

Quality Assurance Questionnaire Outpatients

Thank you for coming to Alison Thomson Physiotherapists for treatment. In order to ensure our services are meeting our patients' needs and expectations, we send out a survey to randomly selected people. Please can you oblige us by completing this and returning it to info@centurycityphysio.co.za or Fax to 0866899321 at your earliest convenience.

THANK YOU!

1. The appointment making procedure was efficient	Y	/	N
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2. The physiotherapist explained the treatment procedures to me	Y	/	N
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3. The treatment administered was appropriate to my needs	Y	/	N
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4. The physiotherapist was professional	Y	/	N
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5. Would you recommend this practice to your friends and family	Y	/	N
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Any suggestions for improvement
