

TOP Medical Clinic



e8

Please complete this form to share your experience with us.

PIELEGNIARKA

Doctor's Name :

Date of Visit: 08.08.2015

Feedback (please be specific):

Nice people! Very professional staff!
I will come back! 😊 with all my family!

Suggestions for change or improvement:

Signature (Optional)

Dorota

Thank you for allowing us to serve you

