

## Patients Feedback Form

Name : Pratik Dattatray Mahamuni.

Date of admission : 12/08/2024

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 :	✓		
Support staff :	✓		
Cleanliness of wards, toilets :	✓		
Information about various procedures :			
Response time to bell :	✓		
Adequacy of facilities :	✓		
Linen cleanliness :	✓		

Any suggestion to improve quality :

Any special remarks : Thank Dr. and Nurse for your care and dedication. I appreciate your excellent care. Thank you!!

Date 16/08/2024

Patient's Signature

Pratik Mahamuni