



Diveen[®]

Evaluation Form

The personal data (name, address) and information you provide is given on an explicitly voluntary basis; by doing so you consent to it being used [anonymously] in product evaluations, customer service evaluations and for use in future marketing materials. The data will not be provided to any third party unless you explicitly request to do so, and will be stored digitally for an indefinite period. For more information, please see the detailed Privacy Policy on our website: www.bbraun.co.uk.

Once completed, please email the form to opm.bbmuk@bbraun.com

DATE

NURSE

CENTRE

ADDRESS

User Impressions of Diveen®

About you

How old are you?	18-45	46-65	66+
How long have you been suffering with urinary leaks?	Less than 1 year	1-5 years	6 years+
How do you currently manage these leaks e.g. pads/pants etc?			
How would you describe the frequency of your urinary leaks?	All the time Often	Most of the time Once in a while	Rarely
How often would you use Diveen?	Daily Occasionally	When you go out For physical activity	
Please state physical activity:			
If using for physical activity, how many times would you use Diveen per week?	per week		

About Diveen®

How many Diveen devices did you try?	1	2-3	4-5	6+
Which size did you try?	Small		Medium	
Did you use the applicator to insert Diveen?	Yes		No	
Did you read the instructions for use before you tried Diveen?	Yes		No	
Each Diveen is licenced for 2 wears and should be thrown away after the second wear because of hygiene and effectiveness reasons. Please tell us how you would use Diveen.	Follow the manufacturer instructions (two wears per device) Use a new Diveen each time Other			
How would you like to order Diveen?	Ask your GP to prescribe the device on an NHS prescription Purchase the device from an online shop			
Do you follow social media sites?	Yes		No	
If yes, please tell us which social media channels you follow	Twitter Other	Facebook	Instagram	

Overall

Would you like to continue to use Diveen in the future?	Yes	No
Please tell us what you think about Diveen		

Please provide your contact details if you would like us to email or text you with details about how you can order Diveen	Email:	
	Mobile:	
Do you feel that Diveen improved your quality of life?	Yes	No
Please tell us more		

Opinions of Diveen

	Excellent	Good	Poor	Very Poor
Overall impression of the packaging				
Instructions for use leaflet in the box				
Ease of opening/preparation for use				
Ease of insertion				
Ease of removal				
Comfort of Diveen during wear time				
Feeling of security when wearing Diveen				
Convenience of Diveen				
Discretion of Diveen				
Effectiveness of reducing urinary leaks				
Overall satisfaction of Diveen				



Scan the QR code to find out more information about Diveen®



PHONE: 0800 163 007



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