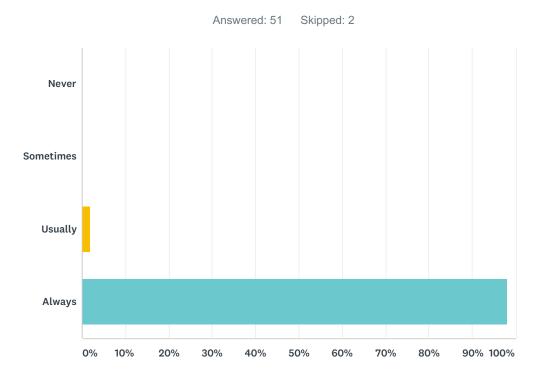
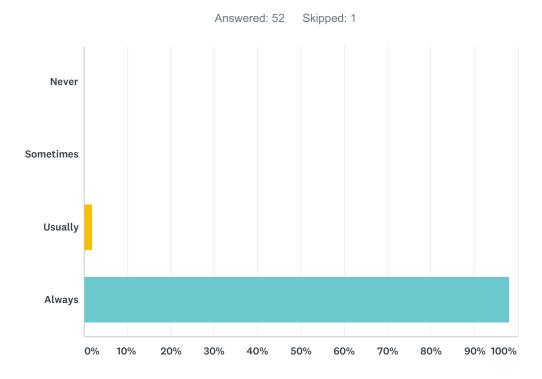
Q1 During the ambulance transport, did the medics treat you with courtesy and respect?



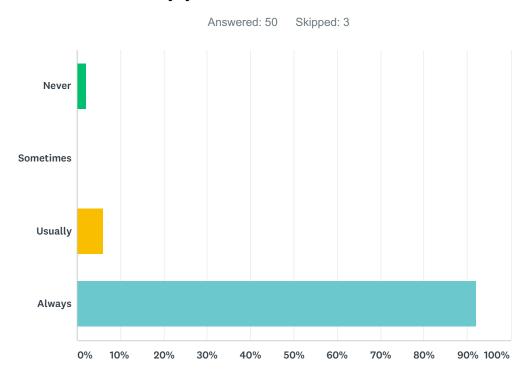
ANSWER CHOICES	RESPONSES	
Never	0.00%	0
Sometimes	0.00%	0
Usually	1.96%	1
Always	98.04%	50
TOTAL		51

Q2 During the ambulance transport, did the medics listen carefully to you?



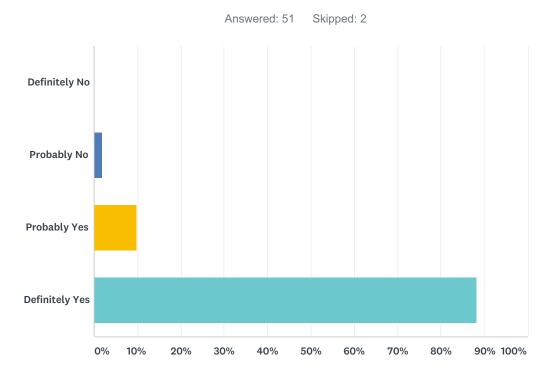
ANSWER CHOICES	RESPONSES	
Never	0.00%	0
Sometimes	0.00%	0
Usually	1.92%	1
Always	98.08%	51
TOTAL		52

Q3 During the ambulance transport, did the medics explain things in a way you could understand?



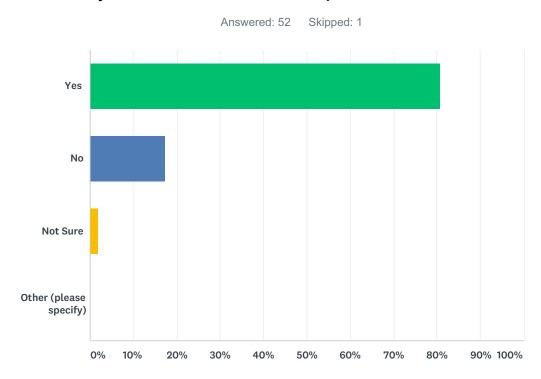
ANSWER CHOICES	RESPONSES	
Never	2.00%	1
Sometimes	0.00%	0
Usually	6.00%	3
Always	92.00%	46
TOTAL		50

Q4 Would you recommend this EMS service to your friends and family?



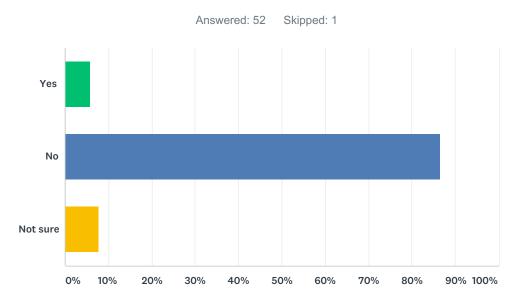
ANSWER CHOICES	RESPONSES	
Definitely No	0.00%	0
Probably No	1.96%	1
Probably Yes	9.80%	5
Definitely Yes	88.24%	45
TOTAL		51

Q5 As a result of this ambulance transport and Emergency Department visit, were you admitted to the hospital for further treatment?



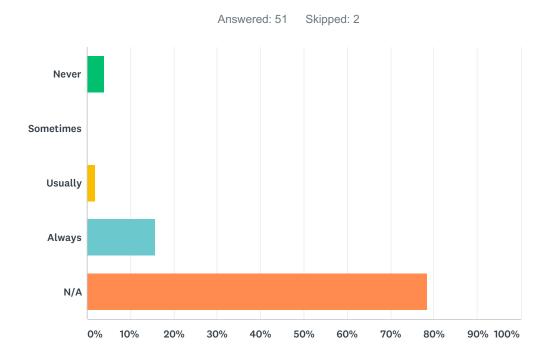
ANSWER CHOICES	RESPONSES	
Yes	80.77%	42
No	17.31%	9
Not Sure	1.92%	1
Other (please specify)	0.00%	0
TOTAL		52

Q6 During the ambulance transport, were you given any medicine that you had not taken before?



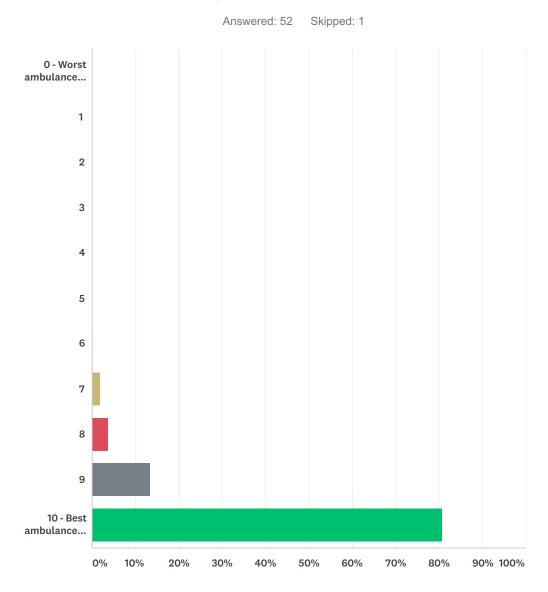
ANSWER CHOICES	RESPONSES	
Yes	5.77%	3
No	86.54%	45
Not sure	7.69%	4
TOTAL		52

Q7 Before giving you any new medicine, how often did the medics tell you what the medicine was for?



ANSWER CHOICES	RESPONSES	
Never	3.92%	2
Sometimes	0.00%	0
Usually	1.96%	1
Always	15.69%	8
N/A	78.43%	40
TOTAL		51

Q8 Using any number from 0 to 10, where 0 is the worst ambulance service possible and 10 is the best ambulance service possible, what number would you use to rate this transport?

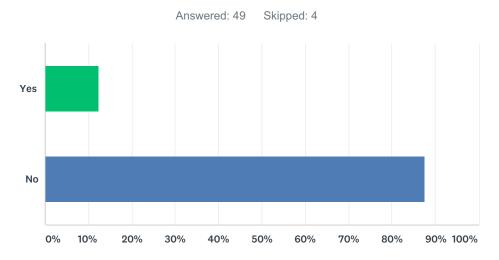


ANSWER CHOICES	RESPONSES	
0 - Worst ambulance service possible	0.00%	0
1	0.00%	0
2	0.00%	0
3	0.00%	0
4	0.00%	0
5	0.00%	0
6	0.00%	0
7	1.92%	1

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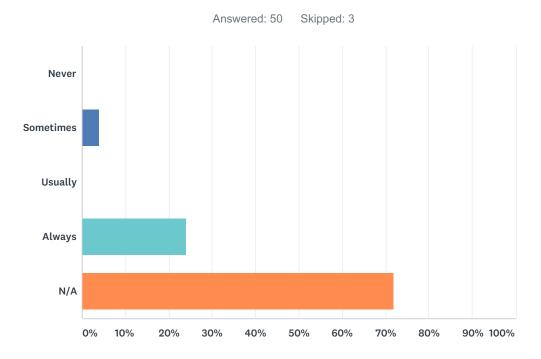
8	3.85%	2
9	13.46%	7
10 - Best ambulance service possible	80.77%	42
TOTAL		52

Q9 During the ambulance transport, did you need medicine for pain?



ANSWER CHOICES	RESPONSES	
Yes	12.24%	6
No	87.76%	43
TOTAL		49

Q10 During the ambulance transport, how well was your pain controlled?



ANSWER CHOICES	RESPONSES	
Never	0.00%	0
Sometimes	4.00%	2
Usually	0.00%	0
Always	24.00%	12
N/A	72.00%	36
TOTAL		50

Q11 Optional: If you would like Cleveland County EMS to contact you in regards to your survey comments, please provide your contact information.

Answered: 15 Skipped: 38

ANSWER CHOICES	RESPONSES	
Name	100.00%	15
Company	0.00%	0
Address	86.67%	13
Address 2	0.00%	0
City/Town	86.67%	13
State/Province	86.67%	13
ZIP/Postal Code	80.00%	12
Country	0.00%	0
Email Address	6.67%	1
Phone Number	86.67%	13

Q12 What could CCEMS do to help serve you and your family better? Please provide any additional comments or concerns that you have with Cleveland County EMS. Thank You

Answered: 33 Skipped: 20