

Midnight Sun Family Medicine, PC

475 Riverstone Way, # 5

Fairbanks, AK 99709

(907) 455-7123

PATIENT SATISFACTION SURVEY

Our goal at MSFM is to provide to you the highest quality health care possible in a comprehensive, compassionate, and cost-effective manner. To help us evaluate how we're doing, we invite you to share your opinions with us on the following questionnaire. Your answers and suggestions will help us continue to improve the health care we provide. Thank you for taking a few moments to give us this important information. Feel free to sign your name or not, all responses are confidential. Please take a look at our new web site : www.MSFM.net for clinic news, updates and specials. We are also on Instagram! Thank you for allowing us to be part of your healthcare team!

S. Gayle Hornberger, D.O.

I. DEMOGRAPHIC IDENTIFICATION

Age: _____ Zip code of your residence: _____

Marital Status: Single _____ Married _____ Widow(er) _____

Number of children: _____

Ages of your children: _____

Your occupation and employer: _____

Education Level Attained: _____ Less than high school
_____ High school diploma or GED
_____ College degree
_____ Post-graduate degree

Annual Household Income: _____ Less than \$20,000
_____ \$20,000 - \$34,999
_____ \$35,000 - \$49,999
_____ \$50,000 - \$69,999
_____ \$70,000+

II. OUR SPECIALTY AND SERVICES

1. Is this your first visit to our office? Yes _____ No _____

2. How would you rate our services:
_____ Excellent
_____ Good
_____ Fair
_____ Poor

Please comment: _____
