



Etawah Veterinary Hospital

At Etawah Veterinary Hospital, we care about our patients and clients. We strive to provide you with the best possible medical care and excellent client service in a clean and caring environment. You can help us in providing this for you and your pet by sharing your comments with us concerning your expectations regarding our Veterinarians, staff, and facility. Thank you very much for your time and thoughts.

How were you referred to our office?

- Friend
- Neighbor
- Drove By
- Yellow Pages
- Internet
- Other (please specify)

Our Landscape/Grounds are:

- Clean
- Unclean/Unkempt

Our waiting room was:

- Neat and clean
- Comfortable
- Odor-free
- Child Friendly
- Uncomfortable
- Disorderly
- Needed odor control

Our office hours are:

- Convenient
- Restrictive
- Other (please specify) _____

The Receptionist: _____ was

- Friendly and greeted you upon arrival
- Warm and cheerful
- Seemed rushed
- Unfriendly

When you telephoned:

- Your call was answered promptly
- You had trouble getting through
- You were placed on hold too long

Your phone conversation was:

- Courteous
- Informative
- Impolite
- Hurried
- I did not phone

The Technician/Assistant: _____

- Greeted you warmly
- Was gentle with your pet
- Was caring
- Listened well to my pet's symptoms
- Was knowledgeable
- Was a poor communicator

The Veterinarian: _____

- Washed his/her hands before examining my pet
- Introduced him/herself with a warm greeting
- Described the diagnosis and treatment well
- Did not seem interested in what I had to say
- Seemed rushed
- Left me confused about how to treat my pet
- Professional Acceptable Inferior
(In manner and appearance)
- Did a good job of comforting my pet
- Was able to make me feel like a friend
- Was insensitive in his/her use of people skills

Was your wait time reasonable?

- Waiting room: Yes No
- Exam room: Yes No

Did you understand your fees?

- Yes No

Did your pet board with us? If so, how was your experience with our kennel staff? _____

Why did you choose this hospital? _____

Have you recommended us to others/ will you in the future? Yes No

Please explain: _____

If you were our Practice Manager, what suggestions would you have for improving the office, staff, and/or procedures?

Any additional information that would like to share with us: _____

Would you like to be contacted? Yes No If yes: Name _____

Phone# _____