



**Fort Belvoir  
Community  
Hospital**

# Tricare Outpatient Satisfaction Survey

**1. In the last 12 months, have you spoken with a provider about any health problems or concerns?**

☐ Yes ☐ No (If no, go to question three)

Provider name: \_\_\_\_\_

I spoke with this provider via: ☐ Phone ☐ Email ☐ In Person ☐ Other: \_\_\_\_\_

**2. In the last 12 months, how often did the provider give you easy to understand instructions about taking care of these health problems or concerns?**

☐ Never ☐ Almost Never ☐ Sometimes ☐ Usually ☐ Almost Always ☐ Always

What format were these instructions? ☐ Handout ☐ Web Link ☐ Other

**3. In the last 12 months, how often did the provider seem to know the important information about your medical history?**

☐ Never ☐ Almost Never ☐ Sometimes ☐ Usually ☐ Almost Always ☐ Always

What do you feel is important about your medical history? \_\_\_\_\_

\_\_\_\_\_

**4. In the last 12 months, how often did the provider talk with you about all the different prescription medicines you are using, including medicines prescribed by other providers?**

☐ Never ☐ Almost Never ☐ Sometimes ☐ Usually ☐ Almost Always ☐ Always

**5. In the last 12 months, when the provider ordered a blood test, X-ray or other test for you, how often did someone from the provider's office follow up to give you those results?**

☐ Never ☐ Almost Never ☐ Sometimes ☐ Usually ☐ Almost Always ☐ Always

I was contacted via: ☐ Phone ☐ Email ☐ In Person ☐ Other: \_\_\_\_\_