

John F. Dombrowski, MD,PC  
A Specialist in Pain Medicine

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PATIENT SURVEY

How was your visit today in our office? Was this your first time, and if so, who referred you?

*Very pleasant, staff & Dr. Yes, first time.*

Would you refer your friends or colleagues to this office for care?

*Definitely, yes.*

Any improvements we can make? *Not that I can see.*

Anything you would like to add?

*Dr. Dombrowski is absolutely wonderful & very efficient.*