

McLaren Print System Order

Order No: 91591
Order Date: 2025-01-16
Order Request Date:
User: KIMBERLE WISNIEWSKI
Phone: 586-412-5122

Ship Location: WOMENS HEALTH
51086 Fairchild Rd, Unit A
Chesterfield, Michigan 48051

Brochures
Quantity: 1
Paragon Dept No: 52051
Dept Name: Clinton Township
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: _____