

Yes/No

11. How long did you have to wait?

10minutes/15 minutes/20 minutes/25minutes/30 or more minutes

12. Did you find this length of time acceptable?

Yes/No

13. How did you find your experience of your consultation/visit?

Poor/Average/Good/Excellent

14. Were the clinicians and students polite?

Yes/No

15. The information given to you about your horses' outcome/condition was it adequate?

Yes/No

16. If you needed medication for you horse, was this dispensed at the time of the visit?

Yes/No

17. If follow-up laboratory tests were required, were you advised of the results?

Yes/No

18. If you needed to speak to the Vet, did they respond promptly to your message/request?

Yes/No

19. How would you rate the service overall (1=very poor, 10=excellent)

20. Have you attended any of the Equine Talks? If so were they useful?

Yes/No

21. What other services would you like the practice to offer, if any?

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22. Are the invoices easy to understand?

Yes/No

23. As we expect payment immediately, what method of payment is most convenient to you?

Payment via Phone/website/cash/other.....

Additional Comments

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Thank you for your time in completing this questionnaire, please provide name and contact details, so that we may clarify any issues raised if necessary (this is optional)