



DFW Medical Home PLLC  
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## POST VISIT PATIENT SATISFACTION SURVEY

1. How likely would you recommend us?

0      1      2      3      4      5

2. What is your preferred method of communication for requesting an appointment?

Call in      Email or Text      Social Media      Portal

3. What do you like best about our practice?

4. How long did you wait to be seen?

Very early      Somewhat early      On time      Very late

5. How satisfied are you with our care ?

Very Satisfied      Somewhat Satisfied      Very dissatisfied      Somewhat dissatisfied

6. Do you find our text messaging is helpful?

Excellent      Good      Average      Poor

7. How would you rate your most recent experience in our office?

0      1      2      3      4      5