

Please take a few moments to answer these few questions about your most recent visit and return this survey to us in the self-addressed stamped envelope. 1=absolutely yes 5=absolutely no

- 1) When you walked in, did you feel the clinic was clean and orderly? 1 2 3 4 5

- 2) Where you greeted in a pleasant and courteous manner?
1 2 3 4 5
- 3) Was our staff (including the doctor) friendly and informative?
1 2 3 4 5

- 4) Did you feel your pet was treated with care? 1 2 3 4 5

- 5) Did the doctor answer all of your questions and give you helpful information on the health and treatment of your pet?
1 2 3 4 5

- 6) Did you feel that you received value for what you paid?
1 2 3 4 5

- 7) Would you refer your friends and/or family to our office?
1 2 3 4 5

Please give us any comments or recommendations regarding your visit so that we can improve our service to you and all of our clients. _____

Thank you for your time. We appreciate your input.