

VA Telemedicine Patient Feedback

Date Completed:	Choose Date ▼	Age:	Choose Age ▼
Facility/Site:	Choose Facility/Site ▼	Gender:	Choose Gender ▼
Completed by:	Choose Person ▼	Reason for visit:	Choose Reason ▼

We want to know how you feel about today's telemedicine session. Your honest input will help us improve the visits in the future. For each of the following statements, please mark the opinion which is closest to your own.

- | | Strongly Agree | Agree | Neutral | Disagree | Strongly Disagree |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| 1. I felt comfortable with the equipment used. | <input type="checkbox"/> |
| 2. I had trouble seeing the provider. | <input type="checkbox"/> |
| 3. I had trouble hearing the provider. | <input type="checkbox"/> |
| 4. The equipment was difficult to use. | <input type="checkbox"/> |
| 5. I was concerned about my privacy. | <input type="checkbox"/> |
| 6. If I had any problems, someone was available to help me. | <input type="checkbox"/> |
| 7. I would be more comfortable telling the provider my problems in person. | <input type="checkbox"/> |
| 8. The provider was able to understand my problem without seeing me in person. | <input type="checkbox"/> |
| 9. It was more convenient to use this session, than to see the provider in person. | <input type="checkbox"/> |
| 10. My relationship with the provider was the same during this session as it is in person. | <input type="checkbox"/> |
| 11. I would have rather traveled to see the provider in person. | <input type="checkbox"/> |
| 12. My healthcare needs were met. | <input type="checkbox"/> |
| 13. I received good care during this session. | <input type="checkbox"/> |
| 14. Overall, I am satisfied with this telemedicine session. | <input type="checkbox"/> |
| 15. I would recommend this type of session to other veterans. | <input type="checkbox"/> |

16. Please give us any additional comments/suggestions/complaints. Thank you for your time and contribution.