

**McLaren Print System Order** 

Order No: 88233 Order Date: 2024-09-17 Order Request Date: User: Leah Blair Phone: 9898263271

**Ship Location: Primary Care Att Denise** 

558 Lockwood Lane Mio, Michigan 48647

Brochures Quantity: 1

Paragon Dept No: 50604 Dept Name: Primary Care

**Company Number:** 

**Order Total Price: 13.00** 

Item Number: 24MMG042

Item Description: HAND HYGIENE SURVEY Card

Revision Date: 05/2024

Print:
Paper:
Size:
Fold:
Finish:
Drill:
Poster:

Misc Info: 100/Pkg, SS 4.25x5.5 100# Satin Cover

## PLEASE TAKE A MOMENT TO COMPLETE OUR HAND HYGIENE COMPLIANCE SURVEY TO HELP US KEEP YOU SAFE

1. While in the room, did you observe staff clean their hands (soap and water or alcohol-based hand sanitizer) either before or after their encounter with you?  □ Before □ After □ Both (Before & After)  2. Which staff member(s) did you observe?  □ Medical Assistant □ RN □ Physician □ Nurse Practitioner □ Physician Assistant Other:  Thank you for taking the time to complete our survey!  Date of Service: _ / _ / _ Patient Initials: Staff Initials:		<b>™</b> McLaren		
alcohol-based hand sanitizer) either before or after their encounter with you?  Before After Both (Before & After)  Which staff member(s) did you observe?  Medical Assistant RN Physician Nurse Practitioner Physician Assistant Other:	Dat	of Service:/_ / Patient Initials: Staff Initials:		
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		☐ Before ☐ After ☐ Both (Before & After)		
	1.			

Spec Info: