CONFIDENTIAL

Hospice of Humboldt **Medical Director Evaluation Survey for Clinicians**

Please help me provide meaningful feedback to Dr. John Nelson, the Hospice of Humboldt Medical Director by participating in this anonymous survey. Please rate how well the following indicators were met. Please return the survey to me by _____ . Thank you, Marylee

| Always | Usually | Some times | Rarely | Don't know |
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| | Always | Always Usually | | |

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