

Patient Feedback Form

First name:

Surname:

Email:

Please complete our form and tick one box to indicate the following:

1 = Strongly Agree or 4 = Strongly Disagree

- | | | | | |
|--|---------------------------|--------------------------|-------------------------|-------------------------|
| 1. Do we answer the phone promptly and politely? | <input type="radio"/> 1 | <input type="radio"/> 2 | <input type="radio"/> 3 | <input type="radio"/> 4 |
| 2. Do you feel that clinical and nursing staff explain themselves well? | <input type="radio"/> 1 | <input type="radio"/> 2 | <input type="radio"/> 3 | <input type="radio"/> 4 |
| 3. Do we see you on time? | <input type="radio"/> 1 | <input type="radio"/> 2 | <input type="radio"/> 3 | <input type="radio"/> 4 |
| 4. Is our reception area clean and comfortable? | <input type="radio"/> 1 | <input type="radio"/> 2 | <input type="radio"/> 3 | <input type="radio"/> 4 |
| 5. In an emergency, is it easy for you to get in touch with our practice? | <input type="radio"/> 1 | <input type="radio"/> 2 | <input type="radio"/> 3 | <input type="radio"/> 4 |
| 6. Are you greeted pleasantly upon arrival? | <input type="radio"/> 1 | <input type="radio"/> 2 | <input type="radio"/> 3 | <input type="radio"/> 4 |
| 7. Do you feel the dentist, hygienist and nursing staff are attentive to your needs and concerns? | <input type="radio"/> 1 | <input type="radio"/> 2 | <input type="radio"/> 3 | <input type="radio"/> 4 |
| 8. Do our staff spend adequate time with you? | <input type="radio"/> 1 | <input type="radio"/> 2 | <input type="radio"/> 3 | <input type="radio"/> 4 |
| 9. Are you referring your friends and colleagues to our practice?
If not, please let us know why? | <input type="radio"/> Yes | <input type="radio"/> No | | |

10. Are you pleased with the results you are seeing?
If no, please let us know why?
- Yes No

11. Is our practice easy to find?
- Yes No

12. What do you like or dislike most about our practice?

Like:

Dislike:

13. What would make your experience at our practice even better?

Thank you for taking the time to complete our form. Please return to our address below.