



DOUGLASS  
HANLY MOIR  
PATHOLOGY

BARRATT & SMITH  
PATHOLOGY

Quality is in our DNA

# Feedback form



Douglass Hanly Moir Pathology (DHMP) and Barratt & Smith Pathology (BSP) pride themselves on providing a high standard of service in a caring and professional manner. Your feedback is important to us to improve the quality of service we provide.

This questionnaire has been designed for ease of use, and should only take a minute of your time.

Once you have completed the questionnaire, please press 'Submit Form'. Alternatively, you can print this form and send it to Locked Bag 145, North Ryde, NSW, 1670 or fax it to 9878 5077. You may also like to email your specific feedback to [info@dhm.com.au](mailto:info@dhm.com.au)

**We thank you for your feedback.**

To submit feedback on your mobile device, please install Acrobat Reader. It is available as a free download.

Room location: \_\_\_\_\_

Date of collection: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

## Please select your responses to the questions below

---

Was this the first time in a DHMP or BSP collection centre?	YES	NO	N/A
---	-----	----	-----

---

**If no:** do you attend this collection centre regularly?

---

Were the collection staff professional and courteous?	YES	NO	N/A
---	-----	----	-----

---

Upon arrival at the rooms, were you given attention in a timely fashion?	YES	NO	N/A
--	-----	----	-----

---

**If no:** how long were you waiting?

---

Did the staff identify themselves to you or have a visible name badge?	YES	NO	N/A
--	-----	----	-----

---

Did the staff ask you to spell your name and state your date of birth?	YES	NO	N/A
--	-----	----	-----

---

Were you properly identified, by name?	YES	NO	N/A
--	-----	----	-----

---

Did staff ask you to check your personal details?	YES	NO	N/A
---	-----	----	-----

---

Was the procedure clearly explained to you?	YES	NO	N/A
If instructions were required for your specimen collection, were these clear?	YES	NO	N/A
Were your specimens labelled in your presence?	YES	NO	N/A
Were you asked to check these details?	YES	NO	N/A
Was the facility clean and tidy?	YES	NO	N/A
Were your questions and concerns addressed to your satisfaction?	YES	NO	N/A
Were you given clear information regarding your account?	YES	NO	N/A
Were you given clear information regarding "after blood collection" care?	YES	NO	N/A
Did the staff seem sensitive to your needs?	YES	NO	N/A
Would you recommend our pathology service to others?	YES	NO	N/A

## Please rate the overall service you received today

(unsatisfactory)    1    2    3    4    5    (excellent)

# Feedback form

If you have any unresolved issues or concerns that require our attention, please provide details:

---

---

---

---

## Contact details:

Name:

Address:

---

---

Contact phone:

Contact email:

Doctor's name:

Doctor's address:

---

---

Contact details are required if you would like a response to your comments

**DOUGLASS HANLY MOIR PATHOLOGY**

14 GIFFNOCK AVENUE • MACQUARIE PARK • NSW 2113 • AUSTRALIA  
TEL (02) 9855 5222 • FAX (02) 9878 5077

MAIL ADDRESS • LOCKED BAG 145 • NORTH RYDE • NSW 1670 • AUSTRALIA

[www.dhm.com.au](http://www.dhm.com.au)

---

**BARRATT & SMITH PATHOLOGY**

31 LAWSON STREET • PENRITH • NSW 2750 • AUSTRALIA  
TEL (02) 4734 6500 • FAX (02) 4732 2503

MAIL ADDRESS • PO BOX 443 • PENRITH • NSW 2751 • AUSTRALIA

[www.bsp.com.au](http://www.bsp.com.au)