POLAR GP Installation Checklist

Practice name/site			
PIP number			
Contact person		Job title	
Contact number		Contact e-mail	

Would you like us to contact your I.T. Support for installation?		Yes / No
I.T. Provider		
Contact Person		
Contact Number		
Contact e-mail		

POLAR User accounts required:

First name	Surname	E-mail	Admin
			Yes / No
			Yes / No
			Yes / No

Current Clinic Software

☐ MEDICAL DIRECTOR	Server Name: _____		
☐ BEST PRACTICE	Server Name: _____	B.P. Database Password: _____	
☐ ZEDMED only	Server Name: _____	Zedmed Account Password: _____	Directory where surplus file is stored: _____ _____
☐ Other Software combination	PLEASE SPECIFY: _____	Server Name: _____	

Installation & system requirements

Server/Computer minimum .Net framework 4.6.2 installed (required for POLAR installation)	Yes / No
Free disk space over 10GB	Yes / No
Internet speed >= 2.0mps download	Yes / No
Full HD Monitor (1920 x 1080) available to view reports	Yes / No
Local administrator access available on day	Yes / No
Google Chrome installation ok if not currently on server	Yes / No