

PATIENT SATISFACTION SURVEY

Please tell us which provider you saw today _____ Date _____

1.	I had an easy time getting through to the office by phone.					
2.	When I called the office, my call was handled promptly and courteously.					
3.	My appointment was made within a reasonable time frame.					
4.	The receptionist was friendly and helpful.					
5.	The reception area was clean and comfortable.					
6.	The length of time I waited in the reception area was reasonable.					
7.	The nursing staff was friendly and courteous.					
8.	The length of time I waited in the exam room was reasonable.					
9.	I was allowed adequate time with the provider.					
10.	I felt comfortable making comments and asking questions of the provider.					
11.	The provider was willing to listen to my concerns and answer my questions.					
12.	The provider explained things in a way I could understand.					
13.	I received information about lab results promptly.					
14.	The person who handled my bill was helpful and treated me with respect.					
15.	I would recommend this provider to a friend.					
16.	I would recommend this practice to a friend.					
17.	I am pleased with the overall quality of care I received.					

Comments: _____
