



Patient Satisfaction Survey

We are proud that you are a part of the Carolina Nephrology Associates Family!

Your opinions are important to us. So that we may serve you better on each and every visit, please complete the following survey and turn it in when you check-out or return it by mail.

Your confidential responses will receive our prompt attention.

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	N/A
Given a choice of Greenville, Easley, Greer, Simpsonville, Laurens, or Seneca, my appointment was scheduled at the location most convenient for me.						
I was given a prompt, convenient appointment.						
The registration forms were easy to understand.						
The personnel at the Reception Desk were courteous.						
The office waiting room time was acceptable.						
The medical staff was informative and courteous.						
The exam room waiting time was acceptable.						
My doctor spent enough time with me.						
The doctor answered all of my questions.						
Medical tests were scheduled efficiently and conveniently.						
I was offered reading material concerning my diagnosis.						
My over all visit today was a positive experience.						

Please tell us what you liked or did not like about your visit to our office today. _____

How could we have improved our service to you?

So that we may show our appreciation to any of our staff who has been especially helpful to you, please give us their name:

Signature (optional): _____ Email (optional): _____