



Notfallzentrum

## Anonymous Patient Questionnaire

Theme: Access to Emergency Numbers

Gender: ☐ male ☐ female

Nationality: ☐ CH ☐ Other

Age: \_\_\_\_\_

Your highest completed level of education:

<input type="checkbox"/> None
<input type="checkbox"/> Compulsory school (primary, technical college, secondary school, district school, orientation school, grammar school, special needs school)
<input type="checkbox"/> Completed professional training
<input type="checkbox"/> Matura [equivalent to A-Levels]
<input type="checkbox"/> Higher Professional Training
<input type="checkbox"/> University

Reason for admission: ☐ Disease ☐ Accident

1. Which emergency numbers do you know?

- ☐ GP
- ☐ Ambulance
- ☐ Air rescue
- ☐ Emergency centre/ Hospital
- ☐ Other emergency number