

Marias Healthcare would appreciate your time in completing this survey. Your answers will be reviewed by both the management and board of directors. Please circle your response and make additional comments.

**General**

What is your general impression of Marias Healthcare?  
 \_\_\_\_\_  
 \_\_\_\_\_

At which office were you seen?  
 Shelby                      Valier                      Sunburst

Which Physician did you see?  
 \_\_\_\_\_

Was this your first visit to Marias Healthcare?  
 Yes                      No

**Facilities**

Convenience of office location.  
 Very Good    Good    Fair    Poor    Very Poor

Convenience of office hours.  
 Very Good    Good    Fair    Poor    Very Poor

Comfort of reception area.  
 Very Good    Good    Fair    Poor    Very Poor

Comfort of exam rooms.  
 Very Good    Good    Fair    Poor    Very Poor

Confidentiality of:  
 Receptionists            Very Good    Good    Fair    Poor    Very Poor  
 Nurses/Clinical Assts.    Very Good    Good    Fair    Poor    Very Poor  
 Physicians                Very Good    Good    Fair    Poor    Very Poor  
 Office Staff                Very Good    Good    Fair    Poor    Very Poor  
 Reception Area            Very Good    Good    Fair    Poor    Very Poor  
 Exam Rooms                Very Good    Good    Fair    Poor    Very Poor

Comments: \_\_\_\_\_

**Reception and Office Staff**

Were you treated courteously when you last telephoned our office?  
 Very Good    Good    Fair    Poor    Very Poor

Were you treated politely by the registration staff at the time of your visit?  
 Very Good    Good    Fair    Poor    Very Poor

Simplicity and ease of registration process.  
 Very Good    Good    Fair    Poor    Very Poor

Were you treated politely when making a follow up appointment?  
 Very Good    Good    Fair    Poor    Very Poor

If you have called or stopped by our billing office regarding your account with Marias Healthcare, were you treated professionally?  
 Very Good    Good    Fair    Poor    Very Poor

In your opinion, was the office staff organized?  
 Very Good    Good    Fair    Poor    Very Poor

Do you feel that the billing statements are easy to read and understandable?  
 Very Good    Good    Fair    Poor    Very Poor

Comments: \_\_\_\_\_

**Physicians, Nurses & Clinical Assistants**

Appointment time available within a reasonable amount of time.  
 Very Good    Good    Fair    Poor    Very Poor

Date of appointment: \_\_\_\_\_

Length of time between your scheduled appointment time and when you actually saw the physician.  
 5-15 min            16-30 min            31-45 min  
 46-60 min            longer

If you waited more than 15 minutes were you informed that your appointment would be delayed?  
 Yes                      No

Was the nurse or clinical assistant professional and courteous?  
 Very Good    Good    Fair    Poor    Very Poor

Physician's explanation of your condition, tests and treatment.  
 Very Good    Good    Fair    Poor    Very Poor

Reporting of tests results.  
 Very Good    Good    Fair    Poor    Very Poor

Willingness of Physician to answer your questions.  
 Very Good    Good    Fair    Poor    Very Poor

If you have called the nurse, clinical assistant or physician with questions, how do you feel the response time was?  
 Very Good    Good    Fair    Poor    Very Poor

Comments: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Overall, professionalism and care of our facility.  
 Very Good    Good    Fair    Poor    Very Poor

Would you recommend the facility to others?  
 Yes                      No

What one thing do you most like about our practice?  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

How can we improve our service? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Your name (optional) \_\_\_\_\_

Age: Under 18    18-35    35-55    55-65    Over 65

Gender:                      Male    Female

***Thank you for your cooperation!***