The system will offer an alternative means of registration, booking, communication, and payment for hospitals. The video conferencing component to be introduced will enable patients to consult with doctors at any location and time, while the ticketing system will enable booking and queuing either virtually or physically. The process is as explained in this scenario, which will also be a reflection of the daily operations.

***Scenario****: Patient A, a male, has violent diarrhea, nausea, stomach cramps, is vomiting, and is incapacitated or cannot get to the hospital of his choice which is an hour away. The hospital might also be the only one accepting his insurance. He, however, has remote testing centers and chemists under our company close by.*

Say, the hospital of choice for patient A is Nairobi west hospital. The app will enable the patient to select Nairobi west hospital amongst the options. Upon accepting to register, the patient’s details, which will already be in the app’s database, will be sent to the hospital. Once registration is done, the patient specifies that he wants to see a general doctor. He fills in a questionnaire inquiring on his medical history and symptoms of his ailment, and saves the information to be used during the consultation. The ticketing system, which will have synced with Nairobi west’s, will show that there are say, 63, people ahead of him. It will then show him the progress of the consultations, as it ticks down from say, 59…60, till his ticket number is reached after which a notification will be sent to him, alerting him that his consultation is due. The system will also notify the doctor that the next patient, number 64, is not within the hospital premises and requires another form of conferencing, in this case, video conferencing (there will be other forms of communication available: call, text). The doctor then accepts the video conference request and consults with the patient, who outlines his symptoms as were described above. The doctor will also have access to the afore-mentioned structured questionnaire filled by the patient. Such a condition would obviously require testing to ascertain the cause, so the doctor will send prescribed tests in text form to the patient, who will receive them through the app. In this case, the prescribed test is a stool test to detect any presence of viruses in the digestive tract. Other minor tests such as blood pressure, temperature, weight/height will be made mandatory as complementary data to aid the doctor’s analysis. We will have remote testing centers, mostly clinics that we will collaborate with, where the patient will be able to go, give the test prescription and the doctor that referred him, and enter both into the system. After the test, the results will be sent directly, through the system again (the clinics will also have the system/ component incorporated), to both the doctor and the patient. A notification will then be shown to the doctor that the test results of patient A are back. Say, the results showed traces of *Entamoeba histolytica* parasites in the patient’s stool. Upon analyzing the results, the doctor will communicate the list of prescribed drugs or therapy to the patient through either of the channels available, and thereafter send them in text. The session will then be terminated upon receipt of the prescription by the patient, and the pre-paid consultation fees forwarded from our system to the hospital’s payment system. The same applies for the testing center. The treatment process, however, will still be ongoing and will be terminated later upon following up on the health of the patient and recommending any further actions, as will be explained later. Transition between virtual and physical consultations is key. Therefore, way before termination of the session, say after prescription of tests, the doctor will be able to revert to physical consultations as well as the ticketing system before the test results come back, which the doctor can also open at his convenience. The patient can then purchase the prescribed drugs through the closest pharmacy, or one of our testing centers which will also have chemists adjacent to them. Later, we will collaborate with existing drug delivery services for the purchase of drugs. Our system will make wellness checkups by the doctor mandatory. They will be scheduled about a week after the initial appointment, or on the day the prescribed drugs ought to have been finished. The patient will be given the option of carrying out the follow up consultation either on video conference, call, or text. If a video conference or call is selected, the patient will go through the same process of registration and ticketing on the day of appointment, after which the doctor will inquire on his health and improvement up to that point. A follow-up consultation will not incur any cost for the patient, and the doctor can recommend additional tests or drugs depending on how well the patient is doing, or request a physical consultation if deemed necessary. This will be a continuation of the previous consultation, and the doctor can only terminate the treatment process once it is ascertained the patient is fully recovered. This will ensure a wholesome and thorough treatment process, that will not only maintain the current standards of quality, but improve on them.