

IDENTIFICATION BAND EVALUATION FORM

1. Does the new patient band appear gentler on patient skins, less irritating?
 - a. yes
 - b. somewhat
 - c. no

2. Do you prefer the new adhesive shredding adhesive over the slips?
 - a. yes
 - b. somewhat
 - c. no
 - d. does not matter

3. Where the new bands easy to use?
 - a. yes
 - b. no
 - c. somewhat
 - d. about the same

4. Did written or imprinted information stay on correctly?
 - a. yes
 - b. no
 - c. somewhat
 - d. about the same

5. Do you feel this is a better product than our present band?
 - a. yes
 - b. no
 - c. I do not know yet
 - d. Maybe

6. If the new band was less expensive than our present band, would you consider switching?
 - a. yes
 - b. no
 - c. maybe
 - d. does not matter

7. How would you rate the new band's overall effectiveness in terms of these Criteria?

1. easy, yet durable and lightweight for patient
2. simplicity
3. easy for nurses to uses
4. adhesive closing
5. Different sizes, widths, etc.
6. waterproof

- a. excellent
- b. good
- c. average
- d. below average
- e. poor

8. Would you prefer to use this new band in place of your present band?

- a. yes
- b. no
- c. I do not care
- d. either band is fine