TOTAL JOINT ORTHOPEDICS

SURGEON VISITATION PROGRAM | POST-VISIT REPORT

*Please fill this out and email it to granted **surgeonvisit@tjoinc.com**. It may also be filled out online at bit.ly/TJOvisit.*

GENERAL INFORMATION

Your Name: _____

Name of Host Surgeon(s): _____

Date of Visit: _____

What were you hoping to gain from this site visit? *(Check all that apply.)*

	Introduction to TJO system
	Tips and tricks for TJO system
	Learn or expand knowledge of a particular surgical approach
	Learn or expand general surgical skills
	Learn or expand knowledge of how to run a practice
	Other:

Which products (and how many of each) did you observe?

Knee	Qty.	Hip	Qty.
Klassic® Knee		Platform® Cup	
Klassic® Knee with Aurum® Technology		Klassic HD® Stem	
Klassic ONE® Instrumentation		Klassic® Blade Stem	
Other:		Other:	

HOST SITE
Considering the entire experience, how likely would you be to recommend visiting this site to a friend or colleague?
(Circle your choice, with 1 being "definitely would not" and 10 being "definitely would".)

1   2   3   4   5   6   7   8   9   10

Please rate how much you agree with the following statements.
(Circle your choice, with 1 being "strongly disagree" and 5 being "strongly agree".)

Host site understood and helped me achieve my goals for the visit.	1	2	3	4	5
Host surgeon was willing and able to answer my questions.	1	2	3	4	5
Host surgeon made me feel welcome.	1	2	3	4	5

MISSION-DRIVEN™

What was something you learned about the surgery or TJO system used during this visit?

_____

_____

What are the strengths of the host surgeon site? What should they keep doing?

_____

_____

What is something the host surgeon site could do to improve the experience?

_____

_____

HOST AGENT

Please rate how much you agree with the following statements.
(Circle your choice, with 1 being "strongly disagree" and 5 being "strongly agree".)

Host Agent/Rep was easy to work with.	1	2	3	4	5
Host Agent/Rep made me feel welcome.	1	2	3	4	5
Host Agent/Rep was well organized and helped me make the visit a success.	1	2	3	4	5

Is there anything the Host Agent/Rep did that was particularly helpful during your visit?

_____

_____

What is something the Host Agent/Rep could do to improve the experience?

_____

_____

Do you have any comments or suggestions for TJO to improve the Surgeon Visitation experience?

_____

_____