

# hCare Hub Dropbox Request Form

Practice Name	
Specialty/type	
HCAPS? (MD = HCA Employee)	
# of Clinics	

Practice Address	
Street	
Street 2	
City	
State	
Zip	

Practice Clinical Contact:	
Name	
Phone	
Email	

Practice Technical Contact:	
Name	
Phone	
Email	

If practice has a Proxy server, please complete the below fields: (If not Proxy server, indicate that here.)

To see if you have a proxy please check the LAN Settings on your browser using this method:

**Tools->Internet Options->Connections->LAN Settings**

Proxy hostname:	
Proxy port:	
Proxy user ID:	
Proxy password:	

Result Type	Do you want these results types? (Yes or No)
Laboratory	
Microbiology	
Radiology Reports	
OE Reports (* see note below)	
Pathology	
ADT/Facesheets	

\* OE Reports" include dictated reports such as Operative Reports, Discharge Summaries, H&P, etc.

Please check the reports that you want to receive:

Central West Texas OE Report Categories	
<b>Cardiology</b>	
EKG	
ECHO	
Cath Report	
Perfusion Scan	
Stress Test	
Tilt Table	
Vascular Access Note	
Electrophysiology	
Holter	
Procedure Note	
<b>General</b>	
Consultation	
Discharge Summary	
ER Report	
History & Physical	
OP Note	
Progress Note	
Cath Report	
ER Letter	
Short Stay Note	

Stress Test	
<b>Urgent Care Clinic</b>	
Addendum	
Procedure Note	
Doppler	
ER DR Report	
ER NUR Report	
<b>OB</b>	
Delivery Summary	
<b>Radiology</b>	
Bone Density	
Nuclear Med Letter	
<b>Neuro</b>	
EEG	
<b>GI</b>	
Endoscopy	
<b>Pulmonary</b>	
PFT	
Sleep Study	
<b>Transplant</b>	
Transplant Report	
Transplant Letter	

\*\* Please note that dictated Reports are not available until after the MD has signed them (either electronically or manually).

Staff that will be accessing these results & reports:

(User ID would be their MEDITECH 3-4 User ID if user has one.)

User ID	Last Name, First Name

## Pre-Implementation Questions

4. What method do you use for managing patient clinical data?
  - a. Only paper
  - b. Only electronic
  - c. Combination of paper and electronic
5. Please choose your current level of process automation:
  - a. Fully automated
  - b. Partially automated (Part electronic, part paper-based)
  - c. Manual (human intervention required for all processes)
6. What is the typical turnaround time between when the patient's test is performed and the practice receives the results?
  - a. 1-6 hours
  - b. 7-11 hours
  - c. 12-24 hours
  - d. 1-2 days
  - e. 3 or more days
7. How often do you request that a facility resend results that cannot easily be located?
  - a. Never
  - b. Rarely (once a month)
  - c. Occasionally (2-4 times per month)
  - d. Frequently (1-2 times per week)
  - e. Often (more than 3 times per week)

Please add additional lines as needed.

<b>Providers in Practice</b>		
Last Name	First Name	MEDITECH Provider Mnemonic