

Patient Feedback Form:

NAME: PETER TEMPLE

1- What do you think about Eugene Gamble?

Great Personality / MAKES ME FEEL RELAXED

2- What do you think about the service/treatment you've received?

Excellent

3- What do you think the treatment did or will do for you?

Fingers crossed will have perfect
THE LIFE OF MY TEETH

4- Is there anything you would suggest to improve the experience?

No - Really Pleased