Top 10 MVP use cases

1. **1. Patient Registers and Verifies Account**
   Why in: You can't have an EMR without patients. Establishes identity, authentication, and basic consent. Sets the foundation for portal access and future features.

2. **2. Admin Creates HCP User with Specialty Role**
   Why in: Role-based access control is table stakes for safety and compliance. Clinicians need accounts and privileges before any clinical workflow can run.

3. **3. Nurse Records Patient Vitals During Check-in**
   Why in: Vitals are the core of a clinical encounter and feed everything else (decision support, documentation, and longitudinal trends).

4. **4. Physician Documents Office Visit with Diagnosis**
   Why in: The clinician note + structured diagnoses are the EMR's heartbeat. Without visit documentation, downstream orders, billing, and continuity of care break.

5. **5. Provider Issues an E-Prescription**
   Why in: Meds are a high-value, high-frequency workflow. E-Rx unlocks tangible utility for patients and providers and is often a key adoption driver.

6. **6. Lab Technician Records Test Results**
   Why in: Labs are the other half of core clinical data. Recording and releasing results is essential for care decisions and patient engagement.

7. **7. Secure Patient–Clinic Messaging**
   Why in: Lightweight communication reduces phone tags, improves adherence, and is now an expected baseline feature in modern EMRs/portals.

8. **9. OB/GYN Prenatal Visit Documentation**
   Why in: We include **one** specialty template to prove the templating framework and configurable clinical forms (any site can swap OB for another specialty later). It demonstrates the pattern without bloating the MVP.

9. **10. Compliance Officer Reviews Audit Logs**
   Why in: HIPAA-grade auditing from day one. You need access trails before you scale users or integrate external systems.

10. **22. Nutrition-specific Consent Management and Privacy**
   Why in: Even if nutrition modules come later, granular consent infrastructure is foundational across the EMR. We'll implement it generically (the UI/text can mention

nutrition now; the engine serves all data domains).