



Patient Satisfaction Survey

- 1. The conversations with the staff prior to surgery helped me to prepare for my visit.
2. Upon arrival at the center, the receptionist was pleasant and helpful.
3. My wait time prior to surgery was reasonable and delays were communicated.
4. My surgeon spent adequate time with me explaining my procedure and answering any questions or concerns.
5. The anesthesiologist was patient, understanding, and caring. He or she spent adequate time reviewing my care and questions.
6. The nursing staff was caring, understanding, and knowledgeable.
7. The Center was clean and comfortable.
8. The instructions I received for my care at home were satisfactory.
9. My financial responsibility was explained to me in a timely and courteous manner.
10. Overall my experience with the Surgery Center:

11. What might we do to improve our care? Please add any comments and/or suggestions.

Would you like to be contacted to discuss any concerns?
If you have any medical questions or concerns, please contact your surgeon.

Name (optional) Telephone (optional)

Surgery Date:

Surgeon:

Thank you for completing this survey