



Promedicus.net Secure Email Questionnaire

Practice Name: _____

Practice Address: _____

Practice email address: _____

Practice contact: _____

Telephone number: _____

Fax: _____

Are you already using Promedicus.net for downloading results?

☐

Yes - Please fill out **this page only**

☐

No – Please fill out **both** pages

Please list all the doctors that wish to receive reports:

Doctors Name	GP/Speciality	Provider number
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
11.		
12.		

TERMS OF ACCEPTANCE OF NOMINATION

I/We, the Practice named above, accept your nomination that I/we be appointed as a registered user of the Promedicus.net Secure Email System. I/we understand that this will require my/our agreement to install the Promedicus.net Client Software on my/our computer. I/we understand that I/we may either accept or reject the installation and acceptance will be on the terms of the "Licence Agreement for Use of the Promedicus.net Secure Email System by Nominated Recipient". I/we agree that any person who installs the Promedicus.net Client Software on my/our computer does so as my/our agent on my/our behalf. These terms may be viewed by accessing <http://www.promedicus.com.au/terms.php> or by reading the licence agreement displayed when installing the "software"

Signature:

(Authorised signatory of Practice named above) Name of Signatory:

Title:

Date:

Please email this questionnaire to: info@ultramobileradiology.com.au

or

Fax this questionnaire to :



Do you have a Technical Contact for your practice? Yes ☐ No ☐

Technical Contacts name: _____

Technical Contact's Email: _____

Telephone Number: _____ Fax: _____

What Operating System does the computer you intend to install our software on use?

Windows ☐ Server ☐ 10 ☐ 11

☐ Apple OS, Version : _____

☐ Server Version: _____

Do you have a Local Area Network (LAN) in the practice? ☐ Yes ☐ No

If YES:

How many computers on the LAN can access the internet simultaneously?

☐ 1 ☐ 2 or more How many? _____

What clinical software package do you use? _____

☐ **Yes, I would like to download the software. Please contact me with my username and password.**
URL for download: <http://www.promed.com.au/support/support-files>

☐ **No, I want Promedicus.net support to call my technical contact or practice contact and do a remote install via TeamViewer**