



## CLIENT SURVEY

*Lyne Animal Hospitals* has been serving the Chesterfield County community for nearly 40 years. As part of our on-going commitment to being your family's full-service pet doctors we are constantly evaluating our services, training and professionalism. We need your feedback in this assessment as well. By taking a few minutes to fill out this form, you can help us determine how to best meet your needs. Thank you for participating and taking the time to answer some of our questions.

**Please choose one of the following hospitals:**



Chester



Courthouse Rd

**Name:**

**Pet's Name:**

**Date/Approximate Date of Visit:**

**Was this your first visit with us?**      Yes      No

**How did you learn about our services?**

**Doctor that you saw for your appointment:**

**Please rate the following areas (click the appropriate button)**

<b>Was your appointment at a time convenient to you and easy to schedule?</b>		Yes	Adequate	No	
<b>Professionalism on the phone</b>	Exceptional	Better than expected	Satisfactory	Okay, but could be improved	Unacceptable
<b>The ability of our associate to address all of your questions while setting your appointment?</b>	Exceptional	Better than expected	Satisfactory	Okay, but could be improved	Unacceptable
<b>Were you able to find us easily?</b>		Yes	Adequate	No	
<b>When you arrived at our office were you greeted immediately upon arrival?</b>		Yes	Adequate	No	
<b>Manner in which you were greeted</b>	Exceptional	Better than expected	Satisfactory	Okay, but could be improved	Unacceptable
<b>Overall appearance of our hospital?</b> (this would include signage, landscaping, building and parking lot)	Exceptional	Better than expected	Satisfactory	Okay, but could be improved	Unacceptable
<b>Impression of our lobby</b> (consider any odors, cleanliness, and overall appearance)	Exceptional	Better than expected	Satisfactory	Okay, but could be improved	Unacceptable
<b>Appearance of the exam room you were in</b> (consider odors, cleanliness, and overall appearance)	Exceptional	Better than expected	Satisfactory	Okay, but could be improved	Unacceptable
<b>Overall cleanliness of hospital</b>	Exceptional	Better than expected	Satisfactory	Okay, but could be improved	Unacceptable
<b>Courtesy and respect I received during your visit from the doctor(s)</b>	Exceptional	Better than expected	Satisfactory	Okay, but could be improved	Unacceptable
<b>Courtesy and respect I received during your visit from our staff</b>	Exceptional	Better than expected	Satisfactory	Okay, but could be improved	Unacceptable



<b>Knowledge and expertise of doctor(s)</b>	Exceptional	Better than expected	Satisfactory	Okay, but could be improved	Unacceptable
<b>Knowledge and expertise of staff</b>	Exceptional	Better than expected	Satisfactory	Okay, but could be improved	Unacceptable
<b>The doctor's ability to communicate my pet's health status/prognosis</b>	Exceptional	Better than expected	Satisfactory	Okay, but could be improved	Unacceptable
<b>Reasonable fees for services / supplies</b>	Exceptional	Better than expected	Satisfactory	Okay, but could be improved	Unacceptable
<b>Overall experience</b>	Exceptional	Better than expected	Satisfactory	Okay, but could be improved	Unacceptable
<b>Overall ability to address your pet care needs</b>	Exceptional	Better than expected	Satisfactory	Okay, but could be improved	Unacceptable

**If your pet was hospitalized, were you provided a written estimate?**      Yes      No

**The reason for your pet's visit was:**

**How likely are you to recommend this hospital to a friend or relative?**

**Was there a particular employee that you would like to recognize for outstanding service during your visit?**

**As always we welcome any additional comments that you might have about your experience:**

**Would you like to talk with our Office Manager further about your visit?**      Yes      No

**If you would like our Office Manager to contact you, please provide us with the following information: your name, best time to contact you, phone number, pet's name and date of your last visit.**