

OPTIMA Rehabilitation Exit Interview

Dear Patient,

You have recently finished our rehabilitation program here at OPTIMA and we want to take a moment to ask you a few important questions. We strive to provide the best care possible and your input is critical to our improvement. Please take a moment and fill out the enclosed interview. The first page should be scored on our facility and therapists as a whole, on page two please list the therapist you saw most often and then the therapist you saw second most. Please add any comments you have in the additional spaces provided. Feel free to be critical about our staff and the rehabilitation program.

Thank you for taking the time to critique our facility and please keep us in mind if you need care in the future. In addition, if you have family or friends that need similar care in the future please feel free to refer them directly to our office. We truly appreciate your time and consideration.

Sincerely,
Scott Rosenquist, MS, DC and Chad Abercrombie, DC
Clinic Directors

Patient: _____ Date: _____

Scoring:

- 1 = very poor
- 2 = poor
- 3 = average
- 4 = good
- 5 = excellent

1. Therapist's knowledge of my condition:	1	2	3	4	5
2. Therapist's knowledge of rehabilitation techniques used:	1	2	3	4	5
3. Ability to educate me about what we were doing and why:	1	2	3	4	5
4. Ability to motivate me to do my best during each session:	1	2	3	4	5
5. Compassion toward my condition:	1	2	3	4	5
6. Therapists conducted themselves in a professional manner:	1	2	3	4	5
7. The therapists treated me with dignity and respect:	1	2	3	4	5
8. My case was handled with discretion and confidentiality:	1	2	3	4	5
9. Therapists were motivated to do all they could to find out what was wrong and to help me with my condition:	1	2	3	4	5
10. My overall satisfaction with the staff at OPTIMA was:	1	2	3	4	5

Total Score: _____

Ashlee Nelson, Physical Therapist
Dan Ward, Exercise Physiologist
Vanessa Wesley, Exercise Physiologist

Please list the therapist you worked with most often: _____

My overall satisfaction with this therapist was a: 1 2 3 4 5

Notes:

Please list the therapist you worked with second most often: _____

My overall satisfaction with this therapist was a: 1 2 3 4 5

Notes:

Other additions regarding the front desk staff, facilities, or other:

Signature: _____ Date: _____