



Preliminary Survey Report

I. Hospital information

Name of hospital				
Address				
Hospital Level	<input type="checkbox"/> Level 1	<input type="checkbox"/> Level 2	<input type="checkbox"/> Level 3	<input type="checkbox"/> Level 4
Award applied for	<input type="checkbox"/> Center of Safety	<input type="checkbox"/> Center of Quality	<input type="checkbox"/> Center of Excellence	
Date of application				
Date/s of the survey				

II. Survey Results

In relation to your hospital's application for accreditation, your compliance to the **Benchbook core indicators** is summarized below:

Note: "✓" = complied, "x" = not complied, and "N/A" = not applicable):

___ 1.1.a.1	___ 2.3.5.a.2	___ 3.2.1.x.1	___ 6.1.2.a.2	___ 6.2.3.x.1	___ 6.3.3.b.1
___ 2.1.1.b.1	___ 2.5.5.a.2	___ 4.1.1.b.2	___ 6.1.2.b.1	___ 6.2.4.x.1	___ 6.3.4.x.1
___ 2.1.2.a.1	___ 2.5.5.c.1	___ 4.1.2.a.3	___ 6.1.2.b.2	___ 6.3.1.x.1	___ 6.3.5.x.1
___ 2.1.2.b.1	___ 2.5.5.e.1	___ 5.1.1.e.1	___ 6.1.2.c.1	___ 6.3.1.x.2	___ 6.4.3.x.1
___ 2.1.2.c.1	___ 2.5.5.e.2	___ 5.2.1.a.1	___ 6.1.2.e.1	___ 6.3.2.b.1	___ 6.5.1.x.1
___ 2.2.3.a.2	___ 2.5.5.i.1	___ 5.2.1.b.1	___ 6.1.2.f.2	___ 6.3.2.b.2	___ 6.5.2.x.2
___ 2.3.1.a.1	___ 2.7.1.x.1	___ 6.1.1.a.1	___ 6.1.3.b.1	___ 6.3.2.b.3	___ 7.1.x.1
___ 2.3.2.c.1	___ 3.1.3.x.1	___ 6.1.1.b.1	___ 6.2.1.x.1	___ 6.3.3.a.1	___ 7.6.x.1
___ 2.3.3.d.3	___ 3.1.4.x.1	___ 6.1.1.c.2			

The following are our general observations (please attach separate sheet if space is inadequate):

Accomplishments:

Areas for improvement (deficiencies):

