September 12, 2017

To Whom It May Concern:

We are 3rd year BSIT Students of Informatics College Eastwood. We believe that your company can be of significant help to the system that we are currently developing for our Thesis A subject. This system would help clinics make healthcare more efficient and effective for both Patients and Physical Therapists.

In line with this, we would like to conduct an Interview and Survey that aims to gather information regarding flow of data, work load and other procedures to help customize the system we’re developing. Any information regarding patients and other sensitive data will not be included in the survey. Rest assured that all information shall be kept confidential. Attached to this letter is the survey questions.

We are hoping for your favorable response regarding this request.

Thank you and Godspeed.

Sincerely,

Arjel Joseph T. Bien

Noted By:

Anthony R. Caliñgo, MIT

Dean of Information Technology

Thesis Project: Online Patient Portal

with SMS Schedule Reminder

The questions in the survey would ask about these subjects:

Please encircle the letter beside the relevant answer.

1. How frequently do patients come to your clinic?
2. Once a week c. Three times a week
3. Twice a week d. Other-- please specify \_\_\_\_\_\_\_\_\_\_\_\_
4. At what age do your patients come in for Physical Therapy?
5. 18 – 25 c. 34 – 49
6. 26 – 33 d. 50 and above
7. Do they need to start therapy on the spot or not?
8. Yes b. No
9. What is the typical duration of therapy?
10. 1 Hour c. 2 Hours
11. 1 Hour and 30 mins d. Other -- please specify \_\_\_\_\_\_\_\_\_\_\_\_\_
12. How do you record patient data when they first arrive?
13. Paper c. Online
14. Software d. Other -- please specify \_\_\_\_\_\_\_\_\_\_\_\_\_
15. What type of patient coming in to your clinic for a therapy?
16. Normal Citizen b. Celebrities
17. Both A and B d. Other – please specify \_\_\_\_\_\_\_\_\_\_\_\_
18. What is your current system for scheduling appointments, including for follow-up?
19. Text c. Call
20. Email d. Other -- please specify \_\_\_\_\_\_\_\_\_\_\_\_
21. Is there a problem with patients not showing up on the scheduled date/time of therapy and/or follow-up?
22. If Yes please tell the rate \_\_\_\_\_\_ b. No
23. How much is the cost to the patient for the therapy/consultation? How much is your cost?
24. 300 pesos per session c. 1000 pesos per session
25. 500 pesos per session d. Other -- please specify \_\_\_\_\_\_\_\_\_\_\_\_\_
26. What do you do to protect the security of patient data?
27. Software on a computer where its encrypted
28. Keep them on a storage room where there’s no insects
29. None of the above
30. Other -- please specify \_\_\_\_\_\_