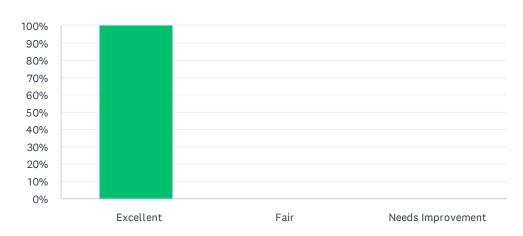
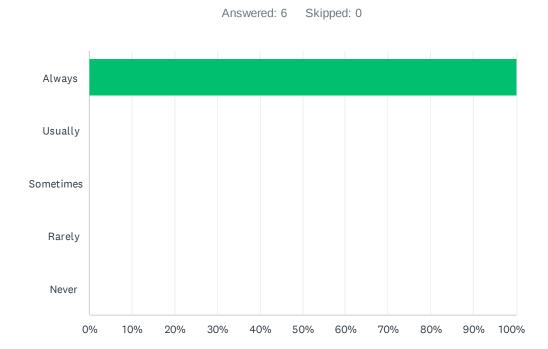
#### Q1 How would you rate the customer service of the staff at ADS?





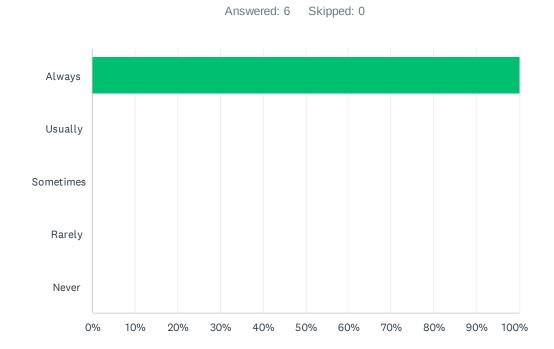
ANSWER CHOICES	RESPONSES	
Excellent	100.00%	6
Fair	0.00%	0
Needs Improvement	0.00%	0
TOTAL		6

## Q2 Did you feel comfortable during your time at ADS and that any concerns you may have had were addressed?



ANSWER CHOICES	RESPONSES	
Always	100.00%	6
Usually	0.00%	0
Sometimes	0.00%	0
Rarely	0.00%	0
Never	0.00%	0
TOTAL		6

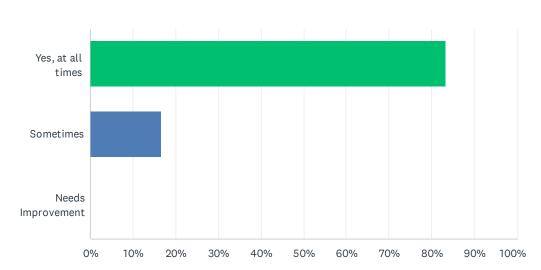
## Q3 I feel communication was clear and I was included in the decision making for my procedure where applicable?



ANSWER CHOICES	RESPONSES	
Always	100.00%	6
Usually	0.00%	0
Sometimes	0.00%	0
Rarely	0.00%	0
Never	0.00%	0
TOTAL		6

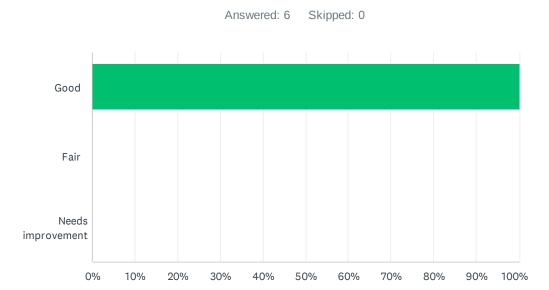
### Q4 Do you feel your privacy was respected?





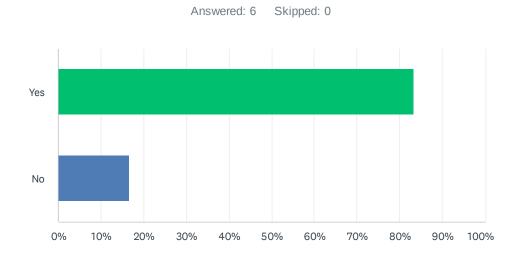
ANSWER CHOICES	RESPONSES	
Yes, at all times	83.33%	5
Sometimes	16.67%	1
Needs Improvement	0.00%	0
TOTAL		6

#### Q5 Was the time you waited for your procedure..



ANSWER CHOICES	RESPONSES	
Good	100.00%	6
Fair	0.00%	0
Needs improvement	0.00%	0
TOTAL		6

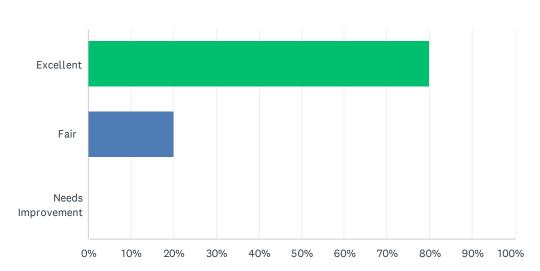
## Q6 Did you receive Informed Financial Consent on the day of your surgery?



ANSWER CHOICES	RESPONSES	
Yes	83.33%	5
No	16.67%	1
TOTAL		6

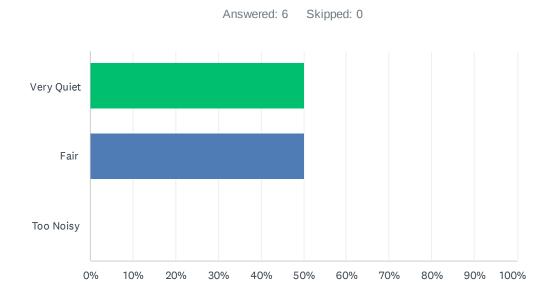
### Q7 How would you rate the refreshments provided?





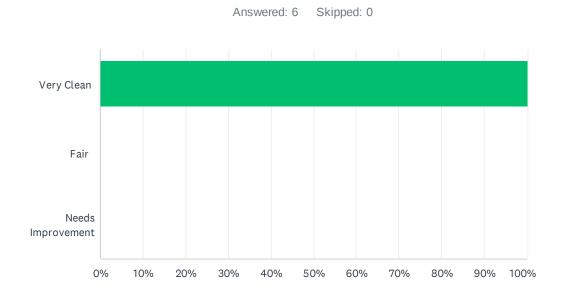
ANSWER CHOICES	RESPONSES	
Excellent	80.00%	4
Fair	20.00%	1
Needs Improvement	0.00%	0
TOTAL		5

#### Q8 How would you rate the noise level?



ANSWER CHOICES	RESPONSES	
Very Quiet	50.00%	3
Fair	50.00%	3
Too Noisy	0.00%	0
TOTAL		6

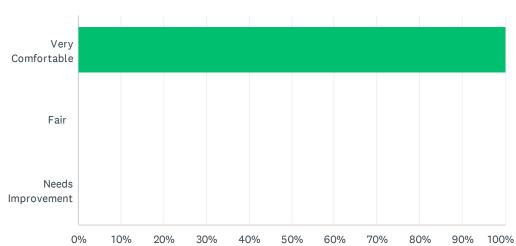
#### Q9 How would you rate the cleanliness of the environment?



ANSWER CHOICES	RESPONSES	
Very Clean	100.00%	6
Fair	0.00%	0
Needs Improvement	0.00%	0
TOTAL		6

#### Q10 How would you rate the comfort of the environment?





ANSWER CHOICES	RESPONSES	
Very Comfortable	100.00%	6
Fair	0.00%	0
Needs Improvement	0.00%	0
TOTAL		6

#### Q11 What are we doing well?

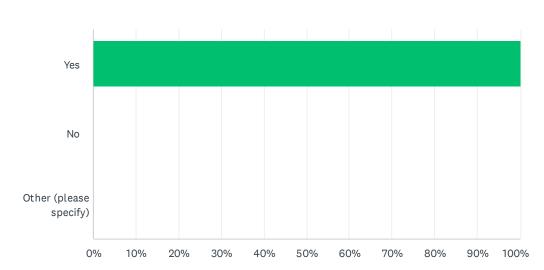
Answered: 6 Skipped: 0

#### Q12 What could we do better?

Answered: 4 Skipped: 2

#### Q13 Did we meet your expectations?





ANSWER CHOICES	RESPONSES	
Yes	100.00%	6
No	0.00%	0
Other (please specify)	0.00%	0
TOTAL		6

# Q14 Would you like to be contacted regarding your survey? if so please leave your Name and contact Number?

Answered: 2 Skipped: 4