

Thank you for taking the time to complete the following questionnaire. **Please circle, check, or fill in your responses.**

Return it in the enclosed self-addressed, stamped envelope.

What procedure(s) did you have performed during your most recent surgery?

Tummy tuck

How would you rate your final result(s)? Excellent 10 9..... 8..... 7..... 65..... 4..... 3..... 2..... 1 Poor
I'll let you know; so far, so good!

Would you recommend our practice to your friends? Yes No Uncertain

What did you especially like about the way you were treated in your most recent surgery with us?

From my first phone call to Charlene, who worked so hard to fit me in, to her working with the nurse and Dr. Patel on such short notice. Your office is so well organized and nice, that it is a pleasure to come in. Dr. Gerlach is not only a great surgeon, but he is extremely nice.

Is there anything that you did not like?

No

Do you have any suggestions for improvement?

You and Charlene need name plates for yor desk. (for those of us who can't remember names!)

Why did you select our office for your surgery?

I loved the fact that it is so close to home, but when I asked Charlene some ethical questions, she answered in an honest, diplomatic way that truly impressed me.

Would you return to this office if you decide to have additional surgery? Yes No Uncertain

Which of the following factors influenced you to choose Dr. Gerlach?
(check all that apply)

- | | | |
|---|--|---|
| <input type="checkbox"/> Reputation of doctor | <input type="checkbox"/> Phone book ad | <input type="checkbox"/> Recommendation by friend or family |
| <input checked="" type="checkbox"/> Board certification, Training | <input type="checkbox"/> News article/show | <input type="checkbox"/> Recommendation by salon staff |
| <input type="checkbox"/> Technology used | <input type="checkbox"/> Print ad in: _____ | <input checked="" type="checkbox"/> Cost of surgery |
| <input type="checkbox"/> Procedures offered | <input type="checkbox"/> Seminar appearance | <input type="checkbox"/> Financing options |
| <input type="checkbox"/> Internet web page | <input type="checkbox"/> Hospital referral | <input checked="" type="checkbox"/> <u>Friendly staff</u> <i>Makes a huge difference!</i> |
| <input checked="" type="checkbox"/> Location of office | <input checked="" type="checkbox"/> Physician referral | <input type="checkbox"/> Other: _____ |

Were your telephone calls to our office handled to your satisfaction?

Yes No Comments:

1942

1. General
2. Particulars
3. Summary
4. Remarks

1. General
2. Particulars
3. Summary
4. Remarks

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2. Particulars
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Were you satisfied with the way your surgery was scheduled?

Yes

No

Comments:

Yes, as I stated previously, your office was wonderful ^{working} with my schedule.

Were you satisfied with the way you were treated by the office staff?

Yes

No

Comments:

Were you satisfied with the way you were treated by Dr. Gerlach during your consultation?

Yes

No

Comments:

How well do you agree with the following statements? (If any item does not apply, leave blank)

The office is attractive and comfortable. Strongly Agree Agree Neutral Disagree

The amount of time that I had to wait to get a consultation
with Dr. Gerlach was reasonable. Strongly Agree Agree Neutral Disagree

I was satisfied with the information and surgical description
provided by Dr. Gerlach. Strongly Agree Agree Neutral Disagree

The office staff was attentive to my needs. Strongly Agree Agree Neutral Disagree

The written materials that I received prior to surgery satisfied my needs. Strongly Agree Agree Neutral Disagree

I was satisfied with the way I was prepared for surgery. Strongly Agree Agree Neutral Disagree

I was satisfied with the care that I received the morning of surgery. Strongly Agree Agree Neutral Disagree

I was satisfied with where I had my surgery. Strongly Agree Agree Neutral Disagree

I was satisfied with my follow-up care. Strongly Agree Agree Neutral Disagree

The fees for surgery were reasonable. Strongly Agree Agree Neutral Disagree