

2014 Patient Experience Survey Scripting  
*Clinical Staff*

*Mr./Mrs./Ms. <last name>, I encourage you to complete the patient experience survey that you received at check in to complete during your visit today.*

*There will be a patient experience survey collection box when you check-out for you to put your completed survey in at the end of your visit. Your survey will remain anonymous, unless you designate otherwise.*

*Your feedback is very important to us to make the experience at HealthPOiNT <clinic> better for all patients.*