EDITORIAL:
SOFTWARE SURVEY SECTION

The purpose of the Software Survey Section in CLINICAL HEMORHEOLOGY is to encourage the open exchange of information on software programs unique to our professional field. With the rapid penetration of computers into academic and industrial institutions has come a parallel increase in the number of scientists and researchers designing their own software. The existence of much of this software remains unknown to even those of us who could most benefit from its use. We believe that it is of vital importance to our readers that such information be made available. We believe also that a professional journal is the best place to share such information. Your contribution would be most welcome.

The questionnaire on the following pages is designed to assist you in reporting on software that you may have developed or be in the process of developing. By completing this form, your information will reach thousands of your colleagues who may benefit from your work and may possibly offer suggestions for further enhancements to your software. Please complete the enclosed form and return it to:

Dr. Arpad Matrai
Klinik fur Physikalische Medizin
Universitat Munchen, Innenstadt
Ziemsemstr. 1
8000 Munchen 2, Germany GFR

We do not intend to review or comment on the contents of the questionnaire. It will be published as is in order to expedite the information cycle process. I would welcome any comments you may have.

THE EDITORS
II Software Survey Section

NAME OF JOURNAL CLINICAL HEMORHEOLOGY

PERGAMON
SOFTWARE DESCRIPTION FORM

Title of software package: ____________________

It Is: [ ] Application program [ ] Utility [ ] Other

Specific area ___________________________ (e.g. Thermodynamics, Inventory Control)

Software developed for [name of computer(s)] __________________
in [language(s)] ___________________________
to run under [operating system] __________________
and is available in the following media:
[ ] Floppy disk/diskette. Specify:
   Size _____ Density _____ [ ] Single-sided [ ] Dual-sided
[ ] Magnetic tape. Specify:
   Size _____ Density _____ Character set ________

Distributed by: _________________________

Minimum hardware configuration required: ______________

Required memory: _______________ User training required: [ ] Yes [ ] No

Documentation: [ ] None [ ] Minimal [ ] Self-documenting
[ ] Extensive external documentation

Source code available: [ ] Yes [ ] No

Level of development: [ ] Full operational [ ] Coding complete
[ ] Design complete [ ] Collaboration would be welcomed

Is software being used currently? [ ] Yes [ ] No
   If yes, how long? _______________ If yes, how many sites? _______________

Contributor is available for user inquiries: [ ] Yes [ ] No

(continued)

RETURN COMPLETED FORM TO:

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[This Software Description Form may be photocopied without permission]
Description of what software does [200 words]:

Potential users: ____________________________________________

Fields of interest: __________________________________________

Name of contributor: _________________________________________

Institution: _________________________________________________

Address: ____________________________________________________

Telephone number: __________________________________________

Reference No. [Assigned by Journal Editor]_____________________

[The information below is not for publication.]

Would you like to have your program:

Reviewed? [ ]Yes [ ]No [ ]Not at this time

Marketed and distributed? [ ]Yes [ ]No [ ]Not at this time

[This Software Description Form may be photocopied without permission]