






Rettungsdienst Mattertal

Case number:

Date:



## Feedback form

Thank you for sharing your opinion!			
<b>1. Contact with patient / relatives / accompanying person</b>			
Politeness of the rescue team			
Respectful interaction			
Empathy			
Cooperation with the accompanying person / your relatives			
<b>2. Primary care</b>			
Were you able to explain your needs / problems / pain?			
Were your problems cared for?			
Were you given a good explanation of your treatment?			
Did you receive competent assistance?			
<b>3. Ambulance transfer</b>			
Assistance, care and support in the ambulance			
Communication and information on the way			
Vehicle cleanliness and temperature			
<b>4. Hospital / clinic</b>			
Explication of treatment at handover			
Handover to care staff / emergency room			
<b>5. General assessment</b>			
Evaluation of the quality of your treatment?			
Did you receive comprehensible answers and explanations?			

Comments / remarks / other:

**This form is also available to download or fill in on our website.**

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