

Share your success story with us!

Please describe what type of problem that you sought treatment for: 1010 (20500)
on and text of burion.
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Please describe your experience with our office, doctors, and staff::
I went to 3 different offices to obtain opinions
on my situation is chose Featurest. On Adamousky
has amazing backido manner and truly takes the time
Please describe how soon after your treatment/procedure you returned to work, normal
activities: Comptiller
Mouseller July Well I was soing mobility is
* pain improvement.
DI / Do DUAD took me
Overall how was your surgical experience:
a call from my covegiver the avening of my con
Summer - ho was very holdful a graniander al
onconkoa.
Would you recommend Dr. Adamovsky to a friend or family member? YES NO
I hereby acknowledge the responses above truthfully reflect my experience with the Feet First
Podiatry and their work and procedures. I hereby consent to allow the use of these statements by
my physician, Feet First Podiatry L.L.C., and product manufacturers for marketing and
promotional purposes. I understand that my full name; as well as photographic/radiographic
images may be used for information purposes.
Rhopda Hollingsworth 10-8-124
Name (Please Print) Date
Jallongue
Signature