

PATIENT SATISFACTION SURVEY

Thank you for choosing The Periodontist Dental Centre (PDC) for your dental care. We appreciate your time in answering the questions in this survey. Your response will enable us to improve our centre and take better care of the patients who come here.

1. Did you have any difficulty in locating our clinic?

Yes: What was the problem?

No

2. Did you have any difficulty in making an appointment for your dental care?

Yes: What was the problem?

No

3. Did the doctor discuss your medical history before starting dental treatment?

Yes

No

4. Did the doctor answer all your questions regarding your dental treatment?

Yes

No: Which questions were not answered?

5. Would you consider the doctor's appearance and behaviour professional?

Yes

No: what was the problem?

6. Please tick as appropriate

- 6.1. My dentist treated me respectfully
- 6.2. My dentist was knowledgeable about my treatment prior to the appointment
- 6.3. My dentist reviewed my medical history and made changes if necessary
- 6.4. My dentist listened to my concerns and encouraged me to ask questions
- 6.5. My dentist used words I could understand
- 6.6. My dentist explained what was going to happen before each treatment step
- 6.7. My dentist gave me the option to refuse treatment
- 6.8. My dentist was gentle while providing care

- 6.9. My dentist was aware if I was in pain and relieved me
 - 6.10. My dentist used procedures that made me feel safe from infection
 - 6.11. My dentist informed me of the time commitment required for treatment.
 - 6.12. My dentist clearly explained how to keep my mouth healthy
 - 6.13. The treatment area was clean.
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7. Would you consider the dental assistant's appearance and behaviour professional?

Yes

No: what was the problem?

8. Was the reception area staff courteous and informative

Yes

No: what was the problem?

9. Were you satisfied with the cleanliness and appearance of the clinic?

Yes

No: what was the problem?

10. Are you satisfied with the overall care you received at our clinic?

Yes

No: what was the problem?

11. How did you find out about our clinic? Tick (*website, LinkedIn, Tweeter, Facebook, google, friend/relative, other doctor, insurance, Other-Please specify*)

12. Do you have any suggestions to improve our clinic?

13. Overall, I was pleased with the care I received at The Periodontist Dental Centre (PDC). I would return to the PDC.

14. I would recommend the PDC to a friend or relative.

15. What did you feel we did well?

16. What can we do to serve you better?

17. Did anyone in particular make your visit enjoyable?

18. Additional comments:

Thank you for your confidence and cooperation.