

## **STAFF SURVEY**

## Please fill out this survey regarding your patient's experience using Elequil aromatabs® today:

- 1. What was the reason for the patient's visit? \_
- 2. Did Elequil aromatabs help to ... (check all that apply)
  - □ Relax or comfort your patient
  - □ Appear to increase your patient's experience / satisfaction
  - □ Soothe queasiness
  - □ Mask an unpleasant odor
  - □ Make my job easier with this patient
  - □ None of the above
- 3. General feelings about this patient's experience using Elequil aromatabs:
  - □ Contributed to a more positive experience
  - □ Noticed no difference
  - □ Uncertain
- 4. Other comments:

For facility use only; do not return results to Beekley Medical®.

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