

## COMMENT SHEET

**SUBCOURSE MD0915 Nursing Care of the Surgical Patient**

**EDITION 100**

Your comments about this subcourse are valuable and aid the writers in refining the subcourse and making it more usable. Please enter your comments in the space provided. ENCLOSE THIS FORM (OR A COPY) WITH YOUR ANSWER SHEET **ONLY** IF YOU HAVE COMMENTS ABOUT THIS SUBCOURSE..

**FOR A WRITTEN REPLY, WRITE A SEPARATE LETTER AND INCLUDE SOCIAL SECURITY NUMBER, RETURN ADDRESS (and e-mail address, if possible), SUBCOURSE NUMBER AND EDITION, AND PARAGRAPH/EXERCISE/EXAMINATION ITEM NUMBER.**

### PLEASE COMPLETE THE FOLLOWING ITEMS:

(Use the reverse side of this sheet, if necessary.)

1. List any terms that were not defined properly.

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2. List any errors.

paragraph      error      correction

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3. List any suggestions you have to improve this subcourse.

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4. Student Information (optional)

Name/Rank \_\_\_\_\_  
SSN \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_  
E-mail Address \_\_\_\_\_  
Telephone number (DSN) \_\_\_\_\_  
MOS/AOC \_\_\_\_\_

#### PRIVACY ACT STATEMENT (AUTHORITY: 10USC3012(B) AND (G))

**PURPOSE:** To provide Army Correspondence Course Program students a means to submit inquiries and comments.

**USES:** To locate and make necessary change to student records.

**DISCLOSURE: VOLUNTARY.** Failure to submit SSN will prevent subcourse authors at service school from accessing student records and responding to inquiries requiring such follow-ups.