



## Usage Survey August 2010

Please take just a few minutes to answer these questions. Simply check whether you use the option or not. Then please fax this sheet back to (636) 230-6801.

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

| Yes | No  | Feature                        | Yes | No  | Feature                       |
|-----|-----|--------------------------------|-----|-----|-------------------------------|
| ___ | ___ | Birthday Cards                 | ___ | ___ | Mail Merge                    |
| ___ | ___ | Collections Reports            | ___ | ___ | Patient Electronic Statements |
| ___ | ___ | Documents Folder               | ___ | ___ | Patient Paper Statements      |
| ___ | ___ | Documents Library              | ___ | ___ | Patient Notes                 |
| ___ | ___ | Dragon Nat. Speaking Interface | ___ | ___ | Patient Photos                |
| ___ | ___ | Dymo Label Printer Interface   | ___ | ___ | Patient Reminders             |
| ___ | ___ | Electronic Medical Records     | ___ | ___ | Payment Terms                 |
| ___ | ___ | Employee Time Clock            | ___ | ___ | Phone List                    |
| ___ | ___ | Enhancement Requests           | ___ | ___ | Posting to CPT Codes          |
| ___ | ___ | Finance Charges                | ___ | ___ | Practice Analysis Reports     |
| ___ | ___ | Image Editor                   | ___ | ___ | Prescriptions Paper           |
| ___ | ___ | Immediate Notes                | ___ | ___ | Prescriptions Electronic      |
| ___ | ___ | Import Documents               | ___ | ___ | Print Labels                  |
| ___ | ___ | In Office Mail Boxes           | ___ | ___ | Quick Form Letters            |
| ___ | ___ | Internet Training Videos       | ___ | ___ | Recall Cards                  |
| ___ | ___ | Insurance Aging Reports        | ___ | ___ | Recall Reports                |
| ___ | ___ | Insurance Card Scanner         | ___ | ___ | Referral Reports              |
| ___ | ___ | Insurance Electronic Claims    | ___ | ___ | Scheduling                    |
| ___ | ___ | Insurance Paper Claims         | ___ | ___ | Scheduling Emails             |
| ___ | ___ | Inventory                      | ___ | ___ | Search by Criteria            |
| ___ | ___ | Lab Requests                   | ___ | ___ | SOAP Notes                    |
| ___ | ___ | Lab Tracking                   | ___ | ___ | Super Bills                   |
| ___ | ___ | Ledger Notes                   | ___ | ___ | Vital Signs                   |
| ___ | ___ | Mail Merge                     | ___ | ___ | Walk-Out Receipts             |
| ___ | ___ | Message Center                 | ___ | ___ | Work Tickets                  |
| ___ | ___ | NetCom Communications          | ___ | ___ | X-Charge Charge Card          |

Please Fax back to **(636) 230-6801**