



Configuration questionnaire for Cath Lab / Procedure Room Intercom

Each time a new system is planned there are some basic configuration questions that need to be answered. Please fill out all that you can so that we can better assist you.

Facility Name: _____

Location (address): _____

Special Considerations: _____

- 1) How many Rooms or work areas will be observed?
- 2) How many Observation (Operator) locations will there be?
- 3) How loud is the noise in the Room to be observed? (Pick one)
 - a) Loud, so you need to shout to be heard
 - b) Medium, but you can easily converse
 - c) Soft, virtually no constant noise
 - d) Very low, so that you can hear a whisper
- 4) Does the Observer / Operator want a wireless headset? Yes
No
- 5) Do the people being observed want wireless headsets? Yes
No
- 6) Does the Room being observed need Doctor Music system so they can listen to their music source (Phone) via Bluetooth? Yes
No

Submitted by:

Name: _____

Company: _____

Address: _____