



RapidCare – Team# 25

- Smart EHR System

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Agenda

- Problem Overview
- What Could We Do?
- Solution Overview
- Demo
- Key Components
- Design and Architecture
- Impact Of The Solution
- What Next?
- Q/A

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Problem Overview

- **Extreme shortage** of family doctors in Ontario [1]
 - Number of patients without one will rise from **600,000 to 2.5 million** [2]
- **Massive wait times in ERs**
 - With average length of stay 22.7 hours [3]
 - Patients leaving without being seen
- Healthcare professionals have a **massive documentation overhead** in their day to day
 - Solutions exist, with **complex UI**
 - **Hard to traverse** through patient **data**

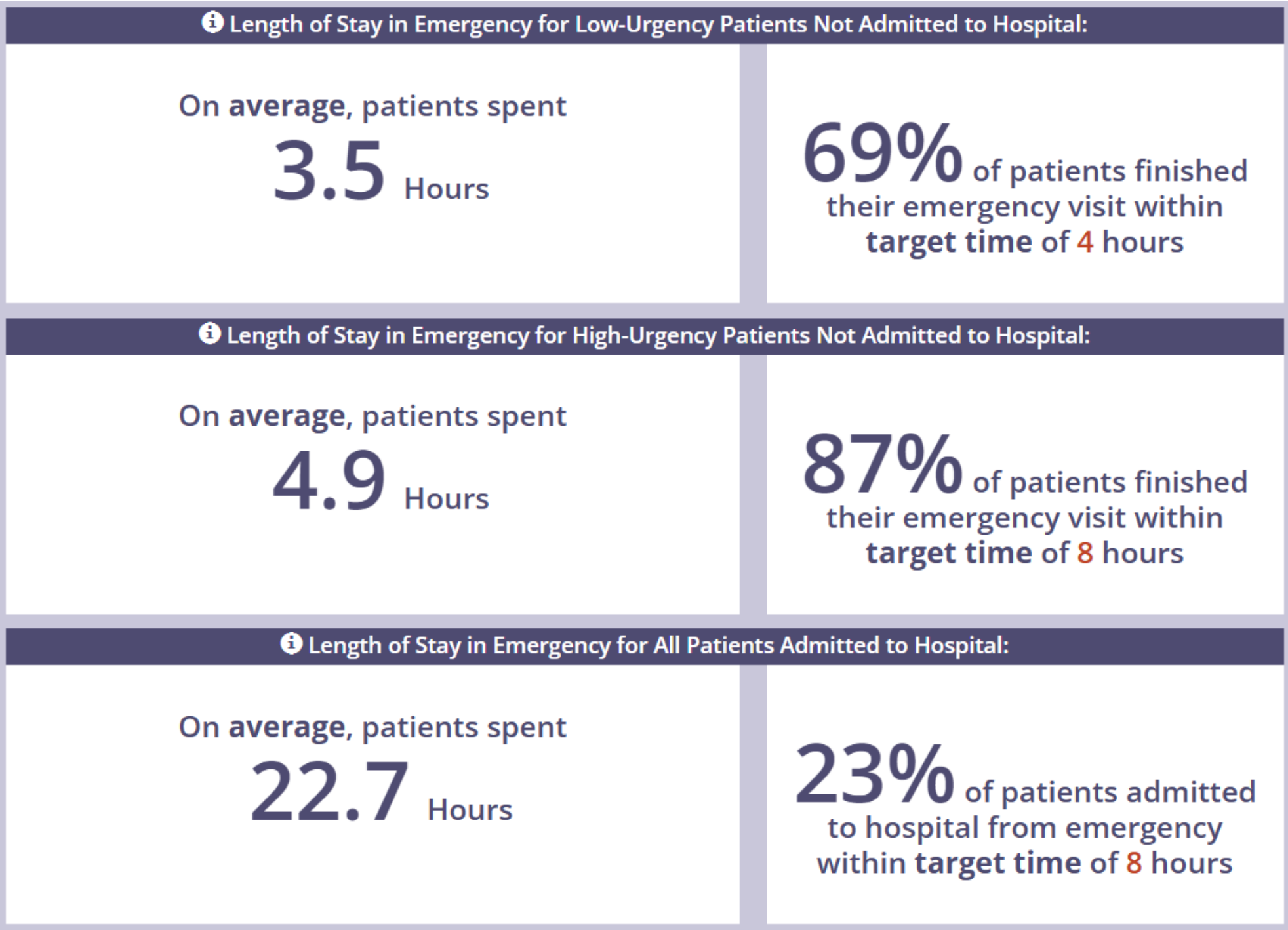
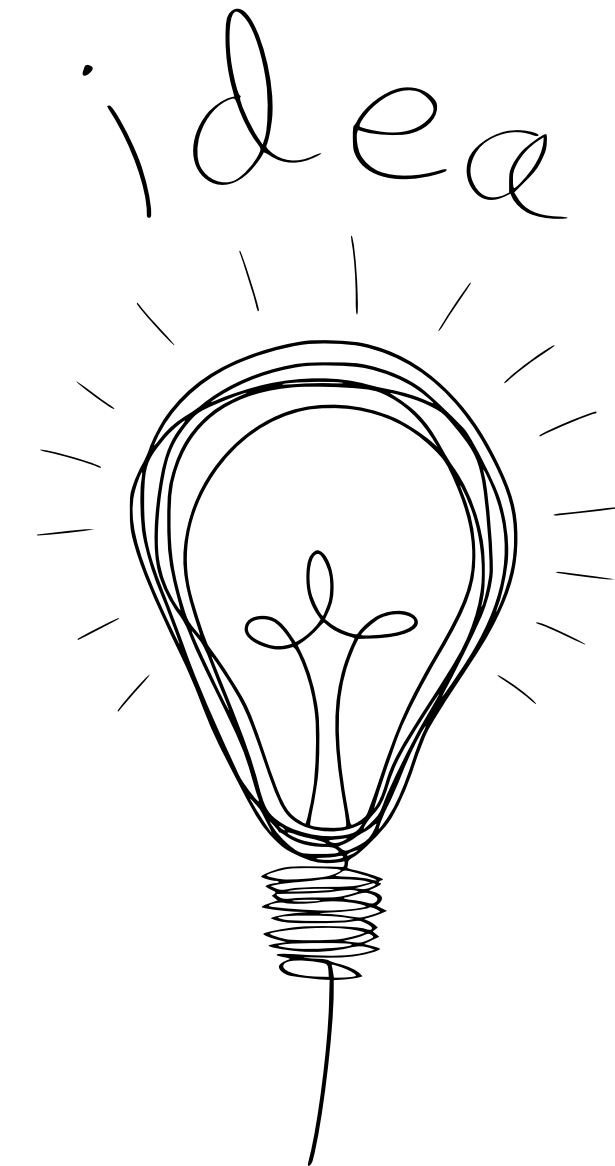


Figure 1: Stats for Wait times in ER [3]

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What Could We Do?

- The NLP techniques and speech recognition software have made significant advancements in recent years
- These technologies can be adapted to improve accuracy and efficiency of healthcare workflows
- Retrieval and Generation can be used to provide diagnostic and medication suggestions based on accepted documentation
- Improve User Interface to improve user experience



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Solution Overview

- Effectively record and store patient data, clinical notes, treatment plans with **real-time data access**
- Record, transcribe, and classify patient-doctor interactions to **automatically fill patient records**
- Provide **comprehensive diagnosis predication**
- Comprehensive action plan** to address diagnosis prediction
- AI Assistant**, to **query** patient previous visits and **health conditions**
- High discoverability** and **clear affordances** for admin and healthcare professionals

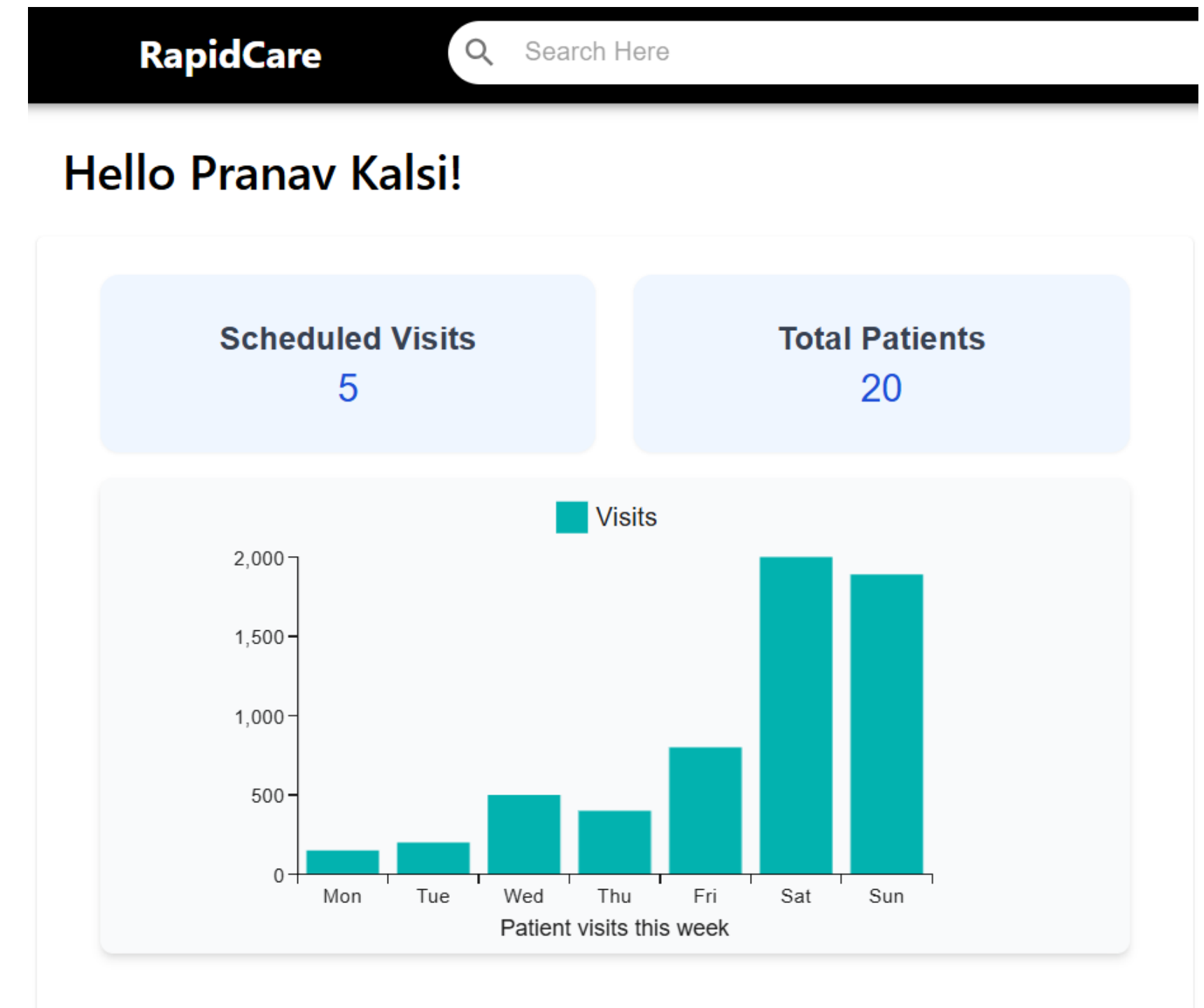


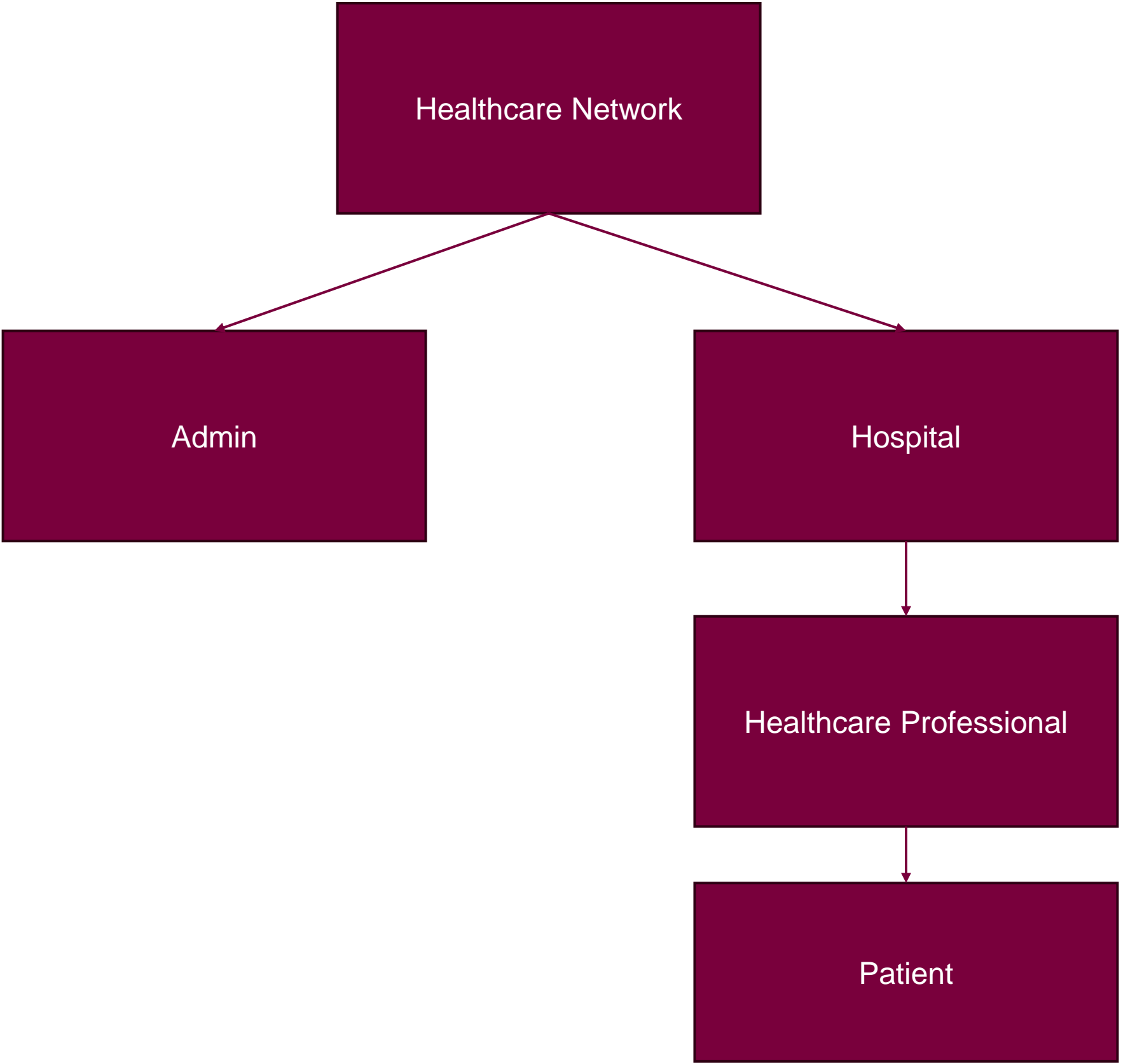
Figure 2: Snapshot of RapidCare dashboard



Background on Healthcare Networks

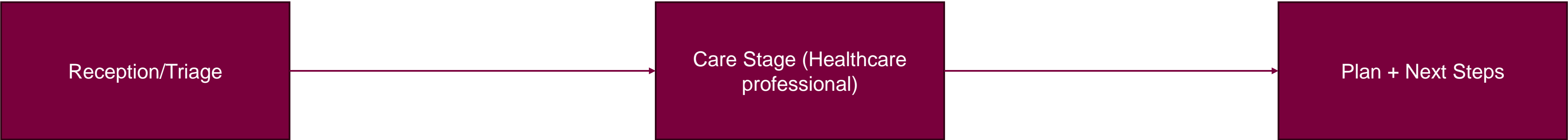
Health Care Network

Brief Overview



Health Care Network

Patient – Treatment Interaction





Application Demo

Let's checkout the app!



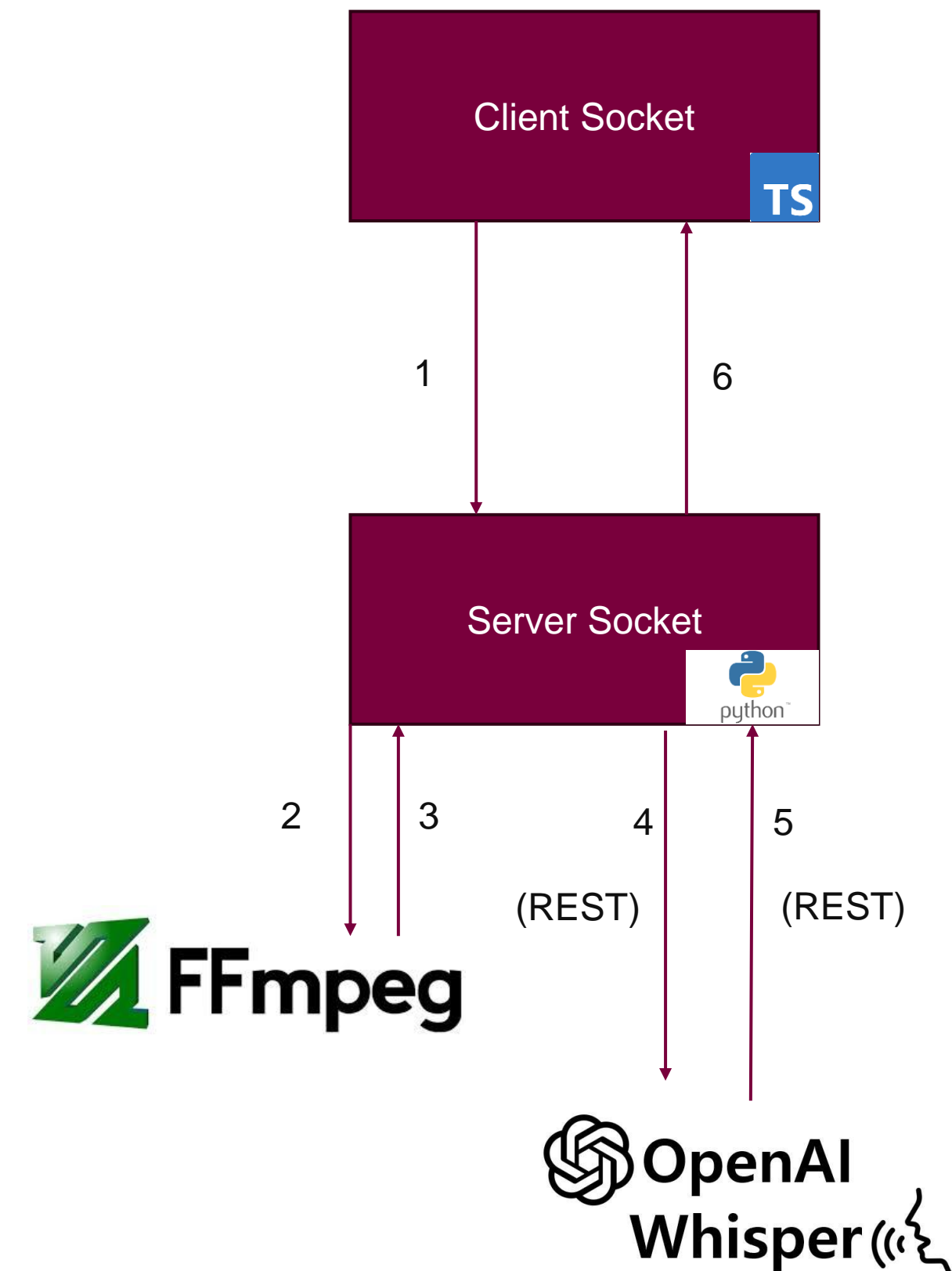
Interactions within the key components.

Inside operation.

Voice-to-Text Transcription

The Insides

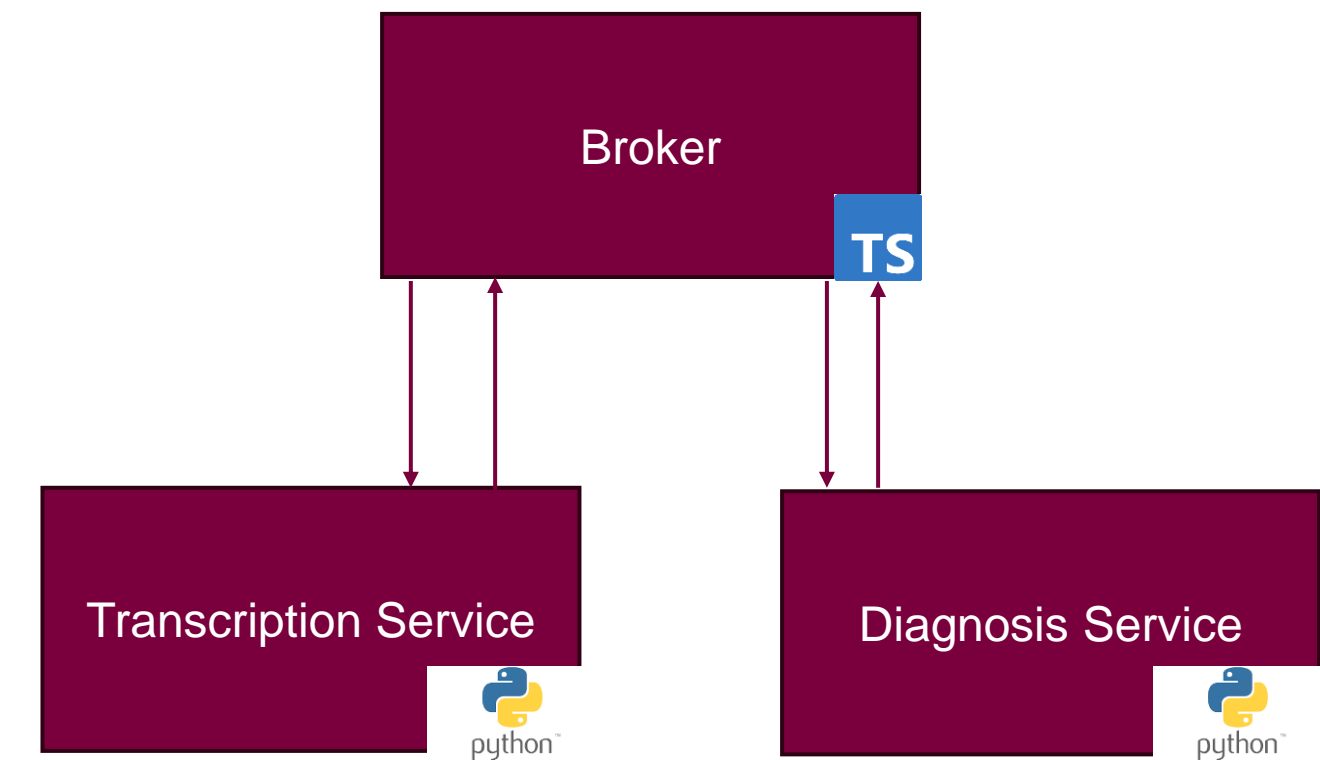
- Using **socket communication**, the frontend records and sends audio bytes to the backend.
- Backend service receive the bytes converts into an audio format (webm)
- Sends the webm over to **Whisper for Classification**



Diagnosis + Plan Prediction

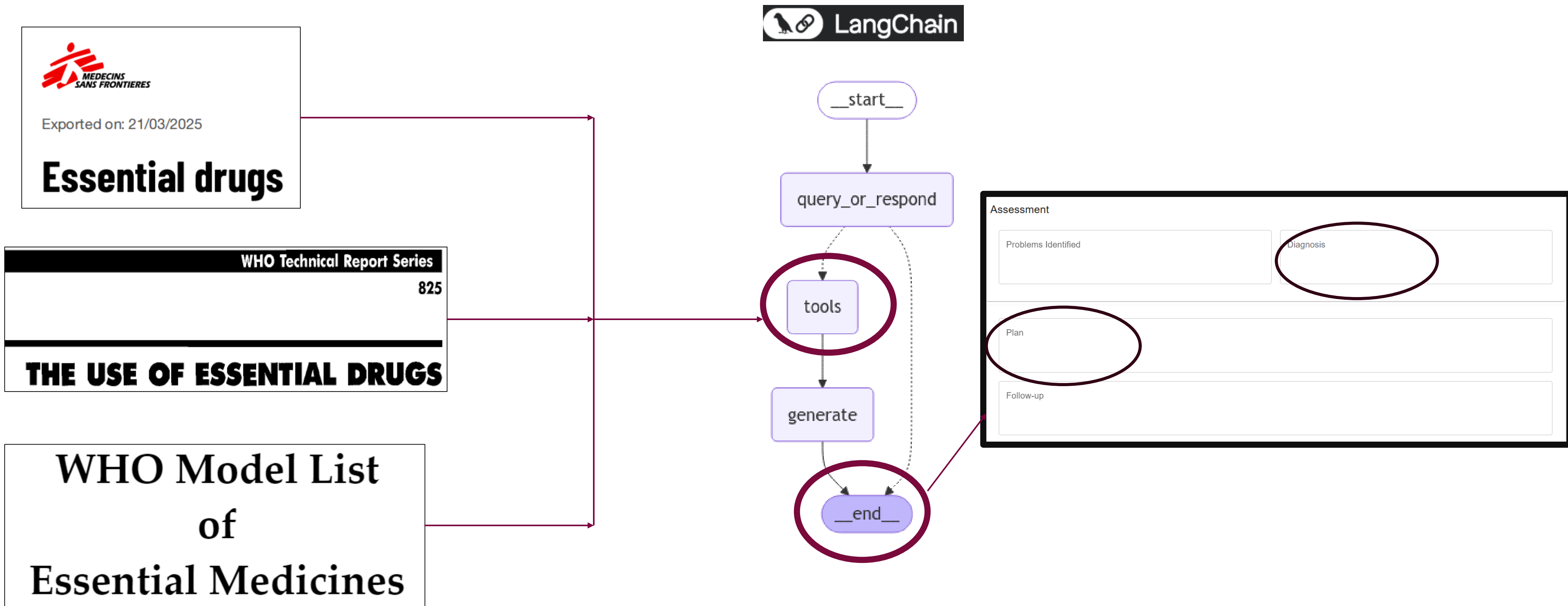
The Insides

- Based on patient doctor **conversation** provide an **analysis** of what possible **diagnosis** could **apply**.
- Based on the **analysis** provides a **plan** of actions and **medicines** based on **supported context**.
- The **context** for the **model** is **reputed** and **accepted standard protocols** such that the outputs are **focused to certain norms**.



Diagnosis + Plan Prediction- Context Based Reponses

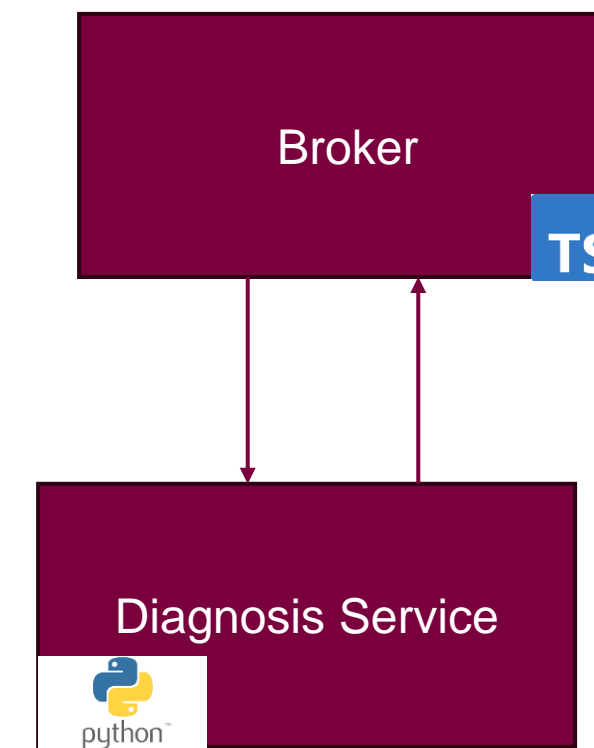
RAG Architecture



AI Assist

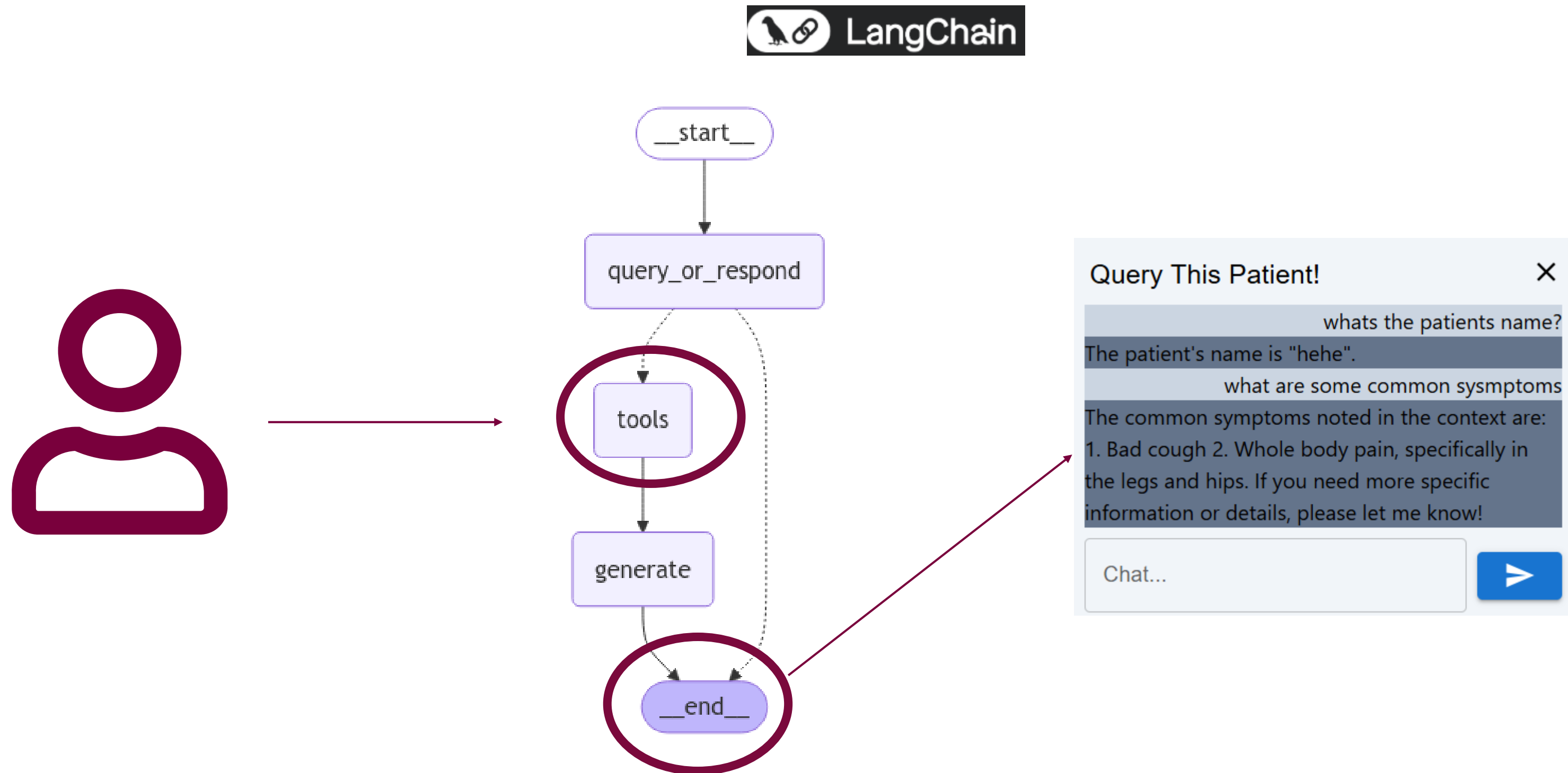
The Insides

- Based on the patient context, provides information on the patient.
- Can **improve data-lookup efficiency**, current solutions provide poor functionality.
- Functionality **can be extended** to adding more context for other conversation base interactions.



AI Assistant - Context Based Responses

RAG Architecture



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Design and Architecture

- Adapted Model-View-Controller (MVC) architecture
 - Easily **extendable design** as new features and services are added
- Single responsibility principle
 - Each microservice (transcription, classification, AI assist etc.) has **single responsibility**
 - Ensures **cleaner, maintainable, and scalable code** while minimizing technical debt
- Human-Computer Interaction (HCI) Principles for UI
 - Key features and actions are **discoverable**, reducing cognitive load
 - Appropriate **feedback** such that users are never lost.

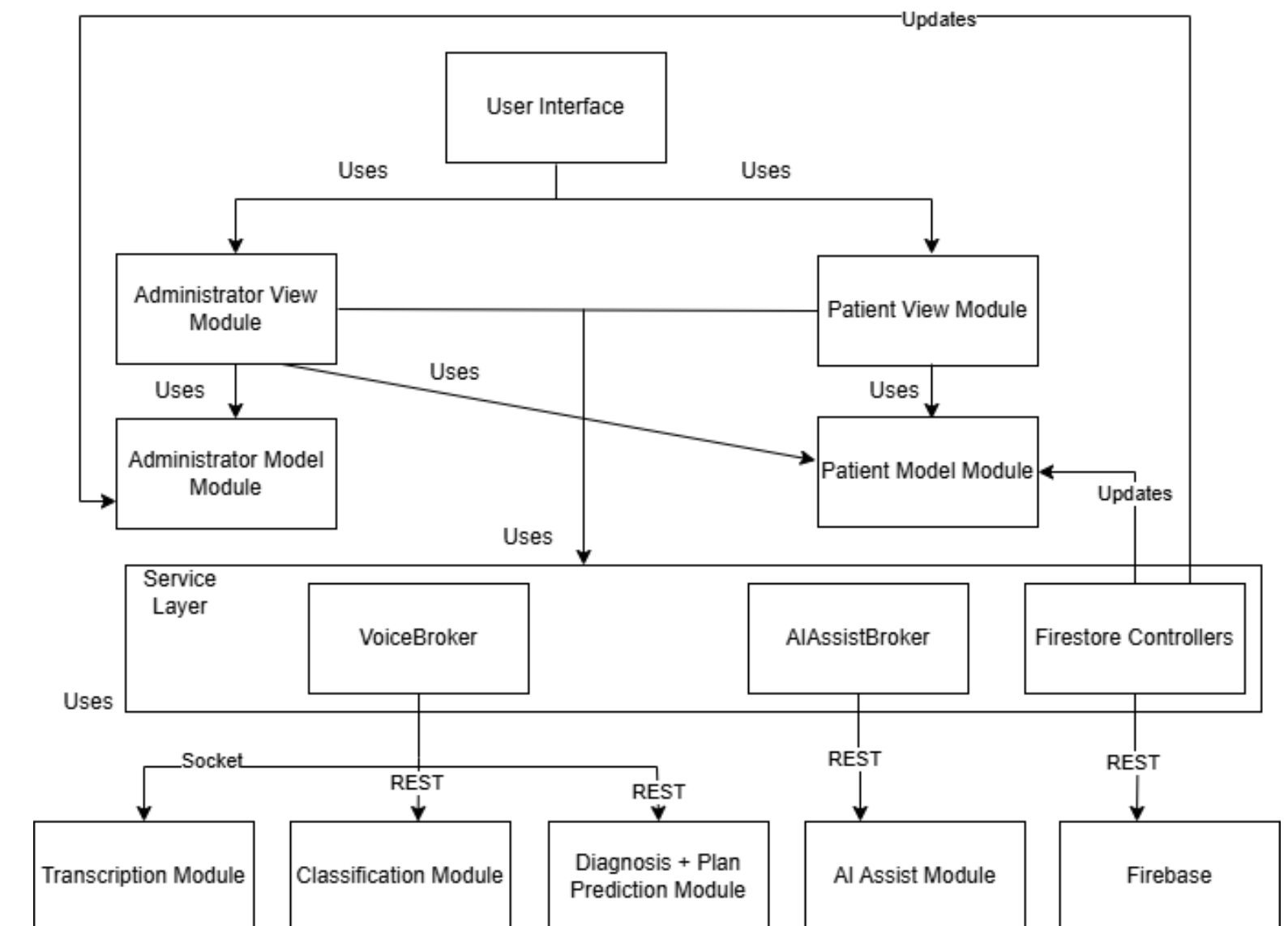


Figure 3: System design diagram

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Impacts of the Solution

- ✓ **Improved access to healthcare for patients**

- Reduction in documentation and administrative overhead
- Reduction in ER wait times and patient flow

- ✓ **Improved User experience**

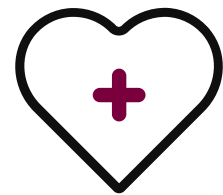
- UI follows HCI principles ensuring ease of use and user-friendly interaction
- Intuitive and easy to navigate UI, minimizing learning curve

- ✓ **Improved patient data management**

- Comprehensive data modelling ensuring accuracy and reliability
- Real-time data access facilitating quick decision making

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What Next?



- **Expand functionality to auto-generate prescriptions, referrals**

- Faster decision making and enhances efficiency
- Reduce errors



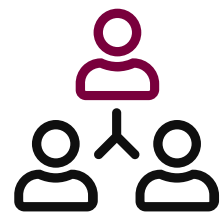
- **Seamless integration with blood work labs and diagnostic centres**

- Improved data exchange
- Streamlined workflows



- **Advanced workflow analytics for hospitals and clinics**

- Optimize operations
- AI prompting the patient for more detail to further improve diagnosis suggestions
- Help hospitals to better allocate resources



- **Multi-language support for healthcare professionals**

- Improves accessibility for diverse populations

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References

- [1] N. Ireland, “2.5 million Ontarians don’t have a family doctor, college says | CBC News,” CBCnews, <https://www.cbc.ca/news/canada/toronto/ontario-family-doctor-shortage-record-high-1.7261558> (accessed Mar. 29, 2025).
- [2] Ryan Patrick Jones, “Family doctor shortage affects every region and is getting worse, Ontario Medical Association says,” CBC, <https://www.cbc.ca/news/canada/toronto/family-doctor-shortage-oma-1.7097935> accessed Mar. 29, 2025).
- [3] Let’s make our health system healthier, “System performance,” Emergency Department Time Spent by Patients in Ontario – Health Quality Ontario (HQO), <https://www.hqontario.ca/system-performance/time-spent-in-emergency-departments> (accessed Mar. 29, 2025).
- [4] I. Yuan, Human Computer Interfaces, Lecture: “Norman Principles”, Faculty of Engineering, McMaster University, Hamilton, October 2024.
- [5] “TypeScript,” Wikipedia, <https://en.wikipedia.org/wiki/TypeScript> (accessed Mar. 29, 2025).
- [6] “Python (programming language),” Wikipedia, https://en.wikipedia.org/wiki/Python_%28programming_language%29 (accessed Mar. 29, 2025).
- [7] “Build a retrieval augmented generation (RAG) app: Part 2,” LangChain, https://python.langchain.com/docs/tutorials/qa_chat_history/ (accessed Mar. 29, 2025).
- [8] Aiaaic, “Getting to grips with ... Whisper Ai,” Getting to grips with ... Whisper AI, <https://aiaaicalert.substack.com/p/getting-to-grips-with-whisper-ai> (accessed Mar. 29, 2025).

Thank you!

Questions?

