

Thank you for your interest in the MediTalk product(s) by Quincy Systems.
A representative will be in touch with you soon, and will have already developed a profile based on the information that you have provided below.

First Name: _____ Last Name: _____

Title: _____

Practice Name: _____ Specialty: _____

Number of Locations: _____

Main Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Fax: _____

Email Address: _____

Number of Physicians in practice: _____

Average Monthly expenditure for Transcription Service: _____

Best time to be contacted: _____

Is Medical Manager Software used (version if known): _____

If no, other software used for patient demographics: _____

Are computers networked? ____ If yes, type of Server (Unix, NT): _____

If networked, how many computers connected: _____

Computer Mfg. (Dell, Gateway, other): _____

Do you have prior experience with
voice dictation or speech recognition: _____

Number of Physicians interested in voice dictation: _____

Briefly describe below, goals or project under consideration:

Time frame established for the above listed: _____