

Patient Feedback Form - Hospital Visit

An **example of patient feedback form** for hospital visits helps gather valuable insights on patient experience and care quality. It typically includes sections on staff behavior, facility cleanliness, and overall satisfaction. Such forms are essential tools for improving healthcare services and ensuring patient-centered care.

Patient Information (Optional)

Name:

Date of Visit:

Staff Behavior

How would you rate the courtesy and professionalism of the staff?

- ☐ Excellent
- ☐ Good
- ☐ Average
- ☐ Poor

Facility Cleanliness

How clean and hygienic did you find the hospital facilities?

- ☐ Excellent
- ☐ Good
- ☐ Average
- ☐ Poor

Overall Satisfaction

How satisfied are you with your overall experience?

- ☐ Very Satisfied
- ☐ Satisfied
- ☐ Neutral
- ☐ Dissatisfied
- ☐ Very Dissatisfied

Comments/Suggestions

Please provide any additional feedback or suggestions:

Submit Feedback