

**Department of Veterans Affairs
VistA Medical Imaging Software Development - SD&D**

**IMAGE ACQUISITION TECHNICAL DATASHEET For
Devices Using Clinical Capture**

Complete this datasheet for each image generating device and any associated workstation implementing a Clinical Capture workstation. SD&D maintains these forms to document the imaging system configuration at each site. If you do not have this information at hand, please contact the manufacturer for help. **Regulatory requirements do not allow us to interface untested imaging modalities to VistA Imaging systems.**

Site: _____

Date: _____

Medical Procedure Involved: _____

DEVICE INFORMATION	<i>(Fill in, circle, or check all that apply)</i>
Manufacturer	
Model Name/Number	
Approximate date installed	
Software and/or Firmware version	
WHO TO CONTACT FOR INFORMATION	
Responsible Service/Clinic	
Point of contact	
Phone or email	
VIDEO SIGNAL CHARACTERISTICS	
Video Signal	B/W or Composite
Total lines	_____ lines per frame
Scan method	Interlaced Non-interlaced
DIGITAL CAMERAS	
Method or connection type for data exchange:	<input type="checkbox"/> Serial cable <input type="checkbox"/> USB <input type="checkbox"/> SCSI cable <input type="checkbox"/> proprietary cable <input type="checkbox"/> Disk transfer <input type="checkbox"/> parallel port connection <input type="checkbox"/> _____
Total memory installed in camera	_____ MB
Image formats provided	<input type="checkbox"/> JPEG <input type="checkbox"/> TIFF <input type="checkbox"/> BMP <input type="checkbox"/> TGA <input type="checkbox"/> GIF <input type="checkbox"/> _____
DOCUMENT SCANNERS	
Maximum Resolution	
Bit Depth (Grayscale)	<input type="checkbox"/> 8 <input type="checkbox"/> 10 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> _____
Image formats provided	<input type="checkbox"/> JPEG <input type="checkbox"/> TIFF <input type="checkbox"/> BMP <input type="checkbox"/> TGA <input type="checkbox"/> GIF <input type="checkbox"/> _____
PC Interface	<input type="checkbox"/> Parallel <input type="checkbox"/> Serial <input type="checkbox"/> SCSI <input type="checkbox"/> USB <input type="checkbox"/> _____
TWAIN Compliant	<input type="checkbox"/> YES <input type="checkbox"/> NO