

Feedback Form

As a patient who has recently experienced a CardioScan test, we would love to hear your feedback on our service.

Please return the feedback form with the recorder.

Date of fitting:	/	/				
How do you prefer your cardiac diagnostic service?	At home service, as recently experienced		In hospital service and return recorder to ward			Indifferent
Please tick the relevant box	1 Poor	2	3	4	5 Very good	Don't know
Thinking about your remote cardiac diagnostic test, overall, how was your experience of our service?					0	
Please can you tell us why you gave your answer?						
Do you have any feedback or suggestions to improve our service?						

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