



Date:

Resident:

Patient Survey of Emergency Resident Doctors

The doctor you saw is still in training and it helps us to know how they are doing. Please take a few minutes to answer these questions about them.

1. How polite and respectful was the doctor?

Not at all										Very
1	2	3	4	5	6	7	8	9	10	

2. How well did the doctor listen and understand your problem?

Not at all										Very
1	2	3	4	5	6	7	8	9	10	

3. Was the information given about your child's illness communicated clearly?

Not at all										Very
1	2	3	4	5	6	7	8	9	10	

4. How well did you feel all your concerns were addressed?

Not at all										Very
1	2	3	4	5	6	7	8	9	10	

5. OVERALL, would you be happy to be cared for by this doctor again?

Yes		Maybe		No
-----	--	-------	--	----

6. Do you have comments?