To precious Visitors who visited "Takahiro Fujii Clinic".

1. Basic Information

In order to improve our clinic, your cooperation is highly appreciated to take a minuet for bellow survey.

•	Date	Angust 205 2011		
•	Name			
•*	Facility name			
٠	Business Title			
•	Business Address			
•	<b>Business Phone</b>			
•	Home Address			
•	Home Phone			
•	E-Mail Address			
2.		Please inform us how you choose our Clinic to visit and see.		
colleague & reputation of Diz. Fujil				
3. What is the most impressive part today?				
	skill, pr	ofressionalism kindness compassion		
4.	What is the most ed	ucational part today?		
	work flou	v of clinic		
5.		ssion of the Clinic facility?		
	well-run,	thorough patient oriented up high skill les	re	
6.	What is your impres	ssion of our nursing stuff?		
	respectfu	committed well trained intropate, efficie	- 1	
7.	What is your impres	ssion of our receptionist?		
	helpful, k	ind, enthusiastic		
8.	What is your impres	ssion of our Gastric examination?		
	Thorough	Skillful, fAnfree, top Notch		
9.	What is your impres	ssion of our Colonoscopic examination?		
	therough	ssion of our Colonoscopic examination?  skillful, pain free top Notch		
10.	What is your impres	ssion of Gastric and Colonoscopy on the same day?		
	easy &	ethicient		

11. Do you feel you want to come back later and visit this Clinic again?

Absolutely

12. Please fill out any over all impression.

As an endoscopost T would want

to have my the by Dr. Fujii

and staff.

Thank you for your visit today, and we are very glad if we provide anything to fill your needs.

Thanks a lot of your cooperation.