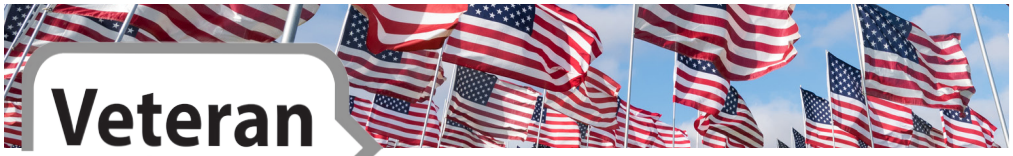

Veteran Voices

VA

U.S. Department of Veterans Affairs
Veterans Health Administration
Gulf Coast Veterans Health Care System

GULF COAST VETERANS HEALTH CARE SYSTEM

☐ Biloxi VA Medical Center ☐ Joint Ambulatory Care Center/Pensacola ☐ Mobile VA Clinic
☐ Eglin VA Clinic ☐ Panama City Beach VA Clinic ☐ VA Panama City Beach Clinic West

Date _____

My OVERALL EXPERIENCE today: ☐ Outstanding ☐ Excellent ☐ Good ☐ Fair ☐ Poor

My APPOINTMENTS/WALK-INS today:

- ☐ Administration
- ☐ Audiology
- ☐ Behavioral Health
- ☐ Benefits
- ☐ Compensation and Pension
- ☐ Emergency
- ☐ Endoscopy
- ☐ Eye Clinic
- ☐ Infusion
- ☐ MAS Clerk
- ☐ Other _____
- ☐ Medical Records
- ☐ Minor Procedures
- ☐ Primary Care Provider
- ☐ Primary Care Nurse
- ☐ Social Work
- ☐ Specialty Doctor
- ☐ Specialty Nurse
- ☐ Travel Pay
- ☐ Telehealth/Clinic

What was most important to you during today's visit?

_____

_____

What do we need to focus on to improve the care you receive?

_____

_____

_____

May we contact you about your visit? Phone _____

Name _____

*Put your completed card in a **VETERAN VOICES** drop box located near GCVHCS main entrances or mail to: **Biloxi VA Medical Center, Community and Public Affairs (00A), 400 Veterans Ave., Biloxi, MS 39531***

MMS, 18-294B, 6/2018V