

## Contact another Patient

### Patient Counseling Service and Testimonials

This is a helping hand to future patients who wonder what it will be like to commit to a new treatment or surgery. It is obviously a help to this medical practice as we try to offer people as much information as possible to make a confident decision about their health care. Our plan is to post some of these testimonials on our website, but also provide a connection for a new patient to communicate with a patient who has already gone through a similar experience.

Thank you for participating.

**What treatment did you receive from this medical practice?**

*(for example, "I had my septum and turbinates fixed")*

**What was it like to have the treatment?**

*(for example, was there any pain or unpleasant part of the visit or surgery?)*

**If there was a recovery period after a procedure, what was that like and how long did it take to feel like you were okay again and when could you go back to work?**

**Was there any difference with this experience from those with another doctor's office?**

Name \_\_\_\_\_ date \_\_\_\_\_

**Would you be willing to have a new patient contact you for more details?**

\_\_\_\_ yes      \_\_\_\_ no

**If yes, best telephone number (or email) :** \_\_\_\_\_  
**and what time of day is preferred :** \_\_\_\_\_

[click here to send form back by Email](#)