



## PATIENT SURVEY

We care about the level of service we offer our patients. Please complete this survey to tell us what you liked about our office. Also let us know what areas we need to improve. The results of this survey will be kept confidential unless you give us permission to share the information with others. Thank you for choosing Peachtree Endodontics!

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Answers: A. Exceeded Expectations B. Met Expectations C. Needs Improvement

1. I was scheduled and treated in a timely manner.  A.  B.  C.
2. All phone conversations were polite, considerate, and easily understood.  A.  B.  C.
3. I found the receptionists to be friendly and helpful.  A.  B.  C.
4. The staff gave me a clear understanding of fees, my insurance benefits, and financial arrangements.  A.  B.  C.
5. I thought the office was clean, warm, organized, and inviting.  A.  B.  C.
6. The dental assistants were gentle and attentive to my needs.  A.  B.  C.
7. The doctor was professional, thorough, concerned, and caring.  A.  B.  C.
8. I would rate my experience overall as.....  A.  B.  C.
9. I would recommend this office to family and friends.  Yes  No
10. I give permission for my comments to be used on your website.  Yes  No

**Comments:**



Name (optional): \_\_\_\_\_

Thank you!

Dr. George Brown and Staff