

Cardiac Rehabilitation Patient Satisfaction Survey

Patient Information

Name

Age

Gender

Satisfaction with Cardiac Rehabilitation Program

How satisfied are you with the overall program?

- ☐ Very Satisfied
- ☐ Satisfied
- ☐ Neutral
- ☐ Unsatisfied
- ☐ Very Unsatisfied

The staff was professional and courteous

- ☐ Strongly Agree
- ☐ Agree
- ☐ Neutral
- ☐ Disagree
- ☐ Strongly Disagree

The facility was comfortable and clean

- ☐ Strongly Agree
- ☐ Agree
- ☐ Neutral
- ☐ Disagree
- ☐ Strongly Disagree

Was the information provided clear and easy to understand?

☐ Yes

☐ No

Did the program meet your expectations?

☐ Yes

☐ No

What could be improved?

Additional Comments