GUIDELINE
Communicating Effectively With Patients to Improve Quality and Safety
## CONTENTS

**INTRODUCTION** .................................................................................................................. 1  
**OBJECTIVES** ..................................................................................................................... 1  
**THE IMPACT OF COMMUNICATION FAILURES** ............................................................ 1  
**COMMITTING TO QUALITY SERVICE AND PATIENT SATISFACTION** ...... 2  
**MAKING A POSITIVE IMPRESSION** .................................................................................. 3  
  - **During Patient Triage** .................................................................................................. 3  
  - **During Patient Encounters** ...................................................................................... 3  
    - **Remember Common Courtesies** .......................................................................... 4  
    - **Maintain Awareness of Nonverbal Communication** ............................................ 4  
    - **Create an Open Dialogue and Listen** .................................................................... 5  
    - **Ensure Comprehension** ....................................................................................... 6  
**ENGAGING PATIENTS WITH SATISFACTION SURVEYS** ............................................. 7  
**DEVELOPING POLICIES AND STANDARDS FOR TELEPHONE AND ELECTRONIC COMMUNICATION** .................................................................................................................. 7  
  - **Telephone Communication** ........................................................................................ 7  
    - **Establishing Phone Communication Protocols** ..................................................... 8  
    - **Giving and Receiving Information** .......................................................................... 8  
    - **Using an Answering Service** .................................................................................. 9  
    - **Documenting Telephone Communication** .............................................................. 9  
    - **Monitoring Trends** ............................................................................................... 9  
  - **Electronic Communication** ........................................................................................ 9  
    - **Defining Acceptable Uses for Electronic Communication** .................................... 10  
    - **Determining Appropriate Users** .......................................................................... 10
INTRODUCTION

Effectively communicating healthcare information is one of the most important aspects of the provider–patient relationship. When communication lapses occur in healthcare, they can be detrimental in various ways. Patients who do not understand healthcare information and instructions might not adhere to their treatment plans or might have unrealistic expectations about the outcomes of care. As a result, healthcare providers may struggle to engage patients in their care and build meaningful patient relationships, which could potentially increase liability exposure.

Healthcare providers and staff need to be cognizant of both how and what they communicate to ensure that patients thoroughly comprehend their diagnoses, treatment plans, care instructions, and other pertinent information.

Proactive strategies to commit to quality services and a patient-centered culture, make a positive impression, measure and improve patient satisfaction, and efficiently manage patient complaints can help clinicians and staff build a strong partnership with patients. These strategies also may reduce the likelihood of miscommunication and preventable adverse events.

OBJECTIVES

The objectives of this guideline are to:

- Review the impact of communication failures
- Discuss key elements of a service-oriented culture and how to promote effective communication
- Discuss methods of making a positive impression during patient encounters
- Describe actions that demonstrate a commitment to patient satisfaction
- Discuss strategies for developing electronic and telephone communication policies
- Outline effective strategies for managing patient complaints
- Provide information related to communicating an unanticipated outcome

THE IMPACT OF COMMUNICATION FAILURES

Research indicates that ineffective communication among healthcare professionals is one of the leading causes of medical errors and patient harm.1 In 2015, CRICO Strategies released a report that presented the results from an analysis of more than 23,000 malpractice claims and suits filed between 2009 and 2013. CRICO’s data showed that communication failures were a factor in 30 percent of these cases; further, 37 percent of all high-severity cases involved a communication failure.2
In response to CRICO’s report, an article in *STAT Health* noted a staggering statistic — that “hospitals and physicians’ offices nationwide might have avoided nearly 2,000 patient deaths — and $1.7 billion in malpractice costs — if medical staff and patients communicated better . . .”\(^3\)

CRICO’s data also showed that malpractice cases involving a communication breakdown closed with an indemnity payment more frequently than other cases, and those payments exceeded the overall average indemnity for all cases.\(^4\)

These data speak to the significance of communication’s impact in healthcare and the need for healthcare providers and staff to include communication as part of quality improvement and patient safety initiatives.

**COMMITTING TO QUALITY SERVICE AND PATIENT SATISFACTION**

Creating and maintaining a service-oriented culture, which focuses on providing exemplary customer service and quality patient care, is an important strategy for reducing the risk of communication failures that could potentially lead to patient complaints, errors, and even liability exposure.

Good customer service is the foundation for patient satisfaction and the basis for engaging patients in the shared responsibility of their healthcare. Promoting a service mindset requires:

- Leadership involvement to convey the message that the healthcare practice is committed to service excellence
- A mission statement that reflects the importance of patient satisfaction
- Policies that outline expected behaviors and mechanisms to achieve the mission (e.g., use of patient satisfaction surveys and techniques for handling complaints)
- Involvement of all staff in setting priorities and working toward improving the practice’s level of service
- A retaliation-free environment in which staff members can speak up and hold each other accountable to the practice’s mission and goals
- Measurement of patient engagement indicators in a formal quality improvement process, and sharing of results with the practice’s providers and staff on a regular basis
- Recognition of staff for outstanding customer service

Good customer service is the foundation for patient satisfaction and the basis for engaging patients in the shared responsibility of their healthcare.”
Actions that demonstrate a commitment to patient satisfaction include:

- Treating all patients in a courteous manner at all times without exception (e.g., in-person, over the phone, and via electronic communication)
- Offering timely access to appointments and provider advice, as needed
- Providing adequate time during each patient encounter for the patient to explain his/her reason for visiting without feeling rushed
- Monitoring patient wait times, frequently updating patients regarding delays, and providing the option to reschedule when a delay is longer than 30 minutes
- Respecting patients’ modesty, dignity, cultural preferences, and confidentiality
- Continuously soliciting feedback on patient satisfaction, and conducting formal patient satisfaction surveys
- Addressing patient complaints promptly on a case-by-case basis
- Analyzing any trends in patient complaints and applying corrective actions to improve service

MAKING A POSITIVE IMPRESSION

During Patient Triage

Patients’ initial interactions with healthcare practices often occur when they schedule appointments. Scheduling that is responsive to patients’ needs and takes into account their specific circumstances can help establish a positive impression of the practice.

In healthcare practices, scheduling should adhere to standard written procedures that use the following criteria (modified as necessary):

- **Emergency care**: life-threatening conditions that require immediate referral to an emergency department
- **Urgent care**: conditions that require attention the same day
- **Routine care**: nonurgent conditions that require a timely appointment in the near future
- **Preventive care**: physical examinations and similar services that require a visit within a reasonable period of time

During Patient Encounters

Several patient-centered techniques can enhance communication with patients and convey a positive impression during patient encounters. The term “patient-centered” refers to healthcare approaches that are responsive to patient needs, perspectives, and
values.\textsuperscript{5} The following sections offer strategies for improving communication during patient encounters and providing a positive, patient-centered approach.

\textit{Remember Common Courtesies}

Common courtesy generally is an expectation in professional interactions, including healthcare services, and it can create a good impression with patients. Examples of common courtesy include the following:

- The practice’s reception staff greets patients with direct eye contact and a smile when they arrive.
- Reception staff monitors the waiting room to identify patients who might have questions or need assistance.
- The practice’s answering service follows the same rules of courtesy as expected from the staff. (A call to the service can help ensure that this same courtesy is being extended.)
- Healthcare providers briefly review patients’ health records and any notes for the visit before entering the room so they can maintain eye contact with the patient in the first minutes of the appointment instead of looking at the paper or electronic record.
- Providers knock before entering examination rooms.
- Providers greet patients and introduce themselves if needed.
- Providers address patients by their titles and last names (e.g., Mr., Ms., Mrs.) when the patients are new to the practice or unfamiliar.
- Providers ask patients for input and concerns regarding their treatment plans.

\textit{Maintain Awareness of Nonverbal Communication}

Effective verbal communication is vital to successful personal and professional relationships. However, good nonverbal communication — facial expressions, gestures, eye contact, posture, and tone of voice — also is essential. Research suggests that the majority of daily communication is nonverbal, which stresses the importance that this aspect of communication plays in human interactions.\textsuperscript{6}

The ability to understand and use nonverbal communication, or body language, is a powerful tool that can help healthcare professionals connect with patients in a positive way and reinforce mutual understanding and respect.\textsuperscript{7}
Providers should have situational awareness of their nonverbal communication, so they can recognize potentially problematic body language and consciously change it. For example, certain situations might trigger negative nonverbal reactions, such as seeing a difficult patient, managing a patient complaint, or dealing with stress. Preparation and awareness can help providers control and direct their nonverbal behaviors.

A number of strategies can help healthcare providers consciously improve nonverbal communication. For example:

- Smile and maintain appropriate eye contact, but do not stare.
- Show interest in what the patient is saying and avoid tapping your fingers, gazing out of the window, looking at the clock, yawning, and other nonverbal actions that might indicate that you’re bored or in a hurry.
- Sit when you can and lean forward to show that you’re engaged. Don’t stand looking down on the patient in a paternalistic stance.
- Nod your head to show you are listening.
- Avoid a judgmental or disapproving attitude, and encourage the patient to share relevant and complete information.

Research suggests that the majority of daily communication is nonverbal, which stresses the importance that this aspect of communication plays in human interactions.”

Create an Open Dialogue and Listen

A patient-centered approach seeks to get patients more involved in their care. Providers can foster this partnership by allowing adequate time for dialogue and taking the time to understand the patient’s concerns and point of view.

For example, healthcare providers can take a patient-centered approach by:

- Determining what each patient hopes to get from the visit
- Listening to patients and letting them speak without interrupting
- Repeating important information back to the patient after he/she has finished describing the chief complaint or reason for the visit

Additionally, asking patient open-ended questions — that is, questions that require a detailed answer rather than a yes/no response — can help generate an open dialogue and support greater understanding between the provider and patient.
Ensure Comprehension

Health information and services often are unfamiliar, complicated, and technical, even for people who have higher levels of education. Taking steps to ensure that patients understand information is a critical component of effective communication.

Consider providing patients with a welcome brochure as they arrive at the front desk to sign in for appointments. Staff can instruct patients to review the information in the brochure and encourage them to ask questions during their visit. Adding a “notes” page to the brochure can prompt patients to document any questions they have prior to the appointment.

Other strategies for ensuring patient comprehension include the following:

- Involve patients’ families and significant others in the patients’ care (with permission).
- Use lay language and explain medical terms when communicating with patients verbally. Explain to patients why the information is important.
- Don’t overload patients with information. Focus on the most critical points and the necessary actions that patients should take.
- Present information in a simple, organized way; discuss the most important information first.
- Ensure that patient education materials are written in plain language. Healthcare practices that are conscientious about developing or using easy-to-read materials may increase the likelihood that patients will understand and use the information correctly.
- Allow time for questions at the end of each patient encounter and restate information as needed.
- Ensure that the dialogue is sufficiently comprehensive to give patients a full understanding of their conditions and treatment plans. Always confirm that patients understand their treatment plans. The teach-back technique is a helpful method for gauging patient comprehension. This technique involves asking
patients to explain their diagnoses, medications, and care instructions in their own words.

- Carefully consider whether cultural beliefs, values, or practices might influence interactions with certain patients.

- Provide comprehensive language access services and assistive technologies to meet the needs of diverse patient communities. (Note: Healthcare practices that receive federal financial assistance and/or funding are generally responsible for providing auxiliary aids or other service accommodations at no cost to the patient.)

- Provide written instructions for follow-up care. If using paper records, be sure to document discharge instructions or make a copy for the record.

ENGAGING PATIENTS WITH SATISFACTION SURVEYS

Satisfaction surveys can help gauge patients’ perceptions of a healthcare practice’s services and functions. These surveys also are an invaluable means for improving communication between providers/staff and patients.

One effective method of distributing surveys in the office setting is at the reception desk. Staff can encourage patients to drop their anonymous, completed questionnaires in a designated box before leaving. Once the results are compiled, the department leader or practice manager should consider reviewing the results with the entire staff. Sharing this information demonstrates that the healthcare practice takes patient engagement and satisfaction seriously.

Continually gauging patients’ satisfaction and implementing quality improvement initiatives will help improve the overall healthcare experience and may reduce the risk of litigation. For a sample patient satisfaction survey, see Appendix A.

DEVELOPING POLICIES AND STANDARDS FOR TELEPHONE AND ELECTRONIC COMMUNICATION

Telephone Communication

Telephone communication is a routine but significant component of every healthcare practice. A patient’s first and lasting impression of a practice is often from a telephone call. All staff members should be instructed to regard telephone calls as an opportunity
to provide patients with good service and to obtain important information. The following strategies are intended to help healthcare practices develop well-defined telephone policies and approaches.

**Establishing Phone Communication Protocols**

- Train all office staff in telephone etiquette, including how to handle angry or dissatisfied patients.
- Ensure that automatic menu prompts offer callers the option of speaking with a person.
- Try to answer the telephone by the third ring and monitor calls that are put on hold. Allow callers to speak first, and ask for and get permission to place them on hold.
- For automatic call distribution systems, limit the menu selections to four or five at most. Consider whether the healthcare providers in the practice serve as primary care providers for some or all of the patients. If so, the first message should include instructions for these patients, such as “If this is an emergency, dial 911 or go to the nearest emergency department immediately.”
- Conduct telephone conversations out of the hearing range of patients to protect the caller’s privacy.
- Install additional phone lines if all lines are frequently in use or chronically busy.
- Ensure that after-hours phone messages refer urgent questions/information to the emergency department.

**Giving and Receiving Information**

- Have staff obtain the caller’s phone number and confirm identifying patient information.
- When a return call is required, staff should ask the caller what time he/she will be available, and give an approximate time for the return call. The call should be returned as promised. This assurance and prompt follow-up reinforces respect for the patient’s time and concerns.
- Develop a telephone advice protocol manual for staff members who are authorized to give telephone advice. The manual should address areas such as handling routine questions and doing telephone assessments, and it should include triggers for referring the patient to a provider when necessary. Monitor staff compliance with the protocol. Document any phone advice in the patient’s health record.
Using an Answering Service

- Use a reliable answering service during off-hours. Place test calls regularly to assess the quality of the service. Provide the service with an emergency number in the event that the provider on call cannot be reached.
- Request a log of calls from the service to review for appropriate disposition and referral.
- Implement a process to promptly retrieve, document, and respond to off-hours calls if an answering service is not used.
- Develop a policy and procedure for handling phoned-in lab reports; the policy should include how critical values should be relayed to the provider.

Documenting Telephone Communication

- Document every telephone conversation with a patient or family member in the patient’s health record, including date, time, caller’s name, complaint, and advice given.
- Document all telephone calls with other providers. A high risk of communication failure exists during patient handoffs and care transitions.
- Maintain a copy of the practice’s appointment schedules for as long as health records are maintained.

Monitoring Trends

Consider keeping a log of categories of calls received such as scheduling, test results, prescription refills, etc., as a way to identify protocols possibly needing revision or opportunities for improvement in managing telephone communications.

Electronic Communication

Electronic communication in healthcare has made a significant leap in recent years through the use of email, patient portals, and social media. With the increased prevalence of smartphones, tablets, and other mobile devices, healthcare professionals have more opportunities to access and send information from anywhere that a cellular signal or wireless network exists.

As electronic communication has gained momentum, it has shown to be beneficial in a number of ways. For example, electronic communication may:

- Increase practice efficiency and productivity, and decrease costs
- Reduce the number of unnecessary patient visits to the office
- Offer patients a more convenient method for reaching their healthcare providers
• Allow providers ample time to respond to patients’ questions and communicate when it is most convenient for them
• Facilitate healthcare practices’ efforts to raise awareness, provide education, and promote services

However, with the new opportunities in electronic communication come new risks for providers to consider, such as privacy and security, professional boundaries, and duty to care. Healthcare practices that use or plan to use electronic communication methods should develop written policies and guidelines to standardize their approaches to this form of communication and address potential risks.

General considerations for policy development include defining acceptable uses and boundaries for electronic communication, determining appropriate users, establishing timeframes for responding to electronic inquiries, developing standard disclaimers, specifying privacy/security features and limitations, and establishing documentation guidelines.

**Defining Acceptable Uses for Electronic Communication**

Healthcare practices should consider limiting the use of electronic communication to nonemergent situations. Further, practices should think about the types of services and information that are suitable for electronic interactions (e.g., prescription refills, appointments scheduling, and general questions), as well as the sensitivity of the subject matter (e.g., information related to sexually transmitted diseases, mental health status, etc.).

Each practice’s written policy for electronic communication should delineate the appropriate uses to avoid confusion among providers and staff.

**Determining Appropriate Users**

Email, portals, and certain other forms of electronic communication should be reserved for established patients of a healthcare practice who have provided consent to communicate electronically. Responding to or interacting with other individuals in the capacity of answering medical questions or providing medical advice could inadvertently trigger a duty to care.

**Establishing Timeframes for Electronic Inquiry Response**

Patients should be aware of the timeframes in which they can expect to receive a response to electronic communications, such as emails and portal messages. Establishing and conveying standard timeframes will help healthcare practices reinforce
expectations and boundaries related to these communication methods. Additionally, timeframes can help practices prioritize care and communication so that the office isn’t overwhelmed with electronic inquiries that divert time from patients most in need.

Developing Standard Disclaimers for Electronic Communication

Disclaimers should specify the intended purposes of electronic communication and any limitations for which patients should be aware. As part of disclaimers, healthcare practices might want to include information about terms of use, patient privacy, and electronic services. For example, a disclaimer might include language stating that the electronic communication medium is intended for informational purposes and specified services only (e.g., prescription refills) and is not appropriate for diagnosis, treatment, or medical consultation.

Specifying Privacy and Security Features and Limitations of Electronic Communication

Under state and federal regulations, healthcare providers and staff are required to maintain strict confidentiality and safeguard patients’ protected health information. Providers and staff should be aware of the security capabilities and limitations of any electronic communication methods they use, including email and social media. Additionally, patients should understand these risks before they consent to communicate with the practice electronically.

Establishing Documentation Guidelines for Electronic Communication

Communicating electronically can often be more convenient, quicker, and more casual that other types of communication. However, electronic interactions with patients should be documented in their health records with the same consistency and level of detail that healthcare providers would use with other forms of communication.

MANAGING PATIENT COMPLAINTS

Even the most diligent healthcare practices will most likely encounter patient complaints on occasion. For this reason, practices should implement a complaint process that all providers and staff members can understand and follow. Every employee should be prepared to manage patient complaints promptly and according to office protocol.

When a complaint occurs, providers and staff should respond calmly and empathetically, while reassuring the patient that someone is available to help resolve the problem or issue. One simple set of recommendations for complaint management is a common customer service strategy called LEAP, which stands for:

- **Listen:** Stop what you are doing and give your undivided attention to the patient. Do not argue with the patient or interrupt with explanations. Repeat back to the patient to affirm your understanding of his/her complaint or concern.
• **Empathize:** Identify the patient’s emotions and offer empathy. For example, “You must feel frustrated that you had to wait so long.”

• **Apologize:** An apology can go a long way, particularly if a patient has a legitimate complaint. However, even if the validity of the complaint isn’t clear, it is possible to apologize without admitting wrongdoing. For example, “I’m sorry that your appointment didn’t go as you expected.”

• **Plan:** Suggest solutions you can offer or strategies to resolve the issue. If you can’t come to an immediate agreement, assure the patient that an appropriate staff member will follow up on the issue. Let the patient know when he/she can expect to hear further from the practice.

The provider or staff member managing the complaint should document the issue, any resolution offered, and the commitment of any follow-up with the patient. The practice will need this information if the patient reports the complaint to the state medical board or subsequently files a malpractice claim. The information documented from patient complaints also can serve as an educational opportunity for staff.

In some cases, a patient making a complaint might become angry or aggressive. Whenever possible, have a designated employee available that has been trained in deescalating this type of behavior. If a patient becomes threatening or violent, staff should seek help from law enforcement.

**DISCLOSING AN UNANTICIPATED OUTCOME**

One of the most difficult types of communication in healthcare is disclosure of unanticipated outcomes. When an unanticipated outcome occurs, the patient and/or family should be informed and updated on a frequent basis regarding the patient’s clinical status. The following tips can help frame the conversation and provide useful reminders about essential disclosure information:

- Use compassion, empathy, and good communication skills, including mindfulness of body language and eye contact.
- Clearly communicate the facts as they are known at the time of the disclosure.
- Offer an apology for the occurrence of the event if all of the facts and causes are not known. Offer an apology for the error if an obvious error occurred.
- Explain the plan of action relative to either continued investigation or changes being implemented to prevent similar incidents in the future.

**Risk Tip**

Place LEAP tips and reminders where they are easy to reference to enforce a consistent and reliable complaint management process.
• Ask whether the patient and/or family has questions or would like to clarify any information.

• Offer to help with any additional counseling needs, and provide the patient and/or family with the names of agencies they can contact to address their concerns or complaints.

• Provide assurance that as more information becomes available, it will be shared with the patient and/or family.

• Identify a contact person who will have primary responsibility for continued follow-up with the patient and/or family. Doing so is critical to restoring trust and confidence.

• Keep in mind that the disclosure may not be well received, and the encounter could potentially be volatile. Further, the existing clinical relationship might not be sustainable. If so, or if the patient and/or family requests a different provider, create a plan for transitioning the patient's care.

MedPro Group’s guideline *Disclosure of Unanticipated Outcomes* provides additional details and guidance about the disclosure process.

**CONCLUSION**

Communication is one of the most important tools in providing quality patient care, improving patient satisfaction, and engaging patients in healthcare decisions. When patients understand health information and their treatment plans, they are better able to participate in the decision-making process, adhere to care recommendations, and manage their own health.

Healthcare practices can commit to effective patient communication by treating patients with respect and common courtesy, making a positive impression at all stages of the care process, measuring patient satisfaction, identifying communication gaps, and implementing corrective actions.

**RESOURCES**

- Agency for Healthcare Research and Quality: Health Literacy Universal Precautions Toolkit
- Centers for Disease Control and Prevention: Health Literacy
- MedPro Group: Patient Comprehension Checklist

**Risk Resource**

Many states have laws related to apology and disclosure of unanticipated outcomes. Healthcare providers should be aware of the laws in the states in which they practice. For more information, visit [www.sorryworks.net/apology-laws-cms-143](http://www.sorryworks.net/apology-laws-cms-143).
ENDNOTES


APPENDIX A. SAMPLE PATIENT SATISFACTION SURVEY FOR HEALTHCARE PRACTICES

Dear Patient:

As a valued member of our healthcare team and to improve our service and better meet your needs, we are conducting a patient satisfaction survey. Please take a moment to complete this questionnaire to offer us valuable insight. After completion, please return the questionnaire the front desk in the reception area.

We appreciate your input!

1. How long have you been a patient of our practice?
   - □ First visit
   - □ 1–5 years
   - □ 5–10 years
   - □ More than 10 years

2. Why did you decide to seek treatment with us?
   - □ Near home or business
   - □ Referral by another patient
   - □ Referral by a doctor
   - □ Referral by a healthcare organization
   - □ Telephone or online listings
   - □ Other: __________________________

3. Was making an appointment a simple process?
   - □ Yes
   - □ No

   If no, please explain: __________________________________________________________
   __________________________________________________________
   __________________________________________________________
4. How would you rate the telephone service of our practice?
   - Very good
   - Good
   - Average
   - Poor
   - Very poor

5. Once in our facility, were you treated in a friendly, courteous manner?
   - Yes
   - No

If no, please explain: _____________________________________________________
_______________________________________________________________________
_______________________________________________________________________

6. What was your wait time in our reception area?
   - Less than 15 minutes
   - 15 to 30 minutes
   - More than 30 minutes

7. What was your wait time in our exam room?
   - Less than 15 minutes
   - 15 to 30 minutes
   - More than 30 minutes

8. Were you provided with adequate time for each visit?
   - Yes
   - No

If no, please explain: _____________________________________________________
_______________________________________________________________________
_______________________________________________________________________
9. Was your problem and treatment plan explained in a way you could understand?
   □ Yes
   □ No

10. Are you comfortable asking questions regarding your treatment plans?
    □ Always
    □ Sometimes
    □ Never

    If sometimes or never, please explain: ______________________________________
        ______________________________________
        ______________________________________

11. Was our staff cooperative in helping with insurance coverage?
    □ Yes
    □ No

12. Was our staff helpful and courteous?
    □ Yes
    □ No

    If no, please explain: _____________________________________________________
        ______________________________________
        ______________________________________

13. What was your impression of the physical office? (Check all that apply.)
    □ Beautiful
    □ Organized/efficient
    □ Clean
    □ Average
    □ Disorganized
    □ Shabby
14. Was the reception area comfortable?
   □ Yes
   □ No

If no, please explain: ________________________________________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________

Please offer any suggestions for improving our reception area: ______________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________

Please provide any additional comments and suggestions: ___________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________

Thank you for taking the time to complete our patient satisfaction survey.