

Leg Wrapping Support* Product Evaluation Survey



MTI, inc. is constantly looking for ways to improve our products in order to provide your practice with strength in patient care. Thanks for taking time to demo or try out our most recent product, the Leg Wrapping Support System (LWS).

Please take a few minutes to provide important information on the LWS. Your willingness to provide this information is appreciated and we value your opinion. Please be candid in your responses and be sure to return completed forms to one of our sales representatives. You can also take this survey online at <http://www.surveymonkey.com/s/DTD9HQH>.

SURVEY

1. Please rate the STABILITY of the LWS on a scale of 1 to 5, with 1 being "Very Unstable" and 5 being "Very Stable".

Mark the best response:

1 2 3 4 5

2. Please rate the EASE OF USE of the LWS on a scale from 1 to 5, with 1 being "Very Difficult" and 5 being "Very Easy."

Mark the best response:

1 2 3 4 5

3. How would you rate how LOW the leg rest surface descends? Mark the best response.

- Low enough
 Needs to go slightly lower (1" – 2")
 Needs to go much lower (3" or more)
 Other _____

4. How would you rate how HIGH the leg rest surface ascends? Mark the best response.

- High enough
 Needs to go slightly higher (1" – 2")
 Needs to go much higher (3" or more)
 Other _____

5. In what ways might ease of use be improved?

6. In what ways does the product not meet your needs?

7. What recommendations would you make for improving the product?

8. What is your practice specialty?

9. How many LWS systems could you use in your practice?

If you would like an MTI representative to follow up with information on the LWS or if you have questions about the survey, please fill out the information below:

Name: _____

Phone number: _____

Organization: _____

E-Mail address: _____

Position: _____

*Patent pending

03/13 Rev A

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