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This is my compilation of common visual call systems. I recommend performing your own due-diligence by assessing your practice needs and asking practices how they orchestrate traffic direction.

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Exam Room Signal Flags

There are several sources for purchasing these. Here's one:

http://www.quickmedical.com/exam_room_products/signals.html

A major limitation with exam room signal flags is that receipt of the message requires you to continually check the flags outside of the rooms. If you are inside an exam lane, you would not know that the next patient is waiting unless you peered outside.

Light-bulb based hardwire systems.

Here are some of the better known ones:

Kelkom (www.kelkom.com)

Varitronics (www.varitronics.com)

Expeditor (www.expeditor.com)

The Communicator (<http://thecomunicatorfl.com>)

Theta (www.thetacorp.com)

These systems work well and are often found in hospitals. But they are relatively expensive because professional installation and hardwiring is frequently needed. For a multi-doctor office one of these systems could cost over \$10,000 when including installation costs. Some of these systems using legacy bulb-technology may be expensive to repair due to increasing difficulty getting replacement parts.

"Smart " systems

One of the more popular and cost-effective systems in dentistry and optometry was through Comlite Systems (www.comliteinfo.com). They sold hardware-based units. Comlite Systems recently stopped selling their hardware units and now only supplying computer-based software only for Windows-based machines (XP and Windows 7). Based on personal communication, Comlite Systems plans to port the software to Mac and Droid platforms in the near future. Their system is local area network (LAN) based. This makes their product available for download, which provides for easy distribution of their software and upgrades. Their LAN4000 software is available for trial download from their website.

In my opinion, the major Achilles heel of LAN-based software for intra-office communication is the lack of immediate and reliable communication. If a network station

is on “sleep” mode or powered off, or even if the screen saver is on, the visual message will not be available to view. Second, a networked computer is required every place where the message might need to be viewed. Finally, the software user interface may visually interfere with other software running on the workstation, including electronic medical records and retinal imaging review software. There is limited real-estate on the computer screen, and if the LAN-communication system is minimized, you might miss an important message.

There are two hardware call-systems that I’m aware of:

Navicom by Porter Instrument (www.porterinstrument.com/office.php)

This system requires hardwiring, and integrates with a personal computer.

Visicom (<http://visicom.homestead.com>)

Their newest Visicom units do not require hardwiring which makes it convenient to put into existing offices without expensive and disruptive retrofitting. Visicom communicates using radio frequency and my experience is that it delivers as promised. Each unit costs around \$350 each. A Visicom unit is required in each area of the office where messages are to be received and/or generated. Each unit is placed in a specific location in the practice and is designated by a letter. Each person is designated a number. So the display of “1B” on the Visicom unit tells the individual designated as 1 to go to location B.

If purchasing these units using a credit card, make sure Visicom does not charge you a “processing fee”. Credit card companies do not allow vendors to pass onto card holders the fees for merchant services, whether called a “processing fee” or otherwise.