

Dear Madam / Dear Sir,

BIONT a.s. company, provider of outpatient healthcare in nuclear medicine, cares about the continuous improvement of the quality of the healthcare services offered at the PET centre. We would like to kindly ask you to anonymously provide us with information on your experience during the examination. Your answers can help us improve the care we offer to you, our patients, and ensure the quality of the provided healthcare at the highest possible standard. The information we receive will be used solely for the purposes of this survey. Please, mark the relevant options or fill in the information required. At the end of the survey, you may share your suggestions and recommendations that will be used to improve the quality of our services. We would like to thank you in advance for helping us improve the healthcare at our PET centre.

Date  and time of the survey:  Patient's gender:  Male  Female Your age:

### What examination did you have?

Positron Emission Tomography PET/CT  Scintigraphy SPECT/CT  I don't know

How many examinations have you had at our centre?

How many days did you have to wait to get an appointment for the examination?

Please, indicate your level of satisfaction with the following points related to the examination.  
Rate your answers from lowest satisfaction (0) to highest satisfaction (3).

### Examination process

	Very unsatisfied (0)	Unsatisfied (1)	Satisfied (2)	Very satisfied (3)
appointment for the examination	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
reception at the office before the examination	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
approach, care, and communication received from the doctors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
approach, care, and communication received from other healthcare professionals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
approach, care, and communication received from the nurses	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
cleanliness and hygiene of the PET centre	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
cleanliness and look of the scan unit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
parking at the PET centre area	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
catering options	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
information content about the examination at <a href="http://www.biont.sk">www.biont.sk</a>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please, mark the waiting time for the examination.

less than 45 min.  46 min. to 1.5 hours  1.5 hours to 2 hours  more than 2 hours

In case you had to wait longer than 45 minutes, were you informed by the staff about the reasons for the delay?  Yes  No

Have you been informed about the measures that need to be followed prior to the examination?  Yes  No  I don't remember

Have you been informed about the procedure and the consequences of the examination?  Yes  No  I don't remember

What would you rate as positive with regard to the doctors, nurses and other healthcare professionals?

What should we improve with regard to the doctors, nurses and healthcare assistants?

Have you felt safe during the examination?  Yes  No

Do you consider this examination to be safe with regard to your health?  Yes  No  I don't know

Would you recommend an examination at our PET center to other patients?  Yes  Possibly yes  Possibly no  No

Please, mark the reasons for why you would recommend our PET centre

- |  |  |                      |
|--|--|----------------------|
| <input type="checkbox"/> Provision of quality healthcare.  | <input type="checkbox"/> Other reasons:          | <input type="text"/> |
| <input type="checkbox"/> Approach, care and communication received from the doctors.               |  |                      |
| <input type="checkbox"/> Approach, care and communication received from the nurses.                |  |                      |
| <input type="checkbox"/> Approach, care and communication received from the healthcare assistants. | <input type="checkbox"/> I wouldn't recommend it |                      |

Did you have the option to choose your healthcare provider for PET/CT, SPECT/CT ?  Yes  No

Your recommendations and suggestions for improvement:

Thank you for your time and information. Your PET centre staff.