

Patient Satisfaction Survey

BEFORE THE APPOINTMENT

The staff and physicians at PediatriCare want to be sure we are doing everything we can to serve you. Please take a minute to fill out this survey. All responses are confidential, and we do not want you to sign it or otherwise indicate your name. Just let us know what to do better!

Thank-you!

On a scale from 1 to 5, with 5 being excellent and 1 being poor, how would you rate:

1. The time between your call to schedule an appointment and your date? 1 2 3 4 5

Comments: _____

2. The time it took us to answer your call: 1 2 3 4 5

Comments: _____

3. The manners of the person(s) that scheduled your appointment. 1 2 3 4 5

Comments: _____

4. The convenience of our location. 1 2 3 4 5

Comments: _____

5. The professionalism and helpfulness of your receptionist. Was the receptionist polite? Were your questions answered? 1 2 3 4 5

Comments: _____

6. Your wait time in the office. 1 2 3 4 5

Comments: _____

7. The comfort, cleanliness and amenities of the reception. 1 2 3 4 5

Comments: _____

Your Provider

AFTER THE APPOINTMENT

I saw: **Dr. Giancola Dr. Katz Dr. Johnson Dr. Natovitz**
Dr. Haynesworth Joyce Apted, CPNP Julie Waser, CFNP
Jenny Long, CPNP

1. The amount of time spent with your physician. 1 2 3 4 5
Comments: _____

2. His or her listening. 1 2 3 4 5
Comments: _____

3. His/her explanation of procedure, diagnoses, or treatment regimen? 1 2 3 4 5
Comments: _____

4. His or her "bedside" manner. 1 2 3 4 5
Comments: _____

If you have visited our practice before, how convenient did you find:

1. Prescription refills. 1 2 3 4 5
Comments: _____

2. Lab results. 1 2 3 4 5
Comments: _____

Overall how would you rate our practice? 1 2 3 4 5
Comments: _____

Thank you for your time!

PLEASE CIRCLE THE PROVIDER YOU SAW TODAY