

Please spare a few minutes of your time to complete this short Customer Survey from Viamed...

1. Which manufacturer’s equipment do you or your customers use the SpiroTrue Flowsensor H with?  
Hamilton ☐ Other i.e. Dräger (please specify) ☐ \_\_\_\_\_
2. What equipment model do you use with the SpiroTrue Flowsensor H with?  
\_\_\_\_\_
3. What is the equipment software version? \_\_\_\_\_
4. Which department is the product used in? i.e. Intensive Care Unit, Operating Theatres.  
\_\_\_\_\_
5. How would you rate the quality of SpiroTrue Flowsensor H?  
(1 = Extremely Poor, 5 = Outstanding):  

1	2	3	4	5
6. How would you rate the performance of SpiroTrue Flowsensor H?  
(1 = Extremely Poor, 5 = Outstanding):  

1	2	3	4	5
7. How would you rate the packaging of the SpiroTrue Flowsensor H?  
(1 = Extremely Poor, 5 = Outstanding):  

1	2	3	4	5
8. How would you rate the speed of service provide by Viamed?  
(1 = Extremely Poor, 5 = Outstanding):  

1	2	3	4	5
9. Should you have any further comments please write them below.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Account Number: \_\_\_\_\_  
Name: \_\_\_\_\_  
Hospital/Department: \_\_\_\_\_  
Date: \_\_\_\_\_  
Signature: \_\_\_\_\_

