:	~ -		8		

Any :	suggestion	to	improve quality	' :	Not	appli	calla	to om
						Onr	side	

Any special remarks: Entire hospital give "at home"
feeling the to hospital team

Date July 01, 2024

Patient's Signature