



PATIENT SATISFACTION SURVEY

Our records indicate that you recently visited our office for your primary care needs. To help us better serve you, please answer the following:

1. When you made an appointment to see the Doctor, how often did you get an appointment as soon as you thought you needed?

- Never
- Sometimes
- Usually
- Always

2. When you phoned our office with a question or to schedule an appointment, how would you rate the courtesy and response time of the person you spoke with?

- Excellent
- Good
- Fair
- Poor

Please state the primary reason for your call: _____

3. Wait time includes time spent in the waiting room and exam room. During your most recent visit, approximately how long did you wait until you saw the clinician (nurse or doctor)?

- 15 minutes or less
- 15 minutes to 30 minutes
- 30 minutes to 1 hour
- Over 1 hour

4. During your most recent visit, did the office staff treat you with courtesy and respect?

- Yes, definitely
- Yes, somewhat

No; please explain: _____

5. Please rate your overall satisfaction pertaining to the quality of your medical care?

- Excellent
- Good
- Fair

Poor; please explain: _____

6. During your most recent visit, please rate your experience during the check-out process including scheduling of any additional appointments and ease of arranging a follow-up visit?

- Excellent
- Good
- Fair

Poor; please explain: _____

7. Please rate your overall satisfaction of the billing process, including receiving patient statements, ease of getting billing inquiries answered and courtesy of billing staff?

- Excellent
- Good
- Fair

Poor; please explain: _____

8. Did someone from our office follow up with you to give you test results in a reasonable amount of time?

- Yes
- No
- Not applicable; Tests were not ordered

9. How would you rate the cleanliness and overall comfort of the office?

- Excellent
- Good
- Fair

Poor; please explain: _____

10. Would you recommend our practice to your family and friends?

- Yes, definitely
- Yes, somewhat

No; please explain: _____