

Sonjay Joseph Fonn, DO

Dear patient, Thank you for giving me and my staff, at Midwest Neurosu	argeons, LLC, the pleasure of caring
for you. Please help us continue to improve ourselves by completing very important to us and we thank you in advance.	
Sincerely,	
Sonjay Joseph Fonn, DO and Staff	
1). Please tell us how our office rates on the following Ease in getting an appointment?	Lower Higher Don't Know
Courtesy and professionalism of office staff? Courtesy and professionalism of Dr. Fonn?	
Dr. Fonn's accuracy in diagnosing a problem?	
Bedside manner (caring)?	
Spending enough time with me? Did our staff & Dr. Fonn keep you informed?	
Did Dr. Fonn involve you in decisions?	
Is Dr. Fonn easy to understand?	
What is your overall opinion of Dr. Fonn?	
How long was your average wait at the office?	30 minutes a a les
2). Are your signs & symptoms resolved after surgery?	Yes • No
3). What would you like to tell Dr. Fonn about your expe	
Dr. Fonn You are wonderful my life I Not only have you helped me but	
Thank you Dr Fonn For making me Feel li	Ke aperson - not just a client worker
4). What would you want to tell others about Dr. Fonn?	a de desti dell'espe
Don't wait to go - Dr. Forn is the	de Soth the staff
walk you thru the Steps of the procedures.	Always there to answer my
5). Are you satisfied with your overall surgical experience	e? ∠ Yes □ No
Mary was allow your comments are assessed being	∠ Yes □ No
May we place your comments on our website? Yes May we use your Name?	Yes ☐ No If no.

May we post a picture of you beside your comments?

(Optional) Patient Name: Alsha Stop

May we use your initials?

Z Yes

☐ No

Date: 8/22/12

∠ Yes □ No