# WVU Vidyo Access Request Form-External Site

Facility Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip Code \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Main Phone Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Contact Information:**

**Implementation Team Leader** (This will be our main contact at your facility to setup meetings)

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Primary Technical Contact**

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Normal Office Hours \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Number of Technical Staff \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If using Vidyo for urgent telemedicine consultations, does your facility provide 24/7 on-call technical support?

|  |  |  |  |
| --- | --- | --- | --- |
|  | Yes |  | No |

**Technical Information:**

1. Is your facility already wired with network jacks in your designated videoconference room(s) that can be used for MDTV video use only?

|  |  |  |  |
| --- | --- | --- | --- |
|  | Yes |  | No |

2. Please visit the following website: http://speedtest.hsc.wvu.edu to perform a speed test to determine if your facility meets the minimum bandwidth requirement of 384kbps Up & Down for using Vidyo. Please list your results here:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| \_\_\_\_\_\_\_\_ Upload Speed | \_\_\_\_\_\_\_\_ Download Speed | \_\_\_\_\_\_\_ ms Latency | \_\_\_\_\_\_\_\_ ms Jitter | \_\_\_\_\_\_\_\_ % Packet Loss |

3. Does your firewall allow for inbound and outbound video traffic?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Yes |  | No |  | Not Sure |

4. Is the option to allow phone-bridge only participants into a videoconference a requirement?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Yes |  | No |  | Not Sure |

5. Will you be utilizing Videoconferencing Hardware (Tandberg/Lifesize) to connect back to WVU?

|  |  |  |  |
| --- | --- | --- | --- |
|  | Yes |  | No |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **If Yes:**  1. Can you provide a public IP address for your videoconferencing unit? Yes No If yes, please list the IP Address here: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  2. What is the Make, Model, Firmware version of the unit?   |  |  |  |  | | --- | --- | --- | --- | | Make | Model | Firmware Version |  | |  |  |  | |

|  |
| --- |
| **If No:**  1. What device (computer, laptop or mobile device) will you need setup with Vidyo access? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  2. Do you plan to present patients from one stationary exam room or do you plan on wheeling a cart to the patient’s bedside? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  3. You will need to determine if you have the correct computer hardware to support Vidyo.  For a full listing of Vidyo minimum/optimum requirements:   * Please go to: <http://www.vidyo.com/knowledge-center> * Click on the Introduction to Vidyo tab * Then scroll over to Minimum/Optimum Requirements   ITS Recommended Hardware is available here:  <http://www.hsc.wvu.edu/telemedicine/MediaLibraries/ITS-Telemedicine/Images/Forms/Vidyo-Hardware-Recommendations-(3).pdf> |

Please email or fax completed forms to:

Email: [mdtv@hsc.wvu.edu](mailto:mdtv@hsc.wvu.edu)

Fax: 304-293-8565