Information about different types of symbols in this document

Type	Description	Symbol/Format
Input Box	"__" surrounded by curly brackets	{_____}
Links	Text in red	About Us
Mandatory field	Asterisk after an input field	Password*
Button	Text surrounded by square brackets	**[Submit]**
Dropdown	"Dropdown" Text surrounded by square brackets	[Dropdown]
List	Text in a table	<table><tr><td>Mr. James</td><td>1pm</td></tr><tr><td>Mr. Neil</td><td>3pm</td></tr><tr><td>Mr. Karim</td><td>4pm</td></tr></table>
Checkboxes	" " or "x" enclosed inside Square brackets	[ ] Unchecked [x] Checked

Note: Medicine plan, Diet Plan and Doctor Availability Schedule will always have an empty row (of input) available to add entries to it, as soon as the enter button is pressed, a new empty row (of input) will be created to add more entries.

Main page

path: /

H+

Welcome to Health+

Description…

Login Page

path: /login

H+

Welcome to Health+

Login Credentials

Mobile/Email*: {_____}
Password*:　　　{_____}

[Login]

Create a new account: Signup

SignUp Page

path: /register

Welcome to Health+

Patient Registration

Firstname*: {_____}   Lastname*:{_____}
Date of Birth*: {_DD/MM/YYYY_}   Contact no.*: {_____}
Gender*: [dropdown (M/F/Oth)]   Email*: {_____}
Address line 1* : {_____}
Address line 2 : {_____}
Address line 3 : {_____}
State*: {_____}   City*: {_____}
Zip code*: {_____}
Verification Document type*: [dropdown (Aadhaar/PAN/VoterID/Driv-Lis)]
Verification Document number*: {_____}
Password*: {_____}   Confirm Password*: {_____}

[Submit]

Book appointment Page

path: /dashboard/book-appointment

(Automatic Scroll Banner)

Book an Appointment:

Book an Appointment:

Select Symptom*: [dropdown list of *common* symptoms]
Select Speciality*: [dropdown list of specialities]
Select Doctor*:   [dropdown list of doctors of those specialities]
Select Day*:   [Mon][Tue][Wed][Thur][Fri][Sat]
Select time*:   [T1][T2]

[Book]

Doctor's Portal Page

path: /dashboard

H+

S	M	T	W	T	F	S
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30
31						

Appointment List:

Patient Name	Time
Mr. Sunil	1pm
Mr. Shetty	3pm
Mr. Shahrukh	4pm
Mr. Salman	5pm
Mr. Aamir	6pm

Prescription Create Page

path: /dashboard/prescription/create/:id

Health+

Location…
Phone: …

Doctor Name
Doctor's Degree

_____

Patient Name: _(will be manually filled incase of IPD prescription)_   Date:17/07/2022
Age: __(will be automatically calculated and filled)__

Diagnosis*: {_____}

Investigation*: {_____}

Medicine Plan*:

Medicine Name	Dosage	Duration

[x] Diet Plan:

Food Name	Duration

Avoid: {_____}

Doctor Signature: __(will be automatically filled)__

Patients Report List

1. X-ray (pdf opens in new tab)
2. CT-scan
3. blood report
4. …

[Submit]

Prescription View Page

path: /dashboard/prescription/view/:id

Health+
Location…
Phone: …

Doctor Name
Doctor's Degree

_____

Patient Name: John Doe   Date:17/07/2022
Age: 53

Diagnosis: Blurred Vision

Investigation: Cataract

Medicine Plan:

Medicine Name	Dosage	Duration
Grenep	Twice a day	90 days

[ ] Diet Plan:

Food Name	Duration

Avoid: Direct contact of water with eyes

Doctor Signature: *Doctor Name*

Admin Portal

path: /dashboard
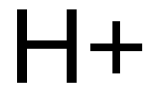
Links:

1. Verify patient

Patient's Portal Page

path: /dashboard

S	M	T	W	T	F	S
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30
31						

More options:

1. Book appointment

2. View All reports

3. View all prescriptions

Appointment List:

Doctor Name	Time
Mr. Sunil	1pm
Mr. Shetty	3pm
Mr. Shahrukh	4pm
Mr. Salman	5pm
Mr. Aamir	6pm

Cancel Appointment?

Are you sure you want to cancel the appointment?

[No]   [Yes]

Reports List page

path: /dashboard/reports

Reports

1. Some report name   x
   Link: https://.....

1. Some report name   x
   Link: https://.....

Prescription List page

path: /dashboard/prescriptions

Prescriptions

1. Prescription#1   x
   Doctor: Doctor Name
2. Prescription#2   x
   Doctor: Doctor Name

Admin – Patient Verification Page

path: /dashboard/verify

Patient ID*: {_____} **[Search]**

Patient Information

Firstname: Aamir   Lastname: Khan
Date of Birth: 01/01/2022   Contact no.: 1234567890
Gender: Male
Address line 1 : Central Avenue
Address line 2 : Park Street
Address line 3 : _____
State: West Bengal   City: Kolkata
Zip code: 700021
Verification Document type: Aadhaar Card
Verification Document number: 1234 5678 9012

[ ] Mark as verified
[ ] Mark as unverified   **[Cancel]**   **[Save]**
[ ] Block