

Patient Questionnaire

Dear Patient,

Thank you for visiting us. By filling out this quick 5-10 minute survey, you will help us to provide better care in future.

1 Gender?

Male

Female

2 Age?

Under
60

61+

18

18-30

31-45

46-

3 Race / Ethnicity?

Asian

African American

American

Indian/Alaska

NativeCaucasion

Hispanic or Latino

Other

100 characters remaining

4 How would you rate the speed of care given?

Excellent

Good

Fair

Poor

Time in waiting room

Time in exam room

Waiting for tests to be performed