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Patient Satisfaction Survey:
"The Endoscopy Experience"

Dear Patient;

Please respond to the following questionnaire and mail it or fax it back to me. My staff and I strive constantly to improve our performance. Your input will be highly valued:

1.The endoscopic procedure was scheduled because (please circle applicable statements):

a. I have a family history of colon cancer or colon polyps b. I am having symptoms c. I was worried about cancer

2.The staff in Dr. Balaa's office were professional, courteous, and responsive

0 1 2 3 4 5
Strongly Disagree Strongly Agree

3. I was provided with sufficient explanation to lessen my anxiety about the procedure.

0 1 2 3 4 5
Strongly Disagree Strongly Agree

4. I will recommend Dr. Balaa and his staff to friends and family

0 1 2 3 4 5
Strongly Disagree Strongly Agree

5. The nurses in the endoscopy center were professional, courteous and responsive

0 1 2 3 4 5
Strongly Disagree Strongly Agree

6. The procedure was free of significant discomfort

0 1 2 3 4 5
Strongly Disagree Strongly Agree

7. The whole experience was worthwhile

0 1 2 3 4 5
Strongly Disagree Strongly Agree

Comments /Suggestions:

_____

_____

_____

Name (optional): _____.

Thank You
Marwan A. Balaa MD, FACG