

PATIENT SURVEY

1. How long have you been my patient?

- First visit
- 1-5 years
- 5-10 years
- Over 10 years

2. Why did you first decide to seek medical treatment in this facility?

- Near home or business
- Referral by another patient
- Referral by another physician
- Referral by local medical society
- Telephone listing
- Other _____

3. How convenient is our facility?

- Location
- Parking
- Office hours

4. Was it easy to get an appointment?

- Yes
- No

If no, please explain

5. When you last telephoned our office, were you treated courteously by our staff?

- Yes
- No

If no, please explain

6. When you arrived at our office, how long after your scheduled appointment with me did you have to wait before seeing me?

- Less than 15 minutes
- 15 to 30 minutes
- More than 30 minutes

7. What are your general impressions of the office itself?

- Beautiful
- Organized/efficient
- Nice
- Disorganized
- Average
- A total mess
- Shabby

8. During your last visit, how were you treated by members of my office staff?

- As a good friend
- Indifferently
- Pleasantly
- Coldly

9. Please rate me on how genuinely interested I seem to be in you as a person.

- You *always* seem interested & concerned.
- You *usually* seem interested & concerned.
- You *sometimes* seem interested & concerned.
- You *never* seem interested & concerned.

10. During our office visits, do you think I adequately explain to you your illness and the treatment I recommend?

- Yes
- No

If no, please explain

11. During an office visit, do you think I adequately answer all your questions?

- Yes
- No

If no, please explain

12. Were you satisfied with the quality of the medical treatment you received from me?

- Yes
- No

If no, please explain

13. At your last visit, was my fee and the statement clearly explained and easy to understand?

- Yes
- No

If no, please explain

14. Do you feel my fees are appropriate for the services rendered?

- Yes
- No

If no, please explain

15. If a friend of yours were in need of medical services such as we provide to you, would you recommend us?

- Yes
- No

If no, please explain

16. Do you have any other comments or suggestions which might help me to improve my service to you?

All comments, whether positive or negative, are appreciated.
