

**BAYSIDE COMMUNITY HOSPITAL FOLLOW UP SURVEY FOR IN-PATIENT  
October 2007**

Number of Patients (inpatient and observation) attempted	<b>22</b>
Number of Patients we were unable to contact	<b>16</b>
Number of patients with overall satisfaction	<b>6</b>

Question	Worse	Slightly Improved	Improved	Resolved
Do you think your condition (reason for your visit) has/is:	0	0	5	1

Question	No	Maybe	Yes
Would you recommend Bayside Community Hospital to your family/friends?	0	0	6

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	
How would you rank your meals?	0	0	0	0	6	
How would you rank the cleanliness of your room?	0	0	0	0	6	
How would you rank the services you received from your physician?	0	0	0	0	6	
How would you rank the services you received from the nursing staff?	0	0	0	0	6	

Do you have any addition comments? There were no comments.