



5510 East Lacy Road
Fitchburg, WI 53711
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Patient Advocate Program

Evaluation and Satisfaction Survey

Please circle a number that best describes you:							
Since working with a patient advocate through the Senior Center...	Strongly disagree	Disagree	About the same	Agree	Strongly agree	Doesn't apply	
I feel less anxious with my medical situation	1	2	① 3	① 4	⑥ 5		0
I feel better prepared for my appointments	1	2	3	② 4	⑥ 5		0
I have made fewer calls to my doctor	1	2	3	② 4	⑥ 5		0
I feel more confident speaking with my doctor	1	2	① 3	① 4	⑥ 5		0
I better understand information my doctor presents	1	2	① 3	② 4	⑤ 5		0
I feel better informed so that I am able to make informed decisions	1	2	3	③ 4	⑤ 5		0
I have cancelled fewer appointments	1	2	② 3	① 4	⑤ 5		0
Comments:							
Name: (optional)							
Date:							