ADEPT Post-Diagnostic Cross-Check Giver

| How satisfied are you with how the cross-check went? | Very satisfiedSatisfiedNeutralDissatisfiedVery dissatisfied |
|--|---|
| Please explain (optional) | |
| Did the cross-check change the care plan of this patient in any way? | ○ Yes ○ No |
| If yes, how? Select all that apply: | ☐ Chart review ☐ History ☐ Physical ☐ Testing ☐ Consultation ☐ Other |
| Please describe: | |
| How likely is the team to do anything differently with the diagnostic process in the future? | ○ Very likely○ Likely○ Neutral○ Unlikely○ Very unlikely |
| Any suggestions for improvement in the diagnostic cross-check process? | |
| Any other comments you would like to add? | |

