

PATIENT SATISFACTION SURVEY

To better assist you, please take a few moments to answer some questions about your overall experience at the Ruttenberg Autism Center. Please indicate if you **Strongly Disagree, Disagree, Agree or Strongly Agree**, with each of the statements below. Put a cross (X) in the box that best describes your answer. Thank you for taking the time to provide us your feedback!!

	Strongly Disagree (1)	Disagree (2)	Agree (3)	Strongly Agree (4)
Overall, I am satisfied with the services my child received.....				
I received my completed evaluation and/or assessment in a timely manner				
Receptionist at the Ruttenberg Autism Center was courteous, respectful & helpful.....				
My problems and needs were understood.....				
The services provided met my needs.....				
Getting an appointment was quick and easy.....				
I would recommend this clinic to my family, friends, and colleagues.....				

Please provide us with additional comments and feedback about your experience at the Ruttenberg Autism Center.

What do we do best?

What areas could we most improve?

Do you give the Ruttenberg Autism Center consent to use your feedback in our promotions and publications?

Yes

No