

# SportsMedicine Partners, P.C.

*We dedicate ourselves to providing quality patient care.*

---

---

Please take a moment to rate our service during your visit.  
Today's Date: \_\_\_\_\_

---

---

- |                      |   |
|----------------------|---|
| <b>1 = Poor</b>      | <b>We did not meet your minimum expectations.</b>         |
| <b>2 = Fair</b>      | <b>We came close, but did not meet your expectations.</b> |
| <b>3 = Good</b>      | <b>We met your expectations.</b>                          |
| <b>4 = Excellent</b> | <b>We “knocked your socks off”.</b>                       |

How would you rate the overall friendliness of our staff members today?

How quickly did you get an appointment?

How would you rate the quality of the care you received today?

How would you rate the overall cleanliness of our office?

How would you rate your overall experience today?

How likely are you to recommend SPORT to a friend/neighbor?

---

---

Which of our physician's did you see today? \_\_\_\_\_

What town are you from? \_\_\_\_\_

Is there a particular SPORT team member who “knocked your socks off” with service?

**Who:** \_\_\_\_\_

**Why:** \_\_\_\_\_

How did you hear about SPORT?

- Google/Web       Friend/Family       Yellow Pages       Newspaper Ad       Magazine  
 Hospital Referral       Dr. Referral (name) \_\_\_\_\_

What did we do **well** today?

---

What can **we strive to do better** in the future?

---

Email (optional – We may have a quarterly newsletter in the future)

---

---

*In a world full of choices, “Thank You” for choosing us for your care.*

[www.sportsmedpartners.com](http://www.sportsmedpartners.com)