

Bartram Trail Veterinary Hospital

6751 State Road 16 St. Augustine FL32092

Tel: (904) 940-0655 Fax: (904) 940-0399 E-mail: HealthyPets@BartramTrailVets.com

At Bartram Trail Veterinary Hospital, we care about pets and their people. We wish to provide you with quality veterinary service in a modern, clean, and caring environment. You have been selected to help us in providing for you and your pet's needs by sharing your comments with us about your expectations regarding veterinary care. Once completed, you may use the self addressed return envelope to return the survey to us. Thank you very much for your time and your thoughts.

When you telephoned:

- Your call was answered promptly
- There was a long wait for someone to answer
- You had trouble getting through
- You were placed on hold too long
- OTHER: _____

Your Phone conversation was:

- Courteous
- Hurried
- Impolite
- Informative
- Preoccupied
- OTHER: _____

We were able to schedule your pet to see the doctor:

- Very Quickly
- Reasonably Quickly
- Not as soon as you had hoped
- You were not able to schedule an appointment for the day asked for
- OTHER: _____

Our Hours are:

- Convenient
- Restrictive
- Should be open more (comment) _____
- _____
- _____

Our receptionist(s):

- Greeted you promptly
- Were warm and cheerful
- Were cold or unfriendly
- Seemed indifferent or distracted
- Were hospitable
- OTHER: _____

Do you feel like your pet's physical exam was thorough?

- Yes
- No

Our Lobby was:

- Comfortable
- Neat and Clean
- Disorderly
- Odor-free
- Child friendly
- Smelly
- Uncomfortable
- OTHER: _____

How long did you wait in the lobby past your appointment time?

- 0-5 minutes
- 5-20 minutes
- 20-40 minutes
- OTHER: _____

Our Technician/Assistant

- Greeted you warmly
- Explained the procedures to be done on your pet
- Was gentle with your pet
- Communicated Poorly
- Seemed in a hurry
- Did not seem to care about your pet
- OTHER: _____

How would you rate the knowledge/competence of the assistant who helped you?

- Very Knowledgeable
- Fairly Knowledgeable
- Poorly Knowledgeable
- OTHER: _____

Do you feel that the veterinarian spent an adequate amount of time with you?

- Yes
- No
- OTHER: _____

The Veterinarian seemed:

- Attentive
- Concerned
- Friendly
- Distracted
- Rushed
- Inconsiderate
- OTHER: _____

Please rate the clarity of the veterinarian's explanation of your pet's condition

- Outstanding
- Good
- Adequate
- Needs Improvement
- Poor
- OTHER: _____

How well did your veterinarian include you in your pet's healthcare decisions?

- Outstanding
- Good
- Adequate
- Needs Improvement
- Poor
- OTHER: _____

Were your questions answered to your satisfaction?

- Yes
- No
- OTHER: _____

Would you recommend this facility and its staff to your family and friends?

- Yes
- No
- OTHER: _____

Additional Feedback

Please list any areas in which our service could be improved _____

Please share any additional comments _____

Would you like to be contacted regarding this Survey?

- Yes
- No

If yes, please fill out the following so we may contact you:

Name: _____ Phone: _____