

- How would you rate our telephone response and the friendliness of our staff?  
 Excellent     Average     Needs improvement
- Were all of your questions answered thoroughly by our staff?  
 Yes     No     Not applicable
- Were all of your questions answered thoroughly by Dr. Dellork?  
 Yes     No     Not applicable
- Did we show a genuine interest in your individual needs?  
 Yes     No     Not applicable
- How would you rate the overall office environment?  
 Excellent     Average     Needs improvement
- How do you rate the overall service and attention given to you?  
 Excellent     Average     Needs improvement
- How pleased were you with the endodontic procedure?  
 Very Pleased     Somewhat Pleased     Not Pleased
- Will you recommend us to family and friends?  
 Yes     No

Please provide additional detail for any of the above responses that you feel strongly about. Thank you!

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Date \_\_\_\_\_ Name \_\_\_\_\_

May we have permission to quote your kind words on our website, practice brochure or other print materials? We will not use your last name without your permission.  Yes  No (Optional)

Happy with our service? Please tell your referring doctor.

Richard J. Dellork, D.D.S.



Practice Limited to Endodontics

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