

CLIENT SURVEY

Our mission is to maintain a dedicated, caring and knowledgeable team committed to providing exceptional client service and Veterinary Health Care. We strive toward this excellence through continuing education, technical advances and compassionate care for all pets entrusted to us.

(Please Note: Your privacy is 100% assured.)

How did you choose Our Hospital?

	Yes	No
A friend or relative recommended the practice	Yes	No
I drove by and saw your hospital sign	Yes	No
I saw the practice in the Yellow Pages	Yes	No
Found you through the Search Engines	Yes	No
Penny Saver or any other Ad please note.....	Yes	No

Your Telephone Experience:

	Yes	No
My call was answered promptly.....	Yes	No
It was easy to make an appointment	Yes	No
I was referred to the hospital website to get necessary forms ahead of time	Yes	No
I was places on hold too long	Yes	No
I was offered to be called back in needed	Yes	No
I did not phone.....	Yes	No

Your Impression of our Receptionist (Over the Phone):

	Yes	No
Friendly and attentive.....	Yes	No
Helpful.....	Yes	No
Informative.....	Yes	No

Your impression of our Receptionist (In Person):

	Yes	No
Aware of purpose to visit.....	Yes	No
Seemed warm and cheerful.....	Yes	No
Gave me undivided attention.....	Yes	No
Seemed hospitable.....	Yes	No
Answered all my questions.....	Yes	No

Your Impression of our Reception Area:

	Yes	No
Comfortable.....	Yes	No
Neat & Clean.....	Yes	No
Retail displays are well organized.....	Yes	No
Odor-free.....	Yes	No

Your Impression of Our Parking Lot/Grounds:

	Yes	No
Clean	Yes	No
I found a parking spot with ease.....	Yes	No

Your Impression of our Hospital Website:

	Yes	No
I visited the Pet Hospital Website.....	Yes	No
I found the website to be helpful & resourceful.....	Yes	No
I printed out any necessary forms ahead of time from the Hospital Website..	Yes	No
I registered to be a member and/or to receive free newsletters.....	Yes	No

Your Impression of our Technician:

	Yes	No
Greeted me with warmth.....	Yes	No
Was gentle with my pet.....	Yes	No
Seemed proficient and knowledgeable.....	Yes	No
Gave me the information I needed.....	Yes	No
Pet-friendly.....	Yes	No

Your impression of our Veterinarian:

	Yes	No
Listened to what I said & answered all my questions.....	Yes	No
Gave clear advice about how to treat my pet.....	Yes	No
Behaved professional in manner and appearance	Yes	No
Answered all my questions.....	Yes	No
Comforted me and my pet.....	Yes	No
Made me feel valued.....	Yes	No

Additional Questions:

	Yes	No
Was your waiting time reasonable?	Yes	No
Do you feel the fees were reasonable?	Yes	No
Did you understand all our fees?.....	Yes	No
In you marked "No" please explain.....	Yes	No

Will you recommend us to others?

If not, please explain.

What suggestions do you have for improving the office, staff or procedures?

If you would like us to contact you, please fill out the necessary information.

Name:

Phone: