



Patient Satisfaction Survey - Dental

Thank you for taking the time to complete this survey. Your feedback is important to us. Please complete this survey and let us know how we are doing and/or how can improve to better meet your healthcare needs. Thank you for choosing Sacred Circle Healthcare.

1. How likely is it that you would recommend our dental provider(s) at Sacred Circle Healthcare to a friend or family member?

- Very likely
- Somewhat likely
- Not likely

2. How satisfied were you with the scheduling process for dental services at Sacred Circle Healthcare?

- Very satisfied
- Somewhat satisfied
- Not satisfied

3. Overall, how would you rate the service you received from the dental staff at Sacred Circle Healthcare?

- Excellent
- Very good
- Good
- Fair
- Poor

4. Overall, how satisfied were you with the amount of time your dental provider spent with you addressing your needs?

- Very satisfied
- Somewhat satisfied
- Not satisfied

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5. How would you rate the care you received from your dental provider?

- Excellent
- Very good
- Good
- Fair
- Poor

6. Did you have confidence and trust in your dental provider?

- Very much so
- Somewhat
- Not at all

7. In the last 12 months, when you have phoned our office, did you get a response within 24 hours?

- Always
- Sometimes
- Usually
- Never

8. Do you have any other comments, questions, or concerns?