

YOUR OPINION DOES MATTER AT UNIQUE DENTAL CARE!!!!

Please complete this survey based on your experiences during your most recent dental visit with Unique Dental Care.

Please check one and rate the questions 1-5. (5 being the best)

The convenience of appointment times you were offered when scheduling your most recent appointment? **1 2 3 4 5**

The courtesy and helpfulness of office staff? **1 2 3 4 5**

Did you have the Dentist's full attention? **1 2 3 4 5**

Were you given treatment options & where they explained to you clearly? **1 2 3 4 5**

The dental providers concern for your well being? **1 2 3 4 5**

Would you recommend our office to friends, family, and co-workers? **1 2 3 4 5**