

Swedish Urology Group, P.C.
Patient Satisfaction Survey

Dear Patient,

Please take a few minutes of your time to help us serve you better. Our goal is to provide comfort, convenience and satisfaction, as well as, the very best medical care for all our patients. We'd like to know how you feel about our medical services, our physicians and our staff. Your comments will help us evaluate our operations to ensure that we are truly responsive to your needs. Thank you for your participation.

Please rate the following:	Excellent	Very Good	Good	Fair/ Poor	N/A
1. Your Appointment Rate your satisfaction with making an appointment including waiting time and the overall ease of the appointment process.	5	4	3	2	1
2. Our Staff Rate the courtesy, friendliness and caring of our staff.	5	4	3	2	1
3. Our Communication with You Rate how promptly your phone calls were answered and your satisfaction with advice provided to you over the phone.	5	4	3	2	1
4. Waiting Time Rate your satisfaction with the amount of time you spent in our office and the communication you received regarding waiting times.	5	4	3	2	1
4. Your Visit with Your Doctor Rate your overall satisfaction with your physician and the outcome of treatment prescribed by your doctor.	5	4	3	2	1
5. Our Facility Rate your satisfaction with our hours of operation, facilities, parking and signage/directions to our office.	5	4	3	2	1
6. Your overall satisfaction with Our practice and the quality of your medical care.	5	4	3	2	1

Your additional comments?

Please place your completed survey in the box provided. Your answers will be read by management and will remain confidential. Thank you for your feedback.

