



We hope that you had a comfortable and pleasant experience in our office.
 We would greatly appreciate it if you would take a moment to share your impressions of our practice.

“Striving for Excellence”

	Excellent	Good	Fair	Poor
1. Your overall experience in our office	_____	_____	_____	_____
2. Flexibility in arranging appointments	_____	_____	_____	_____
3. Handling of your telephone calls	_____	_____	_____	_____
4. Explanation of treatment procedures	_____	_____	_____	_____
5. Our respect for your time	_____	_____	_____	_____
6. Courtesy and concern of Front Office/ Business Staff	_____	_____	_____	_____
7. Courtesy and concern of chair side assistant	_____	_____	_____	_____
8. Courtesy and concern of Dr. Mioduski, Jr.	_____	_____	_____	_____
9. Courtesy and concern of Dr. Ferrara	_____	_____	_____	_____
10. Courtesy and concern of Dr. Mioduski, III	_____	_____	_____	_____
11. Courtesy and concern of hygienist	_____	_____	_____	_____
12. Professionalism and gentleness of chair side assistant	_____	_____	_____	_____
13. Professionalism and gentleness of hygienist	_____	_____	_____	_____
14. Professionalism and gentleness of Dr. Mioduski, Jr.	_____	_____	_____	_____
15. Professionalism and gentleness of Dr. Ferrara	_____	_____	_____	_____
16. Professionalism and gentleness of Dr. Mioduski, III	_____	_____	_____	_____
17. Appearance of the reception area	_____	_____	_____	_____
18. Appearance of the treatment area	_____	_____	_____	_____
19. Our response and attentiveness to your concerns	_____	_____	_____	_____
20. Quality of information received prior to your first visit	_____	_____	_____	_____
21. How long have you been a patient in our practice?	_____	_____	_____	_____
22. Would you refer others to our office?		YES	NO	
23. Do you know our office provides comprehensive general dentistry?		YES	NO	
24. Do you have any comments that would help us improve our service to you?				

We truly appreciate your honesty and time in completing this confidential survey. We also welcome the opportunity to discuss your responses. If you wish to be contacted, please include your name and number above. Thank you.

Sincerely,
 Ted E. Mioduski, Jr., D.D.S., P.C.
 Nicole M. Ferrara, D.D.S., P.C.
 Ted E. Mioduski, III, D.D.S., P.C.