



Please complete this form to share your experience with us.

Doctor's Name : M. Kostodierova

Date of Visit: 18/8/16

Feedback (please be specific):

Very pleasant doctor who made me feel at ease. Explained everything to me as she did the examination. Very gentle and caring.

Suggestions for change or improvement:

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Signature (Optional) S.P. Staskewicz

Thank you for allowing us to serve you