

Patient Satisfaction Survey

Thank you for choosing to use Sutter Health Specialty Pharmacy. We invite you to give us your feedback about how we are doing. Please save or print this survey and return your comments by email (absmcoppharmacy@sutterhealth.org), by mail (2001 Dwight Way, Suite 2182, Berkeley, CA 94704) or in person at your earliest convenience. We appreciate your business and look forward to hearing from you.

1.	I am satisfied with the helpfulness of the person who greeted me at the door or answered the phone.					
	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Not Applicable
2.	The pharmacist is easy to contact when I have a question or concern.					
	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	
3.	The pharmacist met my needs when answering questions about my drug therapy.					
	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	
4.	I am satisfied with the friendliness of the pharmacy staff.					
	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	
5.	My billing and cost questions were handled well.					
	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	
6.	The Specialty Pharmacy makes filling my prescription(s) easy and convenient.					
	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Not Applicable
7.	I am pleased with the timeliness of the deliveries of my medication(s).					
	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	
8.	Sutter Health Specialty Pharmacy met my expectations in resolving specific issues.					
	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	
9.	I would recommend Sutter Health Specialty Pharmacy to others.					
	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	

10. Our goal is to please our customers! How can we improve? Please use the comment box below to share your questions, comments and/or concerns. If you would like a personal call, please include your name and best telephone number to reach you.



Scan this QR code to complete this survey on your smartphone.