



Lowell CHC Follow up Patient Surveys

Patient Telehealth Survey

1. How was your overall satisfaction with the **care** you received? (1-10)
2. Was your visit over the phone or with video?
 - a. If Video: How was your overall satisfaction with the **technology**? (1-10)
 - b. If phone: Would your visit have been better if you were using video? (Strongly Agree → Strongly Disagree)
3. How prepared did you feel for your visit?
4. Anything else you'd like us to know?

Patient In Person Survey

1. How was your overall satisfaction with the **care** you received? (1-10)
2. How would you rate your experience with the greeters?
3. Would you be interested in learning about using telehealth for future appointments? Telehealth allows you to have your doctors visit in the comfort of your home and without having to travel to the health center
4. Anything else you'd like us to know?