

Facility Feedback Form

Name of Facility	
Title (if desired):	

What are Premier Hospitalists of Kansas greatest strengths? (Please provide supporting examples.)

Is there anything Premier Hospitalists of Kansas can improve in their daily practices? (Please provide supporting examples.)

Overall, are you content with your decision to partner with Premier Hospitalists of Kansas?

If you could change one thing about Premier Hospitalists of Kansas, what would it be?