

DENTAL SOFTWARE QUESTIONNAIRE

As you are probably well aware, choosing the appropriate software package for your practice can be a daunting and challenging task.

However, if you make the effort to know exactly what you need and what a vendor offers you can save a great deal of time and narrow your choices down considerably, allowing for an informed, confident decision.

Hopefully, the following guide can help you attain that goal.

SETTING UP A DEMO

1. **Plan to book off at least two hours for an in-office demo.** One hour is simply not enough time to make a qualified decision on the tool that will effectively run your practice. Purchasing a software system that will run your practice and hopefully increase your revenue should not be taken lightly. Take the necessary time to fully examine the software package with the representative.

2. **Book the demo in the appropriate part of your day.** It is best to book it early in your day rather than at the end when everyone is tired and wanting to go home. Another option is book off an extra hour before or after lunch and do it over that time of the day.

3. **Have your entire staff attend.** Everyone in the practice will be using the computer so make sure everyone is involved in the decision. Each person will have their own questions that will apply to their specific duties within the practice. This is the best way to make sure the system will work for everyone. In some instances only the doctor sees a demo, is shown all of the clinical aspects of the software and then the staff finds out it is completely inadequate as a management tool.

4. **Ask if data can be converted.** If you are already computerized and need to switch to another system, make sure your data can be converted. If the company cannot or will not convert the data, be aware of the ramifications. Be sure to ask specifically what data will be converted. You will need all your patient information, account balances, insurance information, your appointment book, as well as your patient history and recall system.

5. **Ask to be shown.** Never settle for "yes it does that". Have the representative show you.

INQUIRE ABOUT THE COMPANY HISTORY

How long have they developed dental software for the dental profession? There should be a lengthy history of programming/designing software specifically for dentistry. With the advent of Windows, there are many new vendors appearing on the market. Many companies may have an extensive history of software development but how long have they specialized in dentistry? There are many special requirements specific to dental software and only through many years of experience can a system adequately provide you with all the functions you require. The system should know what you need before you do.

It is important to ask yourself: Do you want to be part of a company's learning curve?

SOFTWARE COSTS

Obviously there are many different software packages on the market with distinctly different capabilities. They can range from costing hundreds of dollars to many thousands.

The bottom line is, in most cases, you will get what you pay for. By no means assume the highest price is the best. However it is safe to say that the least expensive is probably not going to accommodate all of your needs.

Avoid campaigns that talk about "free" this and "free" that. You probably don't need to be told this, only reminded: **Nothing is for free.** You will pay for it somewhere down the road, why wait for the surprise?

Find out what the purchase price includes:

1. **Does it include training and installation?**
2. **How much training?**
3. **What are the hourly charges beyond the included training?**
4. **Are you contractually locked in with them for a number of years?**
5. **Are there licensing fees?**

HARDWARE AND SOFTWARE REQUIREMENTS

NETWORK:

Server (Minimum requirements)

Pentium 4, 3.0HT or 2 Core Duo 2.66+ MHz, 1GMB RAM / 2G+ Preferred, 160 GB Sata HD,

DVDROM, 3.5" Floppy, 10/100 Network, U.S. Robotics 56K V.92 external Serial modem (USB modem not supported), Mouse/Keyboard, Battery Backup UPS Protection required. (APC 1000VA+ min)

(8+ Pcs will require SCSI 10K 36G+ HD, SATA Raptor 10K HD(s) for load balancing.)

***recommend Raid 1 Mirror config* providing hard drive level redundancy.**

Windows 2000 Pro, Windows XP Professional Edition Only

Workstations (Minimum requirements)

Pentium 4, 2.8+ MHz, 1024MB RAM, 80 GB Sata HD, DVDROM, 3.5" Floppy, 10/100

Network Card, Mouse/Keyboard

Windows 2000 Pro, Windows XP Professional Edition Only

Infrastructure:

Grade A class 10/100 Network Switch (8,16,24 Port) ie: (Cisco, Netgear, Linksys, Dlink)

NO hubs supported. (Optimal 10/100/1000 Gigabit Switch, requiring 1Gig network adapters on

all workstations and Cat6 cabling.) Cat5e or Cat6 Ethernet Cabling required. Crimping cables is

NOT recommended. Proper punch panel and keystone jack termination with factory sealed patch cables at both the pc and panel side is required.

Wireless connections are NOT supported. All workstations require a certified (tested) / terminated data run to ensure stability.

Required on one machine:

Sound card and speakers. (Any brand), DVDRW and or CDRW drive required.

Large Network Support:

Any networks exceeding 7-9 PC's will require a dedicated server running: Windows 2000 Server, Windows 2003 Standard, SBS, Enterprise Server OS.

(8+ Pcs will require SCSI 10K 36G+ HD, SATA Raptor 10K HD(s) for load balancing.)

Other Software needed: (on each computer-not optional)

PCAnywhere 10.5 +, Microsoft Word 2000 or 2002+

Optional Hardware:

Quickcam Pro (available USB port / additional parallel port needed for single workstation system)

Dymo 320 or 400 USB Label Writer / Seiko Label Printer 220 or 420

Printers:

HP Laserjet 2015 + (1-4 PCs) HP Laserjet 2420 (5+ PCs)

Capturing Devices:

ATI AIW 9600+, Hauppauge ImpactVCB cards required for capturing IntraOral images.

Backup:

Certified Tape Drive + Media -10/20(min) compression using min 5 tape daily rotation.

- backup software/ media management software required.

DVDRW - certified DVDRW drive using 5 DVDRW daily media rotation.

- recommend min of 4-6 month media recycling.

- Backup software required ie: Nero BACKITUP

External HD – certified external 2.5 or 3.5” HD/enclosure USB/Firewire

- recommend min of 2 devices on rotation.

- Backup software required ie: Veritas, BackupMyPC, Nero BackITUP.

Note:

1. Backups and the management of offsite media is the sole responsibility of the end user(s).

2. Virus/Adware protection on networks using Internet access is the responsibility of the end user(s).

3. “End of Day” process IS NOT a physical backup of your data. See section “Backup”.

4. Prior to purchasing new hardware, ensure the device(s) is/are compatible with your current hardware (I/O ports, PCI slots, etc.), network infrastructure, and with your current version of Windows Operating System.

SOFTWARE LICENSE

Does the vendor charge a licensing fee per terminal? This can quietly add to the purchase price quickly and dramatically to the unsuspecting purchaser.

SOFTWARE EVALUATION

To effectively use the software evaluation, simply "circle" the numbers that a software package does provide and "x" those numbers they do not provide for an easy calculation and comparison between any software you may be considering.

INSTANT ACCESS TO CERTAIN PATIENT INFORMATION

All systems should be **both keyboard and mouse designed.**

With most operations you should virtually always have a choice to use either the keyboard or the mouse. A system that is heavily weighted specifically towards either makes data entry much more cumbersome. (Having to go back and forth to the mouse and keyboard to perform tasks.)

During a regular day in a practice, certain information is constantly and quickly required.

You **should not** have to go into the patients' file to retrieve particular information required many times, each day, by your staff. **Bringing up a patient name is not good enough.** By simply accessing a patient name, not even having to actually go into the account/patient file, you should have instant access to the following information:

1. Address
2. Birthdates
3. Age
4. Sex
5. Home and Work phone numbers, including extensions.
6. Recall information, are they due, are they booked.
7. Health Information
8. Cancellation history
9. Provider
10. Category
11. Account Balance
12. Individual Balance
13. Post dated cheques on hand.
14. You should also be able to operate patient "name search" by: Part of the last name, Part of the first and part of the last name, First name, Any portion of the name
15. Subscriber
16. Account holder
17. Employer
18. Have the option to include inactive patients in the search or not.
19. Name Search should have the option to include New Patients or not.
20. Print an address or chart label.
21. Print an income tax receipt.

THE APPOINTMENT SCHEDULER

The scheduler is paramount to the efficient and effective operation of any advanced dental software system. This needs to be the most powerful aspect of the software. The capabilities must include:

1. **Unlimited** providers.
2. **Unlimited** operatories.
3. Add or remove chairs to view **without** having to re-make the scheduler.
4. Access to **unlimited groupings of providers/hygienists without having to quit the book** you are viewing first.
5. Access to see both a **day and week** at a glance -- for **both** single and

group providers/ hygienists -- without having to quit what you are viewing and re-make them each time you wish to view.

And both views should be fully functional. Many systems "views for a week" are for viewing purposes only.

6. Access to **view various time frames** (a few hours, half-day, full day) -- for both single and group providers -- without having to quit what you are viewing and re-make them each time you wish to view.

7. Have **more** than one group book running at the same time, and allowing them all to be viewing different dates.

8. Ability to show the **patient photo in the scheduler** so you "see" who is coming in.

Having it only in the patient file is a not sufficient.

9. Colour coding the appointment to distinguish the appointment type.

10. Unlimited colour codes and descriptions.

11. Ability to choose colours **you want** to use, not only those defined by the software company.

12. The scheduler should have a **built in wizard** to walk you through all of the steps to book an appointment.

13. All booked appointments should **instantly** appear in real time on all terminals on the network when they are booked **without the other stations screens having to be re-freshed for them to appear.**

14. All appointments should be tagged as restorative, recall or non-recall.

15. Have an instant display of the length of time available for an opening. (You shouldn't have to figure it out.)

16. Ability to show on-screen, the specific type of confirmation status of all patients.

17. Unlimited reasons for confirmation status.

18. Access to patient phone numbers for confirmation without having to go into their file or taking up valuable screen space within the appointment itself.

19. Access to viewing the month.

20. **Blocking:** Ability to block out days and times when provider or hygienist does not work.

21. Schedule Appointments by provider.

22. Schedule Appointments by operatory.

23. Schedule appointments by procedure codes or blocks of codes from Planned Treatment.

24. Allow to isolate "ideal time" for specific procedures.

25. Distinguish between Provider and Hygiene.
26. Allow to "double book" providers.
27. Allow for split-time appointments -- between hygienist and doctor.
28. Ability to have a chair reserved for "notes, reminders, things to do".
29. Ability to schedule appointments when procedures to be performed are unknown.
30. **Ability to book a "new patient" in the scheduler without having to set up their patient file first.** (Until a patient actually arrives and sits in the chair, it is not necessary and far too time consuming to waste the time on the phone when it can be done if and when they arrive.)
31. Ability to use 5, 10, 15, 20, or 30 minute increments.
32. Flag indicating that a patient has medical alerts or special needs.
33. User definable parameters available within each appointment.
34. Ability to instantly access the full appointment memo if the appointment is only one unit in length.
35. **View all appointments for a patient and their family members at the same time** and have the ability to make necessary changes without having to go elsewhere.
36. Record last missed appointment date and cumulative number of missed appointments.
37. Record why the appointment was cancelled on the cancellation list.
38. Access contact note pad and generic note pad.
39. Cancellation list should show who the original appointment was with, what for, how long, and at what time of day.
40. Ability to distinguish between cancellations by a patient or by the office.
41. **Ability to move an entire family at the same time for re-booking! NOT ONE AT A TIME!**
42. Ability to click and drag appointments to different times on the same day.
43. Ability to click and drag to shorten or lengthen an appointment.
41. Lists to manage all types of cancellations, missed appointments, and short notice appointments. The lists must be **self-editing**, with built-in protection features.
45. Appointment recall lists for both restorative and preventive scheduling should be directly tied to the scheduler.
46. Instant on-screen display for all patients who have outstanding treatment – for both hygiene and the dentist --for same day cancellations. (It is much easier to ask someone to come in a little earlier or stay a little later than trying to have someone re-arrange their schedule to fill a "same day" cancellation.)
47. Ability to print day sheets for the operatories that include the ability to tailor them to each operatories needs. (Length of time, number of chairs, phone numbers or not, portrait or landscape, notes to appear or not, etc)
48. Access to treatment plans, recall lists.
49. Ability to find next available appointment openings for prime time.

50. Ability to tailor the book to reserve time specifically for endo, crowns etc.
51. **Ability to edit the appointment details without having to re-book the appointment.**
52. Auto dialer.
53. Retain all past appointments.
54. Indicate the "patient waiting" status on all or selected terminals.
55. Instantly print lists of charts to be pulled. (By operatory and in the order the patients are coming in to each operatory.)
56. Option to print routing slips with the option to request for the entire day or specific patients.
57. Ability to instantly move to dates in the scheduler by day, days, weeks or months at a time.
58. Have instant access and integration into patient images. (Intra-oral camera or digital x-rays.)
59. Ability to post today's treatment from the scheduler if you wish.
60. Instant access to preferred hygienist.
61. Instant access to best time to contact.
62. Instant access to the patients preferred booking time.
63. Instant access to insurance carrier info.
64. Instant access to vital statistics.
65. Integration available with popular auto-voice confirmation software.
66. Access last perio date and perio code for accurate booking.
67. Access last recall date and recall code for accurate booking.

BILLING

1. Generate walk out receipt.
2. Walk-out receipt should show **all patient and family member appointments.**
3. Ability to automatically print post-care instructions for patients who have had particular treatment.
4. Generate billing statements monthly, weekly or whenever
5. Choose who to bill: current, 30, 60, 90, 120 days and over etc.
6. Account billing. (Family guarantor)
7. Ability to **exclude** all accounts you do not want billed.
8. Ability to **view statements before printing** to selectively exclude any you may not want to print.
9. View any post-dated cheques and their amount.
10. Ability to set a minimum balance to bill.
11. View last time a statement was sent.
12. Record of statements sent.
13. Ability to bill patient and/or insurance portion.
14. Ability to choose to bill insurance owing portion only.

The Statement should at least include:

Practice name
Address
Phone number
Patient Name(s)
Account Name and address
Date of service
Provider
Procedures (not in codes that the patient cannot understand)
Charge amounts
Amount due
Account aging summary
Customized messages for current 30,60,90,120 days etc.
Return stub with payment
All future family appointments

CLINICAL INFORMATION DATA ENTRY (for today's work)

1. You shouldn't always have to be moving to different screens to process a patient. The internal system wizard should walk you through everything.
2. A record of all treatment performed is maintained indefinitely for each patient.
3. Provider is recorded for each procedure.
4. Date of service.
5. Posting/transaction date.
6. Procedure code per procedure.
7. Tooth number/surface/quadrant/units.
8. A fail safe to ensure correct tooth/surface/quadrant data entry.
9. Ability to override default fees.
10. Ability to enter adjustments.
11. Ability to have an option to enter informatives such as "no charge" appointments without having to use dummy codes.
12. Ability to set up their next appointment, recall, treatment plans, pre-auth's, clinical observations, and/or submit to insurance all in the same screen.
13. A walkout statement after each visit with the patients' appointments and all other family members on it.
14. Ability to post transactions for patients without scheduled appointments.
15. All fee guides, past and present, should be available.
16. Ability to easily delete or edit any errors on the same day.

17. Ability to easily generate a standard form letter, prescription or open document to accompany today's work.
18. Instant access to other family account members without quitting the patient you are working on and having to go through name search to access the next family member. (Process the entire family at once.)

HISTORY

When viewing a patients history, all of the below should be accessible from the same screen. You should not have to go to any other screens in the system to access the information.

1. The account balance is aged proportionally current, 30, 60, 90, 120 days or more.
2. Each event should show the date, patient, provider, transaction/procedure code, tooth, surface, lab fee, and running balance.
3. Each procedure can be viewed by code or description.
4. View all informative events such as when a receipt, statement or insurance form was printed or a no charge visit occurs.
5. History can be sorted by each patient.
6. History can be sorted chronologically for the entire account.
7. History can be sorted by the patient you are viewing.
8. History can be sorted by payments.
9. Ability to resubmit to insurance or reprint insurance from this screen.
10. Ability to access all post-dated cheques, their value and the ability to make any necessary changes from this screen.
11. Ability to print the history.

INSURANCE SUBMISSION

Insurance submission should be designed to work hand in hand with the entry of today's work. You should not have to leave your procedure data entry area to submit to insurance.

1. Electronic insurance submission is included in the system. It should never be an "extra"!

2. Creates forms using the CDA Codes and the CDA forms. (Or ADA forms and ADA codes.)
3. Creates predetermination/pre-authorization forms and submits them electronically or manually.
4. Supports multiple claims. (Primary and Secondary carriers.)
5. Reports back why a claim may not have been successfully delivered electronically so you may solve the discrepancy and try again.
6. Defaults so you do not have to tell the system to send a claim electronically each time.
7. Defaults so you do not have to say where the insurance payment is to go each time.
(Dentist or subscriber)
8. Defaults so the system knows there are two carriers so two forms are printed automatically.
9. Option to not send a claim electronically and receive a paper form instead.
10. Option to easily override any of the above defaults when necessary.
11. Ability to enter upper and lower initial placement dates.
12. Default for school.
13. Ability to reverse an electronically sent claim.
14. Option to not submit to insurance -- where you normally would -- without having to turn off the modem.

INSURANCE REGISTRATION

1. The internal wizard should alert you if you miss necessary information.
2. Should track all the percentage breakdowns for major, basic, ortho etc and instantly tell the user the patient and insurance portions for the work completed.
3. Displays relationship to subscriber and who the subscriber is.
4. Allows for special coverage, students, disabled etc.
5. Display and track subscriber name, address, date of birth, employer, ID number, SIN, and "payable to".
6. Display and track Policy Holder (Employer) and allow for more than one plan per employer.
7. Percentage coverage for Preventive, Diagnostic, Basic Restorative, Endodontic, Periodontal, Major Restorative, Orthodontic and exceptions.
8. Policy coverage details, including deductibles.

9. Ability to draw from plans already entered for other co-workers.
10. A fail safe mechanism to ensure that you have the option to change/edit all plans for all employees or only individually!

LEDGER/ACCOUNT

1. An account balance.
2. Shows the previous balance, today's charges, today's credits and the new account balance.
3. Each patient within the account is separated.
4. Each patient has their own balance within the account.
5. Each patient has all codes appropriately divided into insurance portion and patient portion.
6. Each patient's individual total balance is divided by insurance portion and patient portion.
7. Each entry displays the date, patient, provider, transaction/procedure code, fee, amount paid, amount applied and amount owing.
8. Transaction types are specific: cash, personal cheque, insurance cheque, VISA, debit card etc.
9. There is an area for specific account notes.
10. Ability to enter all post-dated cheques, including when they are due and their total value as well as the ability to change or edit at any time.
11. Access to printing a receipt at any time without having to go elsewhere in the system.
12. Incidental charges, Adjustments, Write-offs can be applied at any time without having to go elsewhere in the system.

PAYMENTS

1. The internal wizard should walk you through your payment entry and its application to the account.
2. Specify the type of payment: personal cheque, cash, VISA, Debit etc.
3. Enter post-dates and edit when necessary.
4. Apply payment to the account. (furthest outstanding)
5. Apply payment to a specific individual in an account.
6. Apply payment to the patient portion or insurance portion.
7. Apply payment to a specific claim date.
8. Apply payment to a specific provider.
9. Apply payment to a specific code. (either the insurance or patient portion)

10. System should allow you to automatically apply all of today's due post-dated cheques to their appropriate accounts.
11. Print a list of all postdates.
12. Ability to easily delete or edit any errors on the same day.

HEALTH HISTORY

1. This should be isolated from other history.
2. The list should be unlimited and easy to add to.
3. Each item should be dated for accurate records.
4. Should show up whenever a patient is accessed in the system.

ACCOUNT REGISTRATION

1. The account holder should not have to be entered as a patient if they are not one.
2. Name, address, billing cycle, and account monitoring should all be present.
3. The internal wizard should alert you if you miss necessary information.

PATIENT REGISTRATION

1. You shouldn't have to know what screens are required, where to find them, and what information is vital to enter a new patient. The internal system wizard should walk you through everything including all account information, all required patient information, and insurance.
2. The internal wizard should alert you if you miss necessary information.
3. Title (salutation)
4. First, middle, last name
5. SIN
6. Nickname
7. Employer
8. Sex
9. Recall interval
10. Home/work phone, fax, email, cell phone
11. School
12. Employer

13. Occupation
14. Fee Guide
15. Category
16. Lab case number
17. Health/other information

PAYMENT PLANS

1. Amount
2. Initial Placement
3. Payments
4. Residual payments
5. Amount Billed
6. Amount Unbilled
7. Provider
8. Automatically applies month charge.

TREATMENT PLANNING

Planned treatment is an area of critical concern to any office as this represents a great deal of revenue. This area of the system should be easy to access from a number of different areas in the software and must offer a wealth of information.

1. Allow **any number** of treatment plans for each patient.
2. Plans can be for **one or more** providers.
3. Treatment can be categorized in the order of which it is to be done.
4. Each event should show the **appointment order**, provider, transaction/procedure code, tooth, surface, lab fee, provider fee.
5. The treatment should be able to be **booked from here** and include the grouping of procedures to be done on the day for one step posting upon treatment completion.
6. Shows the **total fee** for all the work to be done.
7. Tracks the **status** of the plan.
8. Allow for **observations, notes and contacts**.
9. **Post** from the planned treatment and **edit at any time** if the codes change.
10. **Automatically** dates when work is completed.

11. **Submit** to insurance manually or electronically.
12. Submit **all** codes or just **specific** ones.
13. Access a wide array of reports including active and inactive plans, their value and to fill openings in the scheduler.
14. Integrate with the letter or word processing as well as imaging gallery for **patient case presentation**.

RECALL/RECALL

Recall/Recall is another area of critical concern to any office as this represents a great deal of revenue. This area of the system should also be easy to access from a number of different areas in the software and must offer a wealth of information. **The system must track all patients' recalls even if your staff forgets.** It must do it for you!

BOOKING A RECALL

1. The system should **warn you** if you try and book a recall before the allowable insurance date for the next recall.
2. When booking a recall the system **should already know** the interval of months to the next visit and then take you there automatically for booking.
3. The system should know if a recall appointment is necessary or not.
4. There should be a place specifically for recall notes.
5. If you do not book an appointment for the future, the system should **automatically** log it as such and automatically be put on the appropriate recall list.
6. Show the hygienist the patient prefers.

TRACKING RECALLS

1. Generated, on-screen lists must be able to be tailored to your **specific** requirements.
2. Track **both** preventive and restorative recall.
3. They must be **self-editing**.
4. Access **all** family members recall and treatment planning -- inside the due recall patient -- at all times. ("kill two birds with one stone")
5. Access home and work numbers and auto-dial.
6. Primary and secondary insurance.
7. Sex and age.
8. Photo.
9. Category.
10. Appointment memo, appointment preferences, best time to contact.
11. Notes or contact information regarding treatment to be done and the ability to add it.
12. Provider
13. Treatment Co-ordinator
14. Preferred Hygienist
15. Last perio code
16. Last perio date
17. Last recall code
18. Last recall date
19. Cancellation History
20. Patient health information
21. **Instantly** go to scheduler to book the appointment at the appropriate date.

DAY END

Your day end should be quick and easy for the staff. It should not take more than ten to fifteen minutes.

1. Printout of all patients who were scheduled today and **did not** have any procedures or payments entered. (So no one accidentally slips through.)
2. **Deposit slips for each appropriate bank** the practice uses, including bank name, account number, and VISA percentage numbers if required.
3. Day sheets for all providers individually **and** for the entire practice as a whole.
4. Each provider should have totals for previous day, current day, and month-to-date, for: production, lab, positive adjustments, negative adjustments and

payments.

5. The entire practice should have a summary of totals for previous day, current day, and month-to-date, for: production, lab, positive adjustments, negative adjustments and payments.

6. Option to print **all** pages or only the practice **summary**.

7. Option to print **previous** deposit slips or day end reports.

8. There should be an easy, one step process to back up the files onto another hard drive

for protection and security. (it should take no more than a couple of minutes)

9. There should be an easy, one step process to reset totals for the next day. (it should take

less than 30 seconds)

10. Individual cash out slips for each terminal. (for large practices.)

MONTH END REPORTS

At the end of each month, certain reports are important to the continued growth and tracking of the practice. As they are generated, they should not interrupt what is going on in the practice. They should work in the background of the system and you should be able to choose which ones you require. Reports that should be easily generated include:

1. Patient A/R

2. Account A/R

3. Detailed A/R

4. Reconciliation report

5. Performance monitors

6. Production Analysis

7. Payment Plans

8. Detailed Referrals

9. Summary Referrals

10. Active/Inactive Treatment Plans

11. Treatment

12. Adjustments

13. Payments

14. Applied Payments.

15. There also should be a specific **report generator** to produce other reports specifically tailored to your needs.

The ENTIRE system should be in Windows if it is a true and complete windows program.

The same goes for a REPORT GENERATOR.

REPORT GENERATOR

You should have the ability to create virtually ANY report within the system based on the data of all patients within the system. It also should be designed in Windows which has made this task extremely easy and simple. In some cases, vendors require the user to go into difficult or cumbersome DOS/Xenix text based files to create such reports. Be aware of this. Don't you want the **full system** in Windows for ease of use and consistency?

CLINICAL/PERIO CHARTING, INTRA-ORAL CAMERAS and DIGITAL X-RAYS

Any quality dental management system will offer either their **own** software or **integrate** with other well known products already on the market. Make sure they have the commitment to integrate if they do not provide their own.

Don't forget, in most cases, purchasing an intra-oral camera or digital x-ray **after** purchasing a management system will save you money. A quality management system will offer a software module, add-on etc. that will handle all of your imaging needs -- directly integrated into the software -- which saves you from purchasing other imaging software for patient case presentation.

Why? For example, to operate an intra-oral camera you will need a camera, a capture card and then software to operate it. (That software can cost many thousands of dollars and often cannot integrate with the management software since it is from another company.) However, if you purchase a management system, then add their clinical software, all you need is the camera and capture card and you will get complete integration as well.

If you already have a camera, your cost is the integration of the camera the capture card and the software gallery.

The key is that the company be willing to offer you the integration to the clinical hardware you already own or are considering purchasing.

CONVERSIONS

Any office already using a computer **does not** want to have to go back to the beginning and re-enter their **patient data base, all appointments** and **lose all of the history** they have compiled. Purging some old history should be the limit.

It is strongly recommended that you find a software vendor that will convert your files. If the company you are considering does not do conversions or will only transfer a small amount such as name, address, and balance, we recommend you keep looking. Conversions are not always easy for a software vendor, but they are essential for you.

And remember by NOT converting data your staff will not re-enter patient history so. Your staff will not have access to your patient history unless you maintain your old system, on site, for reference.

If you maintain your old system, this now means you are operating two systems! Your staff will have to constantly go back and forth between your new system and the old one for all patient information; never mind the annoyance of having to compete for access to the old system.

All of this adds undue stress and workload for your staff.

Wasn't switching to a new system supposed to make life easier?

ANNUAL SUPPORT/TRAINING

Be sure to get an itemized record of what is or is not included in your support contract. You do not need to be surprised.

Does it include:

1. Do you have the **option** to be on support or not? Are you **obligated** for "x" number of years or months?
2. Training: is it **unlimited, defined** or do you have to **pay by the hour** after a small package of hours are used up? **(This is where a seemingly inexpensive software system can get expensive extremely quickly. BEWARE!)**
3. Do setup, travel and installation **use up** some of those training hours? Again, BEWARE!
4. What is the **hourly cost** for training? (It can add up quite fast!)
5. Does it include software **updates** through the year?
6. Does it include the **new fee guide** each year?
7. Does it include **telephone** support?

8. Does it include **in-office** support?
9. What is the **response time** to support calls?
10. Is there an added hardware contract as well? (**Do you really need it?!**)
11. Do they provide "**loaner**" equipment if yours has problems?
12. What are the rates for services if you do not want to be on contract?
13. Can you obtain **custom programming** if required?

This guide has been provided through the assistance of Autopia Computer Products:

Autopia Dental Software and is another example of their continuing efforts to educate the dental community and help dentists make informed decisions on running their practice.

The intent of the guide is to help you make a management software decision that allows you to feel you can make a qualified and confident decision as you purchase the software package to fit your **specific** office requirements.

As you may expect, Autopia can provide all the criteria found herein, and more. We hope you allow us your consideration as you begin your quest for the Management and Clinical software to make your practice more efficient and profitable.

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416-323-9593

In North America: 1-888-336-8957