

McLaren Print System Order

Order No: 60816
Order Date: 2021-03-04
User: Jodi LaPlant
Phone: 989-667-3410

Ship Location: WEST SIDE MED MALL ATTN: JODI LAPLANT SUITE 12
4175 N EUCLID AVE SUITE 12
BAY CITY, MI 48706

Brochures
Quantity: 2
Paragon Dept No: 69580
Dept Name: BAY NEUROSCIENCES
Company Number: 810

Order Total Price: 45.00

Item Number: MM-34033
Item Description: HAND HYGIENE and MASK COMPLIANCE Survey
Revision Date: 2/2021
Print:
Paper:
Size:
Fold:
Finish:
Drill:
Misc Info: 20 pads of 50 sheets, ss, black, white cover; 4.25x5.5

**PLEASE TAKE A MOMENT TO COMPLETE
OUR HAND HYGIENE AND MASK COMPLIANCE SURVEY
TO HELP US KEEP YOU SAFE.**

1. While in the room, did you observe the **Care Provider** clean their hands (soap and water or hand gel) **BEFORE** and **AFTER** the encounter?
 BEFORE AFTER BOTH (Before & After) NOT SURE
2. While in the room, did you observe the **Clinical Staff** (MA/Nurse) clean their hands (soap and water or hand gel) **BEFORE** and **AFTER** the encounter?
 BEFORE AFTER BOTH (Before & After) NOT SURE
3. Did you see our staff and providers wearing a mask over their nose and mouth **AT ALL TIMES** during your visit?
 YES NO NOT SURE

Thank you for taking the time to complete our survey!

Spec Info: Date of Service: ___/___/___ Patient Initials: _____ Staff Initials: _____