

| Your comments   | Date  |
|---|---|
| Please take a minute to fill out this survey and turn it in to the collection box when you check out. | Scheduling Your Appointment Did you have to wait longer than expected to get scheduled?  Yes No                               |
|   | How easy was it to make an appointment by telephone?  Uery easy  Very difficult   |
| Please share any positive comments:   | Was the person who scheduled your appointment courteous and helpful?  Uery courteous  Rude                                    |
|   | How long did you wait to speak to a scheduling staff member?  O to 1 min 2 to 3 min 4 to 5 min 5 to 7 min Longer              |
| Please share any concerns or suggestions:  How Very   | Day of Your Appointment  How would you rate the courtesy of the staff at the reception desk?  Very courteous  Rude            |
|   | How long did you wait in reception area beyond your appointment time?  O to 5 min 5 to 20 min 20 to 40 min Other              |
|   | How long did you wait in the exam room before the physician appeared?  O to 5 min 5 to 10 min 10 to 20 min 20 to 30 min Other |

Thank you for your participation.