EVALUATION FORM

# Airpod Air Blower Evaluation Form



The Purpose of this Evaluation Form for the Airpod® Air Supply Unit (Air Blower) is to collect and evaluate your experience, opinions and observations with the product and to assist Rexyn Ltd in improving the product and customer service.

We appreciate your help and support. Thank you very much.

General Information

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| --- | --- | --- | --- |
| **Section 1 - Customer Details** | | | |
| Date of Evaluation |  | | |
| Name of Institution / Trust / Hospital |  | Location of Evaluation |  |
| Address |  | Postcode |  |
| Evaluation Team Representative |  | | |
| Telephone number |  | | |
| Email address |  | | |
| *I / We grant permission to use the comments in this Evaluation Form about the products in material used to promote Airpod and other Rexyn Ltd Products (Please Tick the Box for acceptance)* | | | |

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| --- | --- | --- |
| **Section 2 – Rexyn Dealer Details** | | |
| Name of Dealer Organisation |  | |
| Dealer Representative Details | Name: | Email: |

|  |  |  |
| --- | --- | --- |
| **Section 3 – Product Details – please chose only 1**  **Please complete a different Evaluation Form for each product evaluated** | | |
| Product Evaluated | Analog | Digital |

Evaluation Forms are available for the following additional products:

Airpod Air Mattress (Standard and Bariatric)

Airpod SPU (Single Patient Use) Mattress Covers

MultiBoard DUO – Air Mattress Hybrid Air Mattress

Training

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Section 4 – Training** | | | | | | | | |
| Did you receive Training in how to use the Product? | YES | | | | NO | | | |
| Who provided this Instruction? (Tick All that Apply) | Company / Dealer Representative | | Staff Member | | | | Other  Please provide details | |
| Please rate your Assessment | Poor | OK – Adequate | | Good | | Very Good | | Excellent |
| Comments |  | | | | | | | |
| **Section 4a – Training Material – Manual, Videos, Brochures** | | | | | | | | |
| Did you receive Training Material – Manual, Videos, Brochures? | YES | | | | NO | | | |
| What Training Material did you receive? (Tick All that Apply) | Training Manual | | Videos / DVD | | | | Brochures | |
| **Section 4b – Training Manual – please rate your assessment** | | | | | | | | |
| Overall Quality of the Manuals | Poor | OK – Adequate | | Good | | Very Good | | Excellent |
| Clarity and ease of understanding of the Information | Poor | OK – Adequate | | Good | | Very Good | | Excellent |
| Clarity and ease of understanding of the Instructions | Poor | OK – Adequate | | Good | | Very Good | | Excellent |
| Comments |  | | | | | | | |

Training - continued

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| **Section 4c – DVD, Videos – please rate your assessment** | | | | | |
| Overall Quality of the DVD, Videos | Poor | OK – Adequate | Good | Very Good | Excellent |
| Clarity and ease of understanding of the Information | Poor | OK – Adequate | Good | Very Good | Excellent |
| Clarity and ease of understanding of the Instructions | Poor | OK – Adequate | Good | Very Good | Excellent |
| Comments |  | | | | |
| **Section 4d – Brochures – please rate your assessment** | | | | | |
| Overall Quality of the Brochures, Leaflets, Support Documentation | Poor | OK – Adequate | Good | Very Good | Excellent |
| Clarity and ease of understanding of the Information | Poor | OK – Adequate | Good | Very Good | Excellent |
| Clarity and ease of understanding of the Instructions | Poor | OK – Adequate | Good | Very Good | Excellent |
| Comments |  | | | | |

Product Appearance, Construction and Labelling

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| --- | --- | --- | --- | --- | --- |
| **Section 5 – Product Appearance, Construction, Labelling – please rate your assessment** | | | | | |
| Rate the overall Appearance of the Airpod Air Blower | Poor | OK – Adequate | Good | Very Good | Excellent |
| Rate the quality of the overall Construction of the Airpod Air Blower | Poor | OK – Adequate | Good | Very Good | Excellent |
| Rate the quality of the printing (legibility, clarity) on the Label (in full colour) | Poor | OK – Adequate | Good | Very Good | Excellent |
| Rate the information icons (symbols) on the Label – are they easy to understand | Poor | OK – Adequate | Good | Very Good | Excellent |
| Comments |  | | | | |

Experience of Using the Airpod

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| --- | --- | --- | --- | --- | --- | --- |
| **Section 6 – Experience of Using the Airpod Air Mattress – please rate your assessment** | | | | | | |
| The Airpod Air Blower is compatible for use with most Competitors Air Mattress.  Which Air Mattress was the Airpod Air Blower used in conjunction with? | Rexyn Air Mattress Products  Airpod Air Mattress  Duo Air Mattress  Hybrid Air Mattress | | | Other  Please State the Brand | | |
| Rate the ease of Connecting the Air Hose to the Air Mattress | Poor | OK – Adequate | Good | | Very Good | Excellent |
| Rate the ease of Connecting the Air Hose to the Air Blower | Poor | OK – Adequate | Good | | Very Good | Excellent |
| Rate the Inflation Time – that is the speed of inflation of the Air Mattress | Poor | OK – Adequate | Good | | Very Good | Excellent |
| Rate the Functionality and Usefulness of the Variable Power Settings  *The Power Settings on the Analogue Air Blower can be increased/decreased by turning the Dial of Power Settings Dial/Button. The Power Settings on the Digital Air Blower can be increased/decreased by Plus/Minus Settings Button.* | Poor | OK – Adequate | Good | | Very Good | Excellent |
| Rate the Ease of Removing, Cleaning and Replacing the Air Filter on the Air Blower | Poor | OK – Adequate | Good | | Very Good | Excellent |
| Rate the overall ease of Cleaning and Disinfecting the outer surface of the Air Blower | Poor | OK – Adequate | Good | | Very Good | Excellent |
| Comments |  | | | | | |

Your Comments

Please tell us what you don’t like about the Product.

Rate the Importance of Your Comments

## 1 = Very Important

## 2 = Not Important but needs to be looked into

## 3 = Needs to be brought to your attention

|  |  |
| --- | --- |
| COMMENTS | RATE |
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**THANK YOU VERY MUCH - WE APPRECIATE YOUR HELP.**