



**Please help us by answering a few questions below.**

**Patient Name:** \_\_\_\_\_

**How did you hear about Vanishing Veins Northwest?  
(please circle one)**

**Physician or Physician's Staff:**

Physician or Medical Practice Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

**Internet:**

- Google
- VeinAppt
- Yahoo
- Bing
- Facebook
- Vrads.com
- Other Internet: \_\_\_\_\_

**Other:**

- Compression Stocking Retailer
- Fairwood Neighborhood Magazine
- Flyer in your Imaging Bill
- Drive by sign on street
- Friend or Family Member

If a friend or family member referred you, whom may we thank?

**First name:** \_\_\_\_\_ **Last Name:** \_\_\_\_\_

Other: \_\_\_\_\_

***Thank you for choosing Vanishing Veins Northwest and Vantage Radiologists. We appreciate your input!***