

**BAYSIDE COMMUNITY HOSPITAL FOLLOW UP SURVEY FOR IN-PATIENT
NOVEMBER 2006**

Number of Patients (inpatient and observation) attempted	32
Number of Patients we were unable to contact	15
Number of patients with overall satisfaction	17

Question	Worse	Slightly Improved	Improved	Resolved
Do you think your condition (reason for your visit) has/is:	0	0	10	7

Question	No	Maybe	Yes
Would you recommend Bayside Community Hospital to your family/friends?	0	0	17

Question	No Answer	Bad	Poor	Fair	Good	Excellent
How would you rank the overall service you received during your hospital stay?	0	0	0	0	6	11
How would you rank your meals?	0	0	0	0	7	10
How would you rank the cleanliness of your room?	0	0	0	0	5	12
How would you rank the services you received from your physician?	0	0	0	0	5	12
How would you rank the services you received from the nursing staff?	0	0	0	0	5	12

Do you have any addition comments?

None