



## EXIT SURVEY

Your comments are important to us.  
Please take a minute to respond to the following questions.

1. Which of the following advertisements have you seen for Assure Women's Center?

**Check All That Apply**

- |  |                                     |
|--|-------------------------------------|
| <input type="checkbox"/> Crackle                             | <input type="checkbox"/> Roku       |
| <input type="checkbox"/> Drove By The Center                 | <input type="checkbox"/> Samsung TV |
| <input type="checkbox"/> Facebook                            | <input type="checkbox"/> Sling      |
| <input type="checkbox"/> Freevee                             | <input type="checkbox"/> Snapchat   |
| <input type="checkbox"/> Instagram                           | <input type="checkbox"/> TikTok     |
| <input type="checkbox"/> Internet Search                     | <input type="checkbox"/> Tubi       |
| <input type="checkbox"/> Plex                                | <input type="checkbox"/> Vudu       |
| <input type="checkbox"/> Pluto TV                            | <input type="checkbox"/> Website    |
| <input type="checkbox"/> Radio Ad – Which Station? _____     | <input type="checkbox"/> Xumo       |
| <input type="checkbox"/> Repeat Patient                      | <input type="checkbox"/> YouTube    |
| <input type="checkbox"/> Family/Friend Referral – Who? _____ |                                     |
| <input type="checkbox"/> Other _____                         |                                     |

2. Did you feel comfortable sharing your needs and concerns with your Advocate?  
Advocate's name: \_\_\_\_\_

- ☐ Very Comfortable  
☐ Comfortable  
☐ Somewhat Comfortable  
☐ Uncomfortable

3. Did you feel comfortable sharing your needs and concerns with your Licensed Medical Staff? LMS name: \_\_\_\_\_

- ☐ Very Comfortable  
☐ Comfortable  
☐ Somewhat Comfortable  
☐ Uncomfortable

4. Would you recommend Assure Women's Center to a friend? ☐ Yes ☐ No  
Why or why not? \_\_\_\_\_

5. Please rate your overall experience here on a **scale of 1 to 10**, with one meaning poor and ten meaning excellent: \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Please Print Name \_\_\_\_\_