

CLIENT SURVEY

Our mission is to maintain a dedicated, caring and knowledgeable team committed to providing exceptional client services and veterinary healthcare. We strive toward this excellence through continuing educations, technical advances and our clients' feedback.

You can help us reach and maintain this level of services by sharing your veterinary experience with us at Woods End Equine. By completing this client survey, we assure that your comments will be discussed and acted upon. Thank you for your time and effort.

(Please Note: Your privacy is 100% assured.)

How Did You Choose our Hospital? _____

Were You Happy With Your Telephone Experience? ____ YES ____ NO

Is There Anything We could Have Done Better? _____

Your Impression of our website: (Please select the following boxes. You may choose more than one):

- Helpful** **Messy** **Neat** **Convenient** **Messy** **Organized** **Unorganized**
- Easy to Navigate** **Difficult to Navigate** **Other**

If Other Please Specify: _____

Your Impression of our Technician:

- | | |
|-------------------------------------|--------------------|
| Introduced himself/herself | _____ YES _____ NO |
| Seemed proficient and knowledgeable | _____ YES _____ NO |
| Gave me the information I needed | _____ YES _____ NO |

Behaved professional in manner and appearance _____YES_____NO
Your Impression of our Veterinarian:
Introduced himself/herself _____YES_____NO
Listen to what I said and answered my questions _____YES_____NO
Gave clear advice about how to treat my horse _____YES_____NO
Behaved professional in manner and appearance _____YES_____NO
Made me feel Valued _____YES_____NO

Additional Questions:

Was the scheduling time reasonable _____YES_____NO
Do you feel the fees are reasonable _____YES_____NO
Did you understand all of our fees _____YES_____NO

If you marked "NO" please explain: _____

Will you recommend us to others? _____YES_____NO

Why or Why not? _____

What suggestions do you have for improving the office, staff, or visits?

If you would like us to contact you, please fill out the necessary information

Name: _____

Email: _____

Phone: _____