

PATIENT SATISFACTION SURVEY

Your opinions as our patients are important to us. We want to know how <u>we are doing</u>. The good and what <u>we can do better</u>. Please take a couple of minutes to provide us with important information to assist us in our efforts to better serve you as our patient.

Please rate us from 1 to 5 using the scale below 1. Inadequate 2. Adequate 3. Favorable 4. Very Favorable 5. Excellent

How easy was it to make an appointment?	12345 NA
How would you rate our customer service?	12345 NA
How would you rate the receptionist?	
Making you feel welcomed?	12345 NA
Were they helpful?	12345 NA
Professionalism?	12345 NA
Respectfulness?	12345 NA
Thoroughness of obtaining all necessary information?	12345 NA
How would you rate the amount of time you had to wait in the	
reception area prior to be taken back to the exam room?	12345 NA
How would you rate the medical assistant (the person who took you back)?	
Greeted you with a smile?	12345 NA
Professionalism?	12345 NA
Listening to your needs?	12345 NA
Caring?	12345 NA
Courteous?	12345 NA
Maintaining your privacy?	12345 NA

How would you rate your provider?

Which Physician did you see today <i>or</i> were you here for something else?	
How would you rate the time the Physician spent with you?	1 2 3 4 5 NA
Were you satisfied with the Physician's explanation of your health condition and/or reason for your visit?	1 2 3 4 5 NA
Your satisfaction with the overall cleanliness and comfort of the facility?	1 2 3 4 5 NA
Would you recommend this practice to your family and friends?	Yes No

In a few short words, can you tell us what you *liked best* about today's visit? ______

Now, can you tell us what you disliked or would change about today's visit? ______

Thank you for taking the time to fill out this survey and giving us your honest feedback. We appreciate our patients and their families for entrusting all of us here at The Nephrology Group in the care of your kidney health.