



## Air Medical Transport Survey

<i>Receiving Centre</i>		<p><i>EHS LifeFlight is continuing to identify methods of improving our service. One method is through hospital/agency feedback. We would appreciate your valued participation by completing our survey and returning it to the EHS LifeFlight office, either by fax</i></p> <p style="font-size: 1.2em;"><b>902-873-3987</b></p> <p><i>or by using the enclosed self-addressed stamped envelope. Your comments are greatly appreciated.</i></p> <p style="color: #A52A2A; font-weight: bold;"><i>Thank you!</i></p> <p><i>For further information on EHS LifeFlight, please visit our web site at <a href="http://www.gov.ns.ca/health/ehs">www.gov.ns.ca/health/ehs</a></i></p>
<i>Patient Name:</i>		
<i>Hospital:</i>	<i>Unit:</i>	
<i>Date of Transport:</i>		
<i>Survey Completed by:</i>		
1) The ETA provided was accurate. <b>Comments:</b>		<input type="checkbox"/> Strongly Agree <input type="checkbox"/> Disagree <input type="checkbox"/> Agree <input type="checkbox"/> Strongly Disagree
2) On arrival the report of the patient's overall condition was accurate. <b>Comments:</b>		<input type="checkbox"/> Strongly Agree <input type="checkbox"/> Disagree <input type="checkbox"/> Agree <input type="checkbox"/> Strongly Disagree
3) The Air Medical Crew was courteous and professional. <b>Comments:</b>		<input type="checkbox"/> Strongly Agree <input type="checkbox"/> Disagree <input type="checkbox"/> Agree <input type="checkbox"/> Strongly Disagree