

2751 Debarr Road, Suite 280 Anchorage, AK 99508 (907) 222-1401

How Are We Doing?

As patient satisfaction is very important to us, please take a few minutes to fill out this survey on the timeliness and quality of the service you received at our office. Alaska Colorectal Surgery welcomes your feedback and your answers will be kept confidential. Thank you for your participation.

Please circle the number that best reflects the level of customer service or you feel you received within our office.

Instant Access/Colono	scopy	y Sch	edul	ing			1	= Poo	r	5= Fair	10= Exceller
How would you rate the ins achieve colon cancer screen			prog	ram th	nat of	fers a	strea	mline	ed pro	ocess for b	usy patients to
	1	2	3	4	5	6	7	8	9	10	
How would you rate your ove	rall in	teracti	ion wi	th the S	Surge	ry Sch	edule	r?			
	1	2	3	4	5	6	7	8	9	10	
Was your colonoscopy schedu	led at	the da	ıte/tim	ie you i	reque	sted?					
		0			0 0						
	Y	Yes		No	No N/		/ A				
How would you rate the comp	etence	e of the	e Surg	ery Sc	hedul	er wh	o help	ed you	1?		
	1	2	3	4	5	6	7	8	9	10	
Were your questions answe	ered to	your	· satis	faction	n?						
		0		0		0					
	Y	Yes		No		N/A					

Additional Feedback						
Please list any areas in which our service could be impr	oved:					
Please share any additional comments:						
Personal Information						
Would you like someone to contact you regarding	ng vous soon	onses on this surviva				
o	o o	onses on this survey:				
Yes	No					
PHONE NUMBER: ()					

Thank you for taking the time to fill out our survey.
We rely on your feedback to help us improve our services.
Your input is greatly appreciated!