

WELCOME TO CBEMRS

SIGN IN

1.1

INDIVIDUAL

1.2

MEDICAL PERSONNEL

1.3

MEDICAL FACILITY

NEW TO CBEMRS?

SIGN UP

1.4

LOGO

1.1(a)

FIRST NAME:

SURNAME:

OTHER NAMES:

DATE OF BIRTH:

AGE:

DISTRICT OF ORIGIN:

RESIDENTIAL ADDRESS:

CONTACT:

NEXT OF KIN ①

NAME:

ADDRESS:

RELATIONSHIP:

EMAIL ADDRESS:

CONTACT:

NEXT OF KIN ②

"

"

"

EMAIL ADDRESS

CREATE PASSWORD

RE-ENTER PASSWORD

SUBMIT

* After full registration
an access number
is assigned

* Button becomes active
after all fields

2.1

LOGO

CBEMRS

INDIVIDUAL ACCESS

2

Sign out after
2 hours

SIGN IN

ACCESS NUMBER / PHONE NUMBER

2a

* Signing in with the
hospital

2b

PASSWORD

2c

SUBMIT

+ To get OTP

1

ONETIME ACCESS CODE (SENT TO PHONE NUMBER)
(An SMS has been sent to 071234567)

2d

* Auto detect

2e

SIGN IN

(* I do not have my phone : Try another option)

2f

* This is where next
kin come in.

3.

LOGO

CBEMRS - INDIVIDUAL ACCESS [MATSIKO IAN]
[Name of Individual]

(w) MI

	MY DOCTORS (P)	CALENDAR (with AR appointment highlighted) (Q)	NOTIFICATION (P)	VICKI APPOINTMENT (Q)	VITALS (r)	ALLERGIES & OTHER (c)	PATIENT BIODATA (t)	PATIENT HISTORY (u)	PATIENT INFO (v)
a)	Add Visit	- ~	- ~	- ~	- ~	- ~	- ~	- ~	- ~
b)	Tests	- ~	- ~	- ~	- ~	- ~	- ~	- ~	- ~
c)	Scans/ Imagines	- ~	- ~	- ~	- ~	- ~	- ~	- ~	- ~
d)	Vaccinations	- ~	- ~	- ~	- ~	- ~	- ~	- ~	- ~
e)	Upload Scanned	- ~	- ~	- ~	- ~	- ~	- ~	- ~	- ~
f)	Referrals	- ~	- ~	- ~	- ~	- ~	- ~	- ~	- ~
g)	Drug Schedule	- ~	- ~	- ~	- ~	- ~	- ~	- ~	- ~
h)	Visit History	- ~	- ~	- ~	- ~	- ~	- ~	- ~	- ~
i)	Billing	SCANNED Recurring (n)	- ~	- ~	- ~	- ~	- ~	- ~	- ~
j)	About the CBM	- ~	- ~	- ~	- ~	- ~	- ~	- ~	- ~

(l)

(m)

(n)

DISPLA
Y
PAGE

8.

SIGN UP

Would you like to begin?
Select an option:

8.1

INDIVIDUAL

8.2

MEDICAL PERSONNEL

8.3

MEDICAL FACILITY

(LOGO)

1.2 (cm)

FIRST NAME:

SURNAME:

OTHER NAMES:

SPECIALITY:

*CURRENT FACILITY:

EMAIL ADDRESS (PERSONAL):

PROFESSIONAL EMAIL ADDRESS:

POSITION AT FACILITY.

CONTACT:

EMPLOYMENT ID NO.:

CREATE PASSWORD = RE-ENTER PASSWORD
* After signing up, an access number is assigned.

SUBMIT

5.000

CBE MRI DOCTOR / MEDICAL PERSONNEL ACCESS.

Auto
Sign Out
after 12 hours.

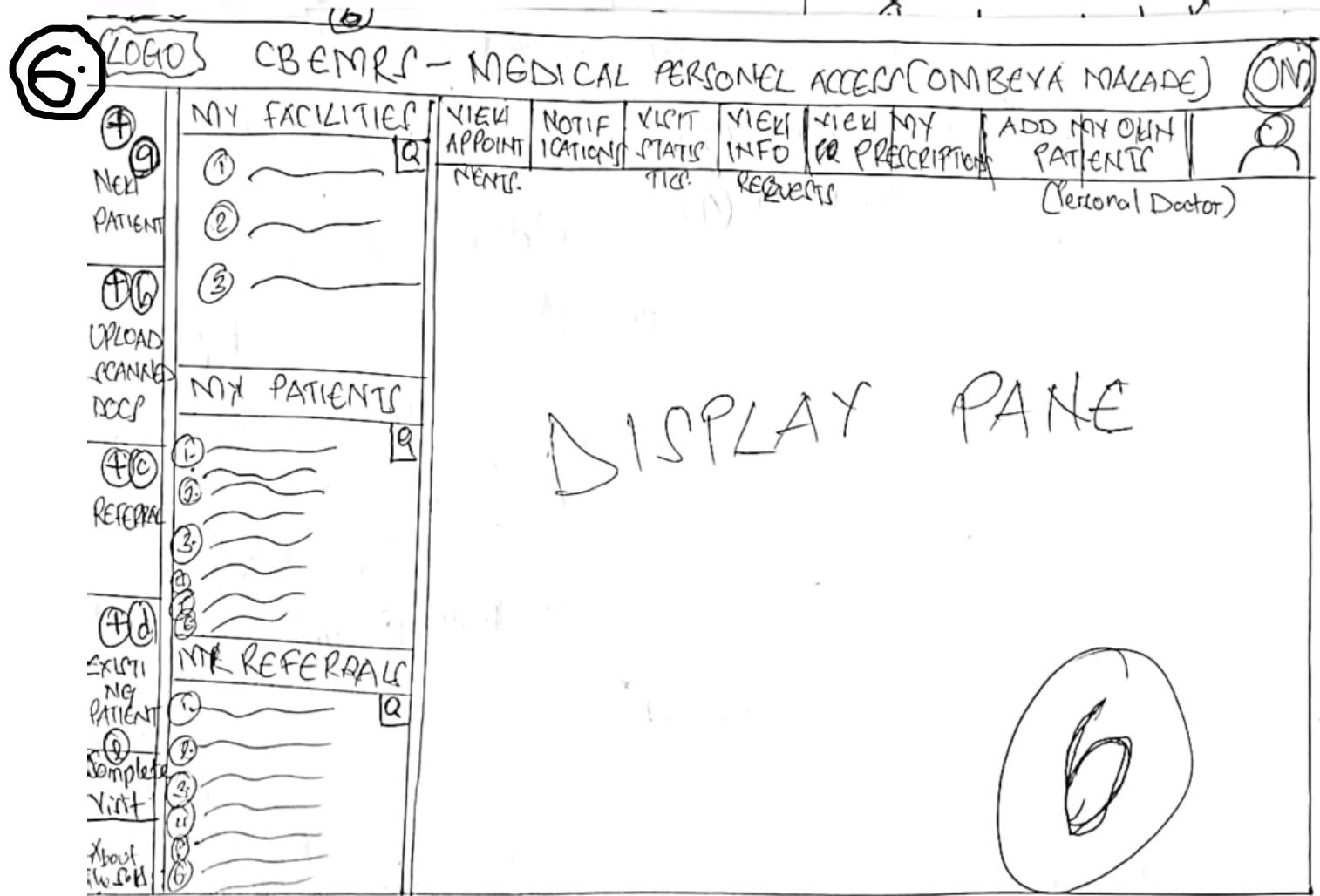
SIGN IN

MEDIC'S ACCESS NUMBER

PASSWORD

ONE TIME ACCESS CODE

SIGN IN



(Logo)

1.3(a)

NAME OF FACILITY:

LOCATION:
(ADDRESS)

OFFICIAL CONTACTS:
①
②
③

Send Auth
code to Email

DOCTOR INCHARGE

NAME

CONTACT

EMAIL

Send Auth
code to Email
Mobile
number

FACILITY EMAIL ADDRESS

CREATE PASSWORD: RE-ENTER P. W.L.

(REGISTER)

4. (Logo)

CBEMRS

FACILITY ACCESS

LOG IN

Sign Out
1 week

FACILITY NAME

FACILITY ACCESS NUMBER.

PASSWORD.

OTP

(Sent to facility's Email)

(LOGIN)

7.

(LOGO)

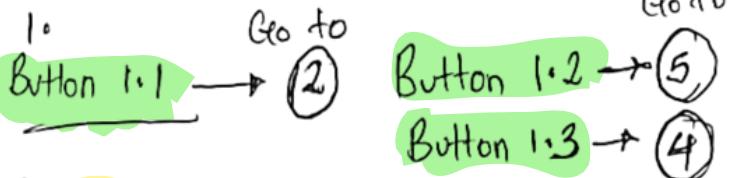
CBEMRSC - FACILITY VIEW (ROMAMBOGA CC)

RCC

	DOCTORS (UPDATE)				
	PATIENTS (UPDATE)				
	REFERRALS TO FROM				
	AFFILIATES (UPDATE)				

DISPLAY PAGE

FUNCTIONALITY



Button 2.1 → Ensure all fields are filled

Once 2.1 is pressed, a one time password is sent via sms (Daniel's part) to the registered phone number.

Field 2a → takes in the access number.

* the access number is assigned on registration. It is a combination of:

for individual:

(1st letter of surname) + (1st 3 letters of other name) + (day of birth) + year of birth

→ 10 digits e.g

Lcol 202000

mian 261999

for medical personnel

(first 4 letters of doctor's surname) +

(4 letters from the abbreviation of the facility the medic works for) +

(medic's year of birth)

e.g MATIKO IAN SE21

works at Mulago National Referral hospital and was born in 1999.

→ matsmnrh1999 (12 digits)

* if the hospital name is less than

for facility

(Letters of facility) +
abc

(4 letters from the abbreviation of the facility name) + @ +

(1st 4 letters from the town's name where the facility is located) + (9 digits)

e.g mnrh@kamp

o o After registration, the software is configured to assign the access number by checking the filled fields and creating the number.

Field 2b

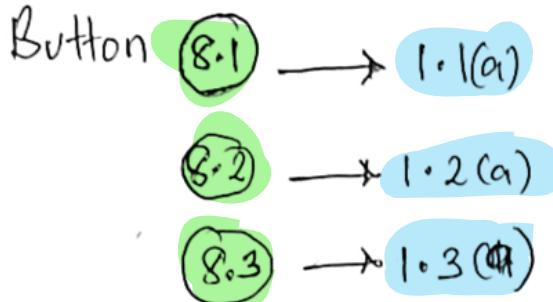
The password shall be atleast 8 digits and atmost 20 digits (Daniel's part) → Security.

field 2c

One time password.

(Daniel's Part also)

Button 1.4 → ~~8~~ ⑧



for fields 1.1(a), 1.2(a), 1.3(b),

fields of entry should take in respective data types i.e. date, char, varchar, strings of text, decimals etc.

- * for the password part, [Daniel]
- * The submit button only becomes active after all fields have been filled.
- * Send Authentication code to phone for doctor & individual, for facility, send to email.

Submit button → takes you to

the access page for individual, medical personnel or facility respectively

Sign in button

Button 2.3 (try another option)

- * In this case, a page is displayed prompting the user to enter 2 codes sent to each of the 2 next of kin. The patient individual is so expected to call them.

3. The Individual Access Panel should be basically a display panel -

Patients are only allowed to update Allergies, Upload scanned documents, Update Insurance & add doctors.

Other changes are made on the medical personnel end.

6. On Medical Personnel Access;

when the **New patient button** is pressed.

Hover

On the side; display;

Patient Access Number
Submit

After submit is pressed;

An OTP is sent to

the patient's phone;

The doctor Enters the
OTP

Enter OTP sent to Patient
Submit

Display Pane then displays as follows;

STATIC

PATIENT'S NAME

Add	Test	Medical Imaging	Enter Diagnosis	Prescribe	Add Vitals	Allergies	Update	Print	Vaccination
6(a)	6(b)	6(c)	6(f)	6(g)	6(h)	6(i)	6(j)	6(k)	6(l)

SAXIC

Visits

Level (1)

Level (2)

→ Free Access

MINI DISPLAY PANE

→ Limited Access (Patient Verification required)

③ → INDIVIDUAL Access Page.

6. a) Add Visit. → Display Pane.

Patient Info:	
Full Name:	<input type="text"/>
DOB:	<input type="text"/>
Gender:	<input type="text"/>
Address: <input type="text"/>	
Phone Number:	<input type="text"/>
Email: <input type="text"/>	
Medical History:	
Allergies:	<input type="text"/>
Previous surgeries:	<input type="text"/>
Family Medical History:	<input type="text"/>
Chronic Illnesses:	<input type="text"/>
Medications currently taking:	<input type="text"/>
Other medical Conditions:	<input type="text"/>
Reason for Visit:	
<input type="text"/>	
Test Results / Diagnosis:	
<input type="text"/>	Diagnosis: <input type="text"/>
Other Useful Information:	
<input type="text"/>	
Emergency contact info:	
<input type="text"/>	
Referral Note:	
<input type="text"/>	
Doctor Credentials:	
<input type="text"/>	

Auto fill from DB

Auto fill from DB

b) Tests.

Scan/Lab Report
upload

Enter Relevant Info on Tests

c)

Scans / Imaging → ~~Display~~ Display Pane.

Upload Image
Upload Image
Upload Image

Enter Relevant Info

d)

Vaccinations → Appear on hovering

<input type="radio"/>	Polio	Upload
<input type="radio"/>	Covid 19.	Upload
<input type="radio"/>	Yellow fever	Upload
<input type="radio"/>	DPT	Upload
<input type="radio"/>	ETC	Upload

List all other Known Vaccines

Upload Vaccines

e)

Referrals: Go to 6(a)

f)

Enter Diagnosis → Display Pane.

Please Enter Diagnosis

Upload Upload Upload

Submit

6(g) Prescribe Drugs → ~~Display~~ Display pane

DRUG NAME	Time			
Valk Plus SP	(2) Tabs.	(4) times a day	8:00	9:00
			12:00	6:00

total tabs

1. Paracetamol

2. O tabs O times

Up to 10 fields

* Applies for Syrups, Injections etc

* This updates the database on medications being taken & History of medications

6(h) Update Vital → ~~Display~~ Display pane

:Blood Pressure
:Heart Rate
:Blood Sugar
etc.

Save.

6(i) Allergies

Pollen	<input type="radio"/>
Honey	<input checked="" type="radio"/>
Nuts	<input type="radio"/>
Coldness	<input type="radio"/>
Dust	<input type="radio"/>

6(i) Update Biodata

Display Biodata form & Allow Access No: ABCD123456, changes

Surname: Age:

First Name: Gender:

Other Names:

Address:

Postal Address:

Occupation:

Tribe: Marital Status:

Gender:

Next of Kin:

① NAME:
CONTACT:
ACCESS NO:

②

③

Father's Name:

Father's Access No:

Mother's Name:

Mother's Access No:

Email:

Contact no: ①
②
③

Additional Religion:

Additional Information:

Fields like Name, Access No, Age, Gender, Tribe should be unchangeable.

6(K) Print Medical Form

Should be a summary

of: 6(a), b, c, d,
e, f, g, h, i, j

Leave out