

Patient Satisfaction Survey

We are interested in receiving your feedback about the care provided in our office. Please take a few minutes to complete this survey and tell us how we are doing.

Which doctor did you see?: Dr. Dyal Dr. Sicherman

Please rate your agreement with these statements:

(1 Strongly Disagree; 2 Disagree; 3 Neutral; 4 Agree; 5 Strongly Agree)

:Access

1 2 3 4 5

1. I was able to schedule a convenient appointment.
2. I was able to schedule an appointment in a reasonable amount of time.

Clinical Care

1. The doctor addressed my concerns and answered my questions.
2. The doctor clearly explained my diagnosis and treatment options.
3. The doctor was caring and compassionate.
4. I would recommend the doctor to family and friends.

Staff

1. The staff was caring and compassionate.
2. The staff was helpful.

What do you like best about our practice?

What can we improve?