

WE NEED YOUR INPUT

Valley Center Veterinary Clinic Client Survey

Thank you for taking the time to tell us about your experience with us at Valley Center Veterinary Clinic. Your feedback is important to us, as we will consider your recommendations to make improvements. We want to make your visit the best we possibly can! Information will be kept confidential.

DATE _____

NAME (OPTIONAL) _____

REASON FOR VISIT _____

Please rate on a scale of 1 (poor/no) to 10 (superior/yes) the following:

1. Warm welcome when you arrived Score ____
2. Was your wait time to see the doctor acceptable? Score ____
3. Doctor's thorough examination of your pet Score ____
4. Knowledge (did the doctor answer your questions?) Score ____
5. Competency (was the problem addressed or a plan made?) Score ____
6. Friendliness of staff Score ____
7. Check out experience Score ____
8. Overall satisfaction with visit Score ____
9. Would you recommend us to others? Score ____

Please indicate other areas you would like improved, or add any additional comments here:

Thank you for your time