

Client Satisfaction Survey

Excellent Good Fair Poor N/A

SALES/FIELD SERVICE REPRESENTATIVE

Courtesy/Professionalism

Knowledge

Accessibility

Responsiveness

Comments: _____

CLIENT SERVICES

Courtesy/Professionalism

Knowledge

Adequacy of problem resolution

Timeliness in answering your calls

Timeliness of calling Results/Stats

Comments: _____

SUPPLIES

Timeliness in having orders filled

Accuracy of completed orders

Comments: _____

PHLEBOTOMIST

Courtesy/Professionalism

Blood drawing skill

Timeliness of blood draw

Collection Site Network Convenience

Comments: _____

COURIER SERVICES

Courtesy/Professionalism

Timeliness of specimen pick-up

Timeliness of report delivery

Comments: _____

CLINICAL LABORATORY

Accuracy of test orders

Turnaround time of test results

Timely notification of specimen related problems

Quality of test results

Availability of professional staff

Report format

Research and development of new tests

Services Directory/Test Menu

Comments: _____

BILLING SERVICES

Courtesy/Professionalism

Knowledge

Accuracy of bills

Timeliness of addressing billing questions

Invoice Format

Comments: _____

COMPANY COMMUNICATIONS

Timely notification of new tests/procedures

What is the preferred way for Dynacare Lab to communicate with you? Fax: Email: Mail:

Comments: _____

LABWORKS USERS (This sections is for LABWORKS users)

Ease of test orders

Responsiveness of technical support

Ease of obtaining results/reports

Comments: _____

PATHOLOGY

Has your office sent any tissue biopsies in the past 6 months? Yes No

Have you had the opportunity to speak directly to our staff pathologist for consults as needed? Yes No

CYTOLOGY

Is the turnaround time adequate for your needs? Yes No

If not please indicate your expectation: _____

DYNACARE LABORATORIES WEBSITE

Do you access the website www.dynacaremilwaukee.com? Yes No

What feature(s) of the website do you use most often?

Patient Service Centers Listing Accreditations

Test Menu – ease of finding tests Supply Order Form

Lab Works

How likely are you to recommend Dynacare Laboratories to associates?

Absolutely Most Likely Likely Not Likely

What enhancements would you like to see with our services? _____

Comments: _____

Office: _____ Acct. # _____

Name: _____ Title: _____

Phone: _____ Date: _____

Email Address(es): _____