

## **Annexure II: Form B - Market and Financial Feasibility**

### **1. Proposed Title:**

"Priority-Based Queuing Management System: Design, Implementation, and Evaluation"

### **2. Market Feasibility**

#### **a. Market Analysis**

- Target Audience:
  - Hospitals and clinics seeking efficient patient flow management.
  - Emergency response centers requiring priority-based queuing.
  - Healthcare institutions aiming to improve patient satisfaction and service delivery.
  
- Market Need:
  - Increasing patient load in healthcare facilities necessitates efficient queue management to reduce wait times and prioritize emergencies.
  - Growing demand for systems that categorize patients based on urgency (e.g., emergencies, regular cases) while ensuring fair and optimized care.
  
- Competitive Landscape:
  - Current systems offer basic queuing functions; however, they lack advanced features like urgency-based prioritization, real-time updates, and integration with hospital management systems.

#### **b. Market Potential**

- Market Size:
  - The global healthcare IT market was valued at \$300 billion in 2022 and is projected to grow significantly, with queuing systems being a niche but essential segment.

- Trends and Opportunities:

- Increased digitization in healthcare operations.
- Rising focus on patient-centric care.
- Advancements in AI and IoT providing opportunities to enhance queue management with real-time data and analytics.

### **c. Customer Segmentation**

- Primary Segments:

- Hospitals, clinics, emergency care centers, and healthcare service providers.

- User Needs and Preferences:

- Hospitals require systems that efficiently manage patient flow and prioritize critical cases.
- Users prefer intuitive systems with features like real-time notifications, easy categorization, and seamless integration with existing IT systems.

## **3. Financial Feasibility**

### **a. Cost Analysis**

- Development Costs:

- Software Development: ₹50000- ₹80000 (includes system design, algorithm development, and interface design).
- Hardware: ₹10000 - ₹20000 (if integrated with IoT devices for tracking).
- Testing and Quality Assurance: ₹1000- ₹3000.
- Miscellaneous Costs: ₹5000 (includes setup, regulatory compliance, and operational expenses).

- Operational Costs:

- Maintenance and Updates: ₹2500 annually.
- Customer Support: ₹6000annually.
- Marketing and Promotion: ₹8000annually.

- Total Investment Required:
  - Initial Investment: ₹80000- ₹90000

## **b. Revenue Model**

- Revenue Streams:
  - Subscription Fees: Hospitals pay for monthly or yearly subscriptions for accessing the system.
  - Licensing: Licensing the system to healthcare networks and chains.
  - Integration Fees: One-time fees for integrating with existing systems.
- Pricing Strategy:
  1. Red (Emergency Cases):
    - Highest priority, immediate attention.
    - Pricing: ₹5,000 - ₹8,000 per consultation or treatment.
  2. Yellow (Regular Cases):
    - Medium priority, requires timely care but not urgent.
    - Pricing: ₹2,000 - ₹3,500 per consultation or treatment.
  3. White (New or Low-Priority Cases):
    - Lowest priority, can wait longer or schedule later.
    - Pricing: ₹800 - ₹1,500 per consultation or treatment.

## **c. Financial Projections**

- Break-Even Analysis:
  - Expected to reach break-even within 2-3 years based on market penetration and user acquisition.
- Profit and Loss Projection:
  - Year 1: Loss of ₹30000 - ₹50000.

- Year 2: Profit of ₹20000 - ₹45000.

- Year 3: Profit of ₹80000- ₹100000

- Return on Investment (ROI):

- Estimated ROI of 25-35% by the end of the third year, assuming successful implementation and adoption.

#### **4. Feasibility Verification**

- Consultation with Guide:

- Guide's Name: Prof. Swati Singh

- Comments:

- Signature: \_\_\_\_\_

- Date: \_\_\_\_\_

#### **5. Additional Remarks**

- Scalability: The system can be expanded with additional features like multilingual support and advanced analytics.

- User Adoption: High potential in healthcare markets due to the growing emphasis on patient satisfaction.

- Market Trends: Aligned with increasing digitization and patient-centered healthcare delivery.

- Risk Management: Ensure data security, compliance with healthcare regulations, and robust backup mechanisms.

- Feedback Integration: Regular updates based on user feedback to enhance functionality and user experience.

## 6. Approval

- Researcher/Student Signature: \_\_\_\_\_

- Date: \_\_\_\_\_

- Institutional Approval (if applicable):

- Signature: \_\_\_\_\_

- Name: \_\_\_\_\_

- Designation: \_\_\_\_\_

- Date: \_\_\_\_\_