

CUSTOMER INTAKE QUESTIONNAIRE

Thanks for downloading our PDF version of the ConnectSx Customer Intake Survey. Feel free to use this document as a planning guide to help you gather the thoughts and information we will need to move into the planning phase of a potential implementation.

Once you're comfortable with the information you've compiled, please be sure to submit the online form at <https://www.connectsx.com/customer-intake-form/>. If you have any questions during this process, please feel free to email us at value@connectsx.com or call us at +1 (708) 406.9865 to talk to a real human.

GENERAL INFORMATION

1. Your Name
2. Your Email Address
3. Your Phone Number
4. Your Company
5. Your Role
6. Are you the primary decision maker in software purchase decisions? Yes / No
 - a. If no, is the primary decision maker already involved in/aware of this process? Yes / No / I'm not sure

KEY NEEDS AND GOALS

1. What key needs are you planning to address with a value chain management solution?
2. What will a successful implementation mean for your organization? And how will you know you've selected the right tools?
3. What are your top 3 goals/priorities for a software implementation of this kind?

ABOUT YOUR BUSINESS

1. How long have you been operating as a business?
 - a. Less than one year

- b. 1-5 years
 - c. 6-10 years
 - d. More than 10 years
2. What type of organization are you?
 - a. Manufacturer
 - b. Distributor
 - c. Healthcare Provider
 - d. Other
3. If you have sales reps, how many direct reps? How many 1099 reps?
4. How many administrative employees will use these tools?
5. Do you plan to grow your team in the next 12 months? If so, how many new team members do you plan to add?
6. Do your team members use mobile devices?
 - a. If yes, what kind of devices do they use?
 - i. iOS (Apple)
 - ii. Android
 - iii. Windows
 - iv. Blackberry
 - v. Other
7. Do you have an ERP system? If so, what do you use?
8. Do you have a CRM? If so, which one?
9. What other enterprise systems do you use currently?

ABOUT YOUR PROCESS

TRAY/SET MANAGEMENT

1. If you are a distributor or health provider, which manufacturers do you currently represent (or use)?
2. How many product lines do you carry (can be approximate)?
3. On average, how many trays or sets do you manage at any one time?
4. Approximately how many pieces of inventory do you manage in your internal systems?
5. How is inventory currently allocated to individual sales reps (or departments, teams, locations)?
6. If inventory is requested by a sales rep or materials manager, how is that request made?
 - a. Phone

- b. Text
 - c. Email
 - d. Fax
 - e. In person
 - f. Through existing app or software
 - g. Other
7. How do you currently track which rep or location has which sets or pieces of inventory?

CASE MANAGEMENT

1. How many cases do you manage in a typical month?
2. Who currently schedules surgical cases?
3. How are you contacted and informed about newly scheduled cases?
4. How do you record and track newly scheduled cases?
5. What is your internal process once you are notified of a case being scheduled?

DEVICE USE TRACKING

1. How does device use get recorded and transmitted after a case is complete?
2. What information is collected when devices are used in a case?
 - a. Lot numbers
 - b. Catalog Numbers
 - c. UDI
 - d. Serial Numbers
 - e. Barcodes
 - f. Device information (size, form factor, etc.)
 - g. Other information
8. How do you currently provide device usage documents/data to the provider and/or manufacturer?
9. What additional case outcome information is currently collected?
 - a. Device feedback from the surgical team
 - b. Patient outcome information
 - c. Post market surveillance
 - d. Individual surgeon preferences
 - e. Other
 - f. None
10. If information is collected, how is that data recorded and transmitted?

BILLING

1. How are invoices sent to providers?
2. Who is responsible for collecting PO numbers and associating them with cases?
3. How are PO numbers communicated/shared currently?
 - a. Email
 - b. Text
 - c. Fax
 - d. Phone
 - e. Other
4. What is your current DSO (daily sales outstanding)?
 - a. < 15 days
 - b. 15-30 days
 - c. 30-60 days
 - d. 60-90 days
 - e. 90+ days
 - f. Not sure

INVENTORY REQUESTS, TRANSFERS, RETURNS

1. If you are a manufacturer, how do you request inventory returns from your reps or distributors?
2. If you are a distributor or healthcare provider, how do you request inventory from and return inventory to the manufacturer?
3. Do you use or stock sterilely packed items or other items with expiration dates?
 - a. If yes, how are you tracking expiration dates for items in the field?
4. Please describe your current return authorization process. If there are multiple, please provide details for each.
5. In your current process, who can initiate an inventory transfer?
 - a. Warehouse sends to Rep
 - b. Warehouse sends to Provider location
 - c. Rep can send to another Rep
 - d. Rep can send back to the warehouse
 - e. Provider can send to another Provider
 - f. Other
6. How are inventory transfers currently tracked?

TRAINING

1. How do you train individuals and teams on your products?
2. How do you provide training documentation like surgical technique guides and IFUs?
3. On a scale of 1-10, with 1 being “not important at all” and 10 being “critically important,” how important is training to your current business?

ABOUT YOUR IMPLEMENTATION PLANS

1. What timeframe are you targeting for implementing a system like ConnectSx?
2. How many stakeholders will participate in a system selection and implementation process?
3. What is the most important factor in this purchase decision?
 - a. Price
 - b. Features
 - c. Support
 - d. Integration capabilities
 - e. Implementation timeline
 - f. Product Roadmap and future features
 - g. Internal stakeholder buy-in
 - h. Something else
 - i. I’m not sure