

Viamed Feedback Questionnaire

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

Name:

Company/Hospital:

Address:

Post Code:

Country:

Telephone Number:

Fax Number:

Email Address:

1. Which product range did you order from:

- Acrylic Products including: Cot Lids, Tube Holders
- Anaesthesia – Nerve Stimulation ie. Microstim DB3
- Capnography
- Flowsensors
- Gas Sampling Lines
- Infant Resuscitation
- Mounting Options
- Oxygen Hoods
- Oxygen Monitoring
- Posey Products
- Oxygen Sensors
- Patient Warming including: Ceretherm 600-3
- Phototherapy including: Eye Masks and Light Shields
- Pressure Management
- Pulse Oximetry
- Test and Simulation Equipment: V1000
- Temperature Probes

Product Name: _____ Product Part Number: _____

2. Why did you choose to purchase from Viamed? (please tick all that apply)

- Price
- Quality
- Customer Service
- Warranty
- Product

3. Would you purchase from Viamed again? Yes, No, Don't Know

4. Please would you rate the following (1 = Extremely Poor, 5 = Outstanding)

- a. Viamed customer service
- b. Speed of service provided by Viamed
- c. Price of product
- d. Product performance

- e. Warranty of product
- f. User manuals and promotional material

5. Do you have requirement for products that Viamed do not sell but would like to see us provide in the future?
6. Should you have any further comments please write them below.

Thank you for completing the questionnaire, please return in the envelope provided.