



**Tech Works**®

"Making Specialized Communication Easy"

## Configuration questionnaire for Clean Rooms such as Pharmacy Sterile Compounding

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

Submitted by:

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

Company: \_\_\_\_\_

Address: \_\_\_\_\_

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