

Thank you for taking the time to complete the following questionnaire. Please circle, check, or fill in your responses. Return it in the enclosed self-addressed, stamped envelope.

What procedure(s) did you have performed during your most recent surgery?

lip lift, brow lift, liposuction flank area/back

How would you rate your final result(s)?

Excellent 10.....9.....8.....7.....6.....5.....4.....3.....2.....1 Poor

Would you recommend our practice to your friends?

Yes I have recommended to multiple people!! No Uncertain

What was the best part about your consult?

Dr. Rodriguez is very personable, extremely knowledgeable. The Staff at the facility are wonderful as well.

Why did you select Dr. Rodriguez and our office for your surgery?

Due to reputation. After 1st consult. I felt very comfortable with my decisions as Dr. Rodriguez was thorough & knowledgeable.

What else could we have done to help you prepare for your surgery?

Nothing. Everything was beyond what I had expected!!!

How was your experience with the anesthesiologist?

Wonderful!!!

Please indicate your experience in the recovery room:

Duration of recovery room time too short too long adequate (perfect)

Temperature too cold too hot adequate (perfect)

My pain management not enough adequate

Other, please explain:

Would you return to this office if you decide to have additional surgery?

I will!!! I am never going to another office!!! Yes No Uncertain

Which of the following factors influenced you to choose Dr. Rodriguez? (check all that apply)

- Reputation of doctor, Board certification, Training, Technology used, Procedures offered, Internet web page, Location of office, Phone book ad, News article/show, Print ad in, Seminar appearance, Hospital referral, Physician referral, Recommendation by friend or family, Recommendation by salon staff, Cost of surgery, Financing options, Friendly staff, Other

Were your telephone calls to our office handled to your satisfaction?

Yes No Comments:

Always professional. Very friendly which makes all the difference!

Were you satisfied with the way your surgery was scheduled?

Yes No Comments:

Very!!! I didn't have to wait.

How well do you agree with the following statements? (If any item does not apply, leave blank)

The amount of time that I had to wait to get a consultation

with Dr. Rodriguez was reasonable. Strongly Agree Agree Neutral Disagree

I was satisfied with the information and surgical description

provided by Dr. Rodriguez. Strongly Agree Agree Neutral Disagree

The office staff was attentive to my needs.

Strongly Agree Agree Neutral Disagree

The OR staff was attentive to my needs

Strongly Agree Agree Neutral Disagree

The written materials that I received prior to surgery satisfied my needs.

Strongly Agree Agree Neutral Disagree

I was satisfied with the way I was prepared for surgery.

Strongly Agree Agree Neutral Disagree

I was satisfied with the care that I received the morning of surgery.

Strongly Agree Agree Neutral Disagree

I was satisfied with my follow-up care.

Strongly Agree Agree Neutral Disagree

The fees for surgery were reasonable.

Strongly Agree Agree Neutral Disagree

Additional Comments: As a nurse I have an understanding of how medical prof. and clinics operate. This office is far above any I have ever been to or worked in. Impeccable!!! Thank you, Sincerely!

Thank you for taking the time to complete this questionnaire.

May we share your confidential comments with prospective patients?

Yes No

Would you like someone to call you regarding any of your responses?

Yes No

Name (optional) t