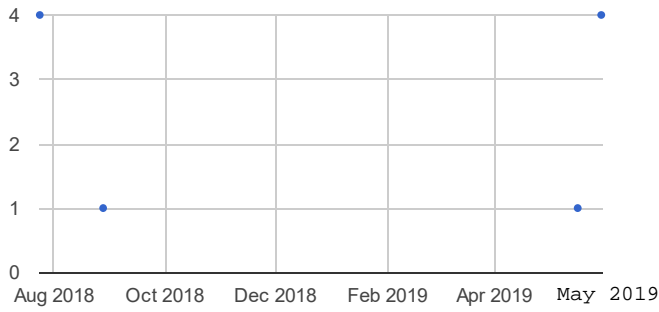
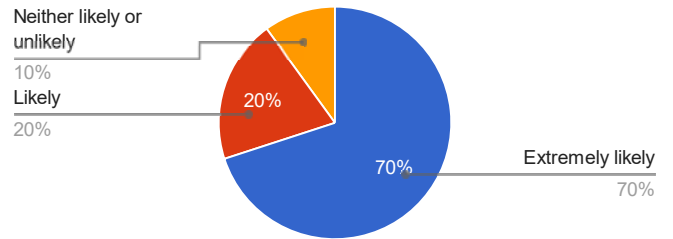


Timestamp



How likely are you to recommend our practice to friends and family if they needed similar care or treatment?



Thinking about your response to this question, what is the main reason why you feel this way?

