



Colonial Veterinary Hospital

Referral pertained to – please circle:

Surgery, Oncology, Acupuncture, Radiology, Cardiology, Internal Medicine, or Emergency Services

(If you called regarding this referral)

Comment

My call was answered promptly	Yes	No	N/A
Telephone staff were polite and helpful	Yes	No	N/A
I was able to speak to a veterinarian	Yes	No	N/A
My questions were answered to my satisfaction	Yes	No	N/A
I was able to get my patient in for a timely appointment	Yes	No	N/A

I felt my patient was in good hands

Yes No

My client felt value in the services they received

Yes No

I was kept well informed on the case

Yes No

Instructions were clearly communicated with my client

Yes No

I received a referral letter promptly

Yes No

Any questions I had after my patient was released were satisfactorily answered.

Yes No

How likely would you be to refer to us again 1 not likely – 10 definitely

1 2 3 4 5 6 7 8 9 10

What degree of medical care did you feel your patient received 1 is poor 10 = outstanding

1 2 3 4 5 6 7 8 9 10

We would love to hear more, if you would like to continue, see other side

What did you like most about partnering with Colonial Veterinary Hospital to help your patient?

What was the main reason you chose to refer to Colonial Veterinary Hospital?

How do you feel we could improve?

Any other comments?

Your name and Practice

Patient/Client information: