



ORTHOPAEDIC INSTITUTE OF OHIO

PATIENT SATISFACTION SURVEY

We appreciate your business and would very much like to learn of your experience with us, good or otherwise. Please complete both sides of this form.

Name (optional): _____ Date: _____

Which physician did you see? _____ Office location? _____

1. Was your call to our office answered promptly and efficiently? Yes _____ No _____

Comments _____

2. Did we respond to you in a friendly manner? Yes _____ No _____

Comments _____

3. On your appointment day, how were you treated by the staff? _____

4. How long did you wait in our office? _____

5. Did the physician spend enough time with you answering all your questions and explaining your condition? Yes _____ No _____ Comments _____

6. How could we have made the visit more beneficial to your particular needs? _____

7. On a scale of 1 –10 (10 being the highest) please rate our staff on the day of your appointment. Please feel free to make additional comments.

Reception: _____

Clinical Staff: _____

Doctor: _____

X-ray and MRI techs: _____

Overall: _____

8. How did you hear about our office? _____

9. Would you recommend our office to others? Yes _____ No _____

Comments _____

10. Any additional comments to better serve our patients are welcomed.

Thank you for your time and cooperation. Please return this to us in the stamped envelope provided.

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Offices located:

- Lima • 801 Medical Drive • Lima, Ohio 45804 • (419) 222-6622
- VanWert • 1180 Professional Road • VanWert, Ohio 45891 • (419) 238-9764
- St. Marys • 1002 Knoxville Road • St. Marys, Ohio 45885 • (419) 394-3123
- Ottawa • 601 State Route 224 • Ottawa, Ohio 45848 • (419) 222-6622
- Coldwater • 800 West Main Street • Coldwater, Ohio 45828 • (419) 222-6622
- Kenton • 921 East Franklin Street • Kenton, Ohio 43326 • (419)222-6622
- Delphos • 1800 East Fifth Street • Delphos, Ohio 45833 • (419)222-6622
- Bluffton • 139 Garau Street • Bluffton, Ohio 45817 • (419)222-6622
- Paulding • 1035 West Wayne St, Ohio 45879 • (419)222-6622

Please visit our website at: www.orthoohio.com

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Please mail to:

ATTN: Kathy Ackerman
Orthopaedic Institute of Ohio
801 Medical Drive, Suite A
Lima, Ohio 45340