

## CLINIC SERVICES SATISFACTION SURVEY

We are interested in your opinions about **your visit today** and about the care you received from the health professionals (the doctors and nurses) and staff. Please rate each of the following things about this visit. (Mark one answer for each item).

	<u>Not at all satisfied</u>	<u>Somewhat satisfied</u>	<u>Satisfied</u>	<u>Very satisfied</u>	<u>Extremely satisfied</u>
a The courtesy of the staff	○	○	○	○	○
b The staff's flexibility in scheduling my appointment around my needs	○	○	○	○	○
c Privacy when talking with staff or health professionals	○	○	○	○	○
d The amount of time I spent in the waiting room today	○	○	○	○	○
e The amount of time I had to talk with my abortion provider	○	○	○	○	○
f My abortion provider's ability to answer questions in a sensitive and caring way	○	○	○	○	○
g My abortion provider's ability to explain things clearly	○	○	○	○	○
h My abortion provider's ability to help me feel comfortable talking about my concerns	○	○	○	○	○
i The chance to ask all of my questions	○	○	○	○	○
j My abortion provider's willingness to explain different options for my care	○	○	○	○	○
k My abortion provider's effort to make my medical services as comfortable as possible	○	○	○	○	○

Do you have any suggestions for us?