Little Flower Dental

Clinic

279 East Main Street

Hazard, KY 41701

How can we improve?

**Please take a moment to help us improve your experience at Little Flower Dental Clinic. When you're done, please give the questionnaire to the receptionist at the end of the visit.**

1. Is it easy to make an appointment?

* Yes
* No
* Unsure

1. Was the dentist professional and courteous?

* Yes
* No
* Unsure

1. Was the dental hygienist professional and courteous?

* Yes
* No
* Unsure

1. Was the dental assistant professional and courteous?

* Yes
* No
* Unsure

1. Were other office personnel courteous and helpful?

* Yes
* No
* Unsure

1. Were all your questions answered?

* Yes
* No
* Unsure

1. Was your dental treatment completed efficiently and in a timely manner?

* Yes
* No
* Unsure

1. Were you pleased with the quality of your dental treatment?

* Yes
* No
* Unsure

1. In an emergency, is it easy for you to get in touch with our office?

* Yes
* No
* Unsure

1. Did you receive a reminder of each of your appointments?

* Yes
* No
* Unsure

1. Were appointments given that suited your schedule?

* Yes
* No
* Unsure

1. Was the office and instruments clean and comfortable to your satisfaction?

* Yes
* No
* Unsure

Would you have any suggestions that you feel would better serve our patients?

*Thank you for taking your time* to *complete our survey we look forward to providing you with all your dental needs in the future.*

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