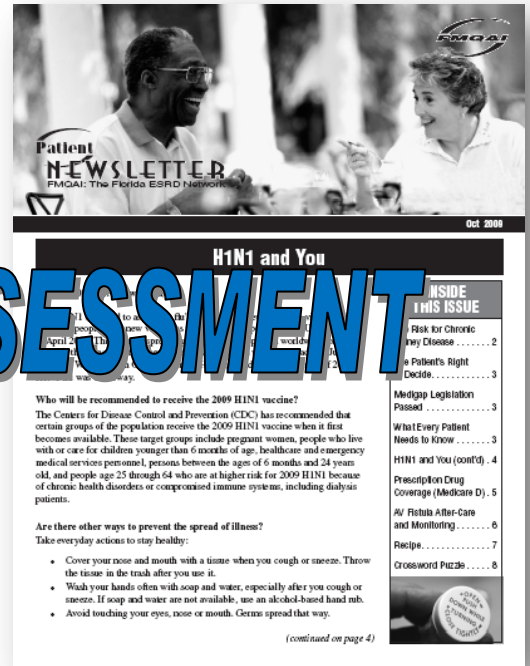




The Florida ESRD Network



PATIENT NEEDS ASSESSMENT

Question	Response	
What is your preferred way of learning?	<input type="checkbox"/> Video <input type="checkbox"/> Written	<input type="checkbox"/> One-to-one <input type="checkbox"/> Other: please state _____
How do you like to get your health education?	<input type="checkbox"/> On-line <input type="checkbox"/> Newsletter <input type="checkbox"/> Dialysis staff	<input type="checkbox"/> Support group <input type="checkbox"/> Mail <input type="checkbox"/> Other sources _____
How often do you like to get your health education?	<input type="checkbox"/> Yearly <input type="checkbox"/> 2 times yearly <input type="checkbox"/> 4 times yearly	
Do you look on the Internet for health education?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
What health education topics would you like to see covered in the future?		
What language are you most comfortable reading?	<input type="checkbox"/> English <input type="checkbox"/> Spanish <input type="checkbox"/> German	<input type="checkbox"/> French <input type="checkbox"/> Creole <input type="checkbox"/> Other _____
What language are you most comfortable speaking?	<input type="checkbox"/> English <input type="checkbox"/> Spanish <input type="checkbox"/> German	<input type="checkbox"/> French <input type="checkbox"/> Creole <input type="checkbox"/> Other _____

Please return this Assessment via regular mail or have your social worker fax to our office.

FMQAI: The Florida ESRD Network 5201 W Kennedy Blvd, Ste 900 Tampa, FL 33609

Phone: 813.383.1530 Fax: 813.354.1514