

MUSTER

evasys	AI- Applications in the Dental Practice	evasys
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Please mark this way: ☐ ☒ ☐ ☐ ☐ Please use a ballpoint pen or not too thick felt-tip pen. This questionnaire will be read by machine.

Correction: ☐ ☒ ☐ ☒ ☐ For optimal data collection, please observe the instructions given on the left when filling in the form.

1. Part: General Data

1.1 Postal code of the dental practice

1.2 Age of the dental practice owner(s) (if several: please list)

1.3 Gender of the dental practice owner ☐ Female ☐ Male ☐ Divers
☐ Mixed

1.4 Specialisation of the dental practice

- | | | |
|--|--|---|
| ☐ None | ☐ Orthodontics | ☐ Prosthodontics |
| ☐ Oral surgery | ☐ Pediatric dentistry | ☐ Endodontics |
| ☐ Periodontologie | | |

1.5 Number of employees (Please add up to full-time equivalent)
Dentists / Assistants/ Trainees

 / /

2. Part: General Practice Organisation

2.1 By which means do patients frequently contact your practice? (Multiple answers possible)

- | | | |
|-------------------------------------|--------------------------------|--------------------------------|
| ☐ Phone call | ☐ SMS | ☐ Email |
| ☐ Website | ☐ Other | |

2.2 Other

2.3 By which means do you frequently contact patients? (Multiple answers possible)

- | | | |
|---------------------------------------|--------------------------------|---------------------------------|
| ☐ Telefonanruf | ☐ SMS | ☐ E-Mail |
| ☐ Website | ☐ Other | |

2.4 Other

2.5 Estimate: How often is the reception contacted on average per day? Please tick accordingly. 0 ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ 100

2.6 What are the most common reasons for patients to contact you? (Multiple answers possible)

- | | | |
|---|--|--|
| ☐ Cancellation or change of appointments | ☐ New appointment with (acute) symptoms | ☐ New appointment due to change of practitioner |
| ☐ Appointment for check-up examinations | ☐ Other | |

2.7 Other

2.8 How are questionnaires handed out in your practice?

- | | | |
|---|----------------------------------|----------------------------------|
| ☐ Paper | ☐ E-Mail | ☐ Website |
| ☐ Tablet in Praxis | ☐ QR-Code | ☐ Other |

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2. Part: General Practice Organisation [Fortsetzung]

2.9 Other

2.10 Which practice software is currently in use? (Multiple answers possible)

- | | | |
|--|--|--|
| ☐ Appointment management and patient files are in the same software | ☐ We currently work with an analogue appointment book | ☐ We currently work with an analogue patient file |
|--|--|--|

2.11 Practice software used for the appointment management

2.12 Practice software used for the patient file

2.13 Besides those, are any other digital applications used in the practice?

- | | | |
|--|--|--|
| ☐ Nein | ☐ Intraoralscanner | ☐ digital facebow |
| ☐ digitales X-ray | ☐ AI based X-ray evaluation | ☐ Other |

2.14 Other

3. Part: Specific Questions on AI

3.1 Are you familiar with possible applications of AI in dentistry?

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

3.2 Have you already had contact with applications of artificial intelligence in the practice context?

- | | |
|-----------------------------|--|
| ☐ No | ☐ Yes, the following: |
|-----------------------------|--|

3.3 Yes, the following:

3.4 Are you present on social media (e.g. Facebook, Instagram...)?

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

3.5 Which processes in practice organization do you find particularly time-consuming or inefficient?

3.6 Which tasks could you imagine being performed by AI?

3.7 Which tasks/areas would you rather not digitalize?

3.8 Why have you not yet integrated AI? (Multiple answers possible)

- | | | |
|---|--|---|
| ☐ Fear of additional effort (e.g. maintenance effort, bureaucracy) | ☐ No contact with AI applications yet | ☐ No trust in the technology |
| ☐ No suitable offers | ☐ Additional costs | ☐ Datenschutzbedenken |
| ☐ Immature technology | ☐ Other | |

3.9 Other