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# Customer Satisfaction Survey - Maxtec EyeMax Phototherapy Eye Masks

1. Which department do you use this item in?

//

2. Which equipment do you use this product in conjunction with?

//

3. How likely is it that you would recommend this product to a friend or colleague?

NOT AT ALL LIKELYEXTREMELY LIKELY

0	1	2	3	4	5	6	7	8	9	10
---	---	---	---	---	---	---	---	---	---	----



4. Overall, how satisfied or dissatisfied are you with our

product?

- |  |   |
|--|---|
| <input type="radio"/> Very satisfied                     | <input type="radio"/> Somewhat dissatisfied |
| <input type="radio"/> Somewhat satisfied                 | <input type="radio"/> Very dissatisfied     |
| <input type="radio"/> Neither satisfied nor dissatisfied |   |

5. Which of the following words describe this product? Select all that apply.

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- |   |                                       |
|---|---------------------------------------|
| <input type="checkbox"/> Reliable             | <input type="checkbox"/> Overpriced   |
| <input type="checkbox"/> High quality         | <input type="checkbox"/> Impractical  |
| <input type="checkbox"/> Useful               | <input type="checkbox"/> Ineffective  |
| <input type="checkbox"/> Unique               | <input type="checkbox"/> Poor quality |
| <input type="checkbox"/> Good value for money | <input type="checkbox"/> Unreliable   |

6. How well does this product meet your needs?

- |                                      |                                       |
|--------------------------------------|---------------------------------------|
| <input type="radio"/> Extremely well | <input type="radio"/> Not so well     |
| <input type="radio"/> Very well      | <input type="radio"/> Not at all well |
| <input type="radio"/> Somewhat well  |                                       |

7. How would you rate the quality of the product?

- |  |  |
|--|--|
| <input type="radio"/> Very high quality            | <input type="radio"/> Low quality      |
| <input type="radio"/> High quality                 | <input type="radio"/> Very low quality |
| <input type="radio"/> Neither high nor low quality |  |

8. How would you rate the value for money of the product?



☐ Excellent

☐ Below average

☐ Above average

☐ Poor

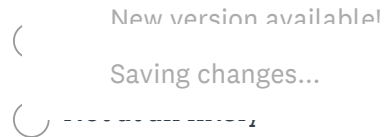
☐ Average

9. How likely are you to purchase any of these products again?

☐ Extremely likely

☐ Very likely

☐ Somewhat likely



10. Do you have any other comments, questions, or concerns?



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DONE



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