Comments Matrix

# SNTSDEV – Final

Rhea Luz Valbuena

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| Comment | Response |
| Change “Product Backlog” to “User Stories” | The developers thought the Product Backlog and User Stories are the same. However, during the presentation, what they did is corrected to as User Stories instead of Product Backlog |
| Add a “super user” in Product Backlog (User Stories) | We will add “super user” in *User Classes and Characteristics* at page 12 table 2 and super user’s stories in *User Stories* at page 12 table 3. |
| What reports will be generated in the system?  i.e., View during actual operation and after transaction (Visit History) | These are the records that will be generated from the system:   * Individual Payment Records on either *General* or *Package* payment account for each patient * Daily Sales Report * Medical records for each patient * Medical history of the patient |
| What views would be at the mobile app and what views would be at the desktop | The developers will make the prototype for the mobile version of ADENICSY but for patient users only. This is because we want to still consider the timeframe of the delivery of the project and this patient user will be the ones who will need this version on the first phase of the implementation. |
| Organize the numbering of the paper. | The final paper on the developer’s side has correct numbering. Maybe someone viewed the file uploaded to the teams and something was mis clicked that mess up the numbering. Nevertheless, we will ensure that on the revised version that we will upload, it has a proper numbering. |
| Make a mobile application for the patient to do the responsiveness of the app in informing the patient which number is currently being served, sending a notification whether they need to go back already would be in the mobile app as well. | We will make a mobile version of the system that will specifically cater the patient user so that their needs in the system like the current number being served that is necessary to be real-time synced with the server will not cause delay. |
| Review product roadmap:  -Complete set of features in SNTSDEV.  User login, payment processing, appointment, SMS should be found in the prototype in SNSTDEV  -Enhanced feature and additional features will be in SSYADD1  - Working prototype with minimal features should be in SNSTDEV because that is scrum. | The developers have put the features that included in their scope on the prototype from page 15 – 30 fig. 7 – 37. Except for the SMS notification button for the admin’s side and the mobile version of the app.  Therefore, we will include in our revise paper the SMS notification page for modifying elements when sending an SMS to the patient from the admin’s side. Also, we will include the mobile version prototype of the app. |
| What are the **core features**? / Core business functions    These modules will be the structure of the website/ mobile app. | The core feature of ADENICSY is the following, which are also included already in the protype presented in the paper aside from the SMS notification and app’s mobile version.   * Making an **Appointment.** * **Search function** for patient information. * Viewing **Medical History** of the patient. * Viewing **Interactive teeth model.** * Managing of **Payment records.** * Viewing key performance in **Dashboard.** * Notifying patient thru **SMS and mobile version.** |

Lorena Rabago

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| Comment | Response |
| Payment management/ monitoring should be included in scope | Scope and Limitation has been updated in page 3 to include all the features that will be implemented in the system. |
| How “overwhelming” is “overwhelming” in the SOP? | Since Doc Lor said the “overwhelming” is subjective, we updated the number three specific SOP at page 2 to:  “*3. Number of patients surpass the limit of intended number of patient accommodation during salary period. (15th and 30th of the month)*” |
| I don’t know how queueing works. | The queueing technique of Apelo has been explained in the Project Context at page 1 second paragraph. |
| Government is into Medical Tourism, there’s no system in RRL reviewed for appointment system | There was a literature reviewed on the appointment system implemented on different clinics particularly in UAE that can be found at section 2.4 page 5 of the paper. |
| Include Payment management in your objective. | Since payment is one of the factors that cause the number of patients to heap at salary period (specific problem number 3). Payment Management will be included in number three of specific objective at page 2. Therefore, it now looks like this:  *“3. Make the appointment slot available a month ahead and provide insights via dashboard about monthly visitation date of the patients, active patients, and other key indicators. Also, manage the payment records in the system.”* |
| Mention that there is *terms and conditions* in the prototype part of the paper before the patient proceeds in registering their personal info and making an appointment | There is already a terms and conditions in for patient’s data privacy before making an appointment at page 22 before fig. 23. So, we will just add a terms and conditions for new patients before they register in the system. |

# SNTSDEV - Midterm

Rhea Luz Valbuena

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| Comment | Response |
| Change group name | The new group name is **Progmatiks**, the reason why we chose this are:   * Derived from the word pragmatics which means; *adj.* dealing with things sensibly and realistically in a way that is based on practical rather than theoretical considerations. * Program – matik, where *“matik”* is a Filipino slang that means automatic. Meaning, a team that automates a program. * Sound-alike to ProbleMATHics so that it will not cause much confusion. |
| Change project title | The new project title is **ADENICSY** which stands for Apelo Dental Clinic System. |
| Put additional RRL about dental clinic system then make a sub-section for better organization. | Make an outline/ flow of RRL:   * Related Dental Clinic System * Related Features * Appointment System * Interactive teeth model * How Dental Clinic System can help during scenario like Covid-19 |
| Improve SWOT Analysis | The SWOT Analysis will be improved further as we discover more about the business process of the clinic. (Located at section 4.1.3) |
| Improve objectives by answering “Why are you doing this project” and not the features that you will be developing. Follow SMART criteria | The main objective of this project is to improve the current system of Apelo Dental Clinic from processes such as admitting patient from the lobby, retrieval and storage of patient information and storing of payment records and processing. Thus, the developers want to achieve the following:   * Decrease the waiting time for patients in the lobby area to approximately 20 minutes – 1 hour. * Decrease the time for retrieval of patient’s information from approximately 3 minutes using index card to 2 seconds. * Decrease the time for retrieval of payment records from approximately 3 minutes using index card to 2 seconds and make it available to customer’s end. * Increase number of patients to be served around 10% based on the previous system.   (Located at section 1.3) |
| Propose Scheduling/Appointment System | The team will make a presentation for the initial idea of how the appointment system will work and present it to Dr. Apelo on 3rd week of May. |
| Add laptop in devices that you will make a prototype in your specific objectives. | Develop a prototype for PC, laptop, and tablet. (Located at section 1.3) |
| Check Abstract’s position in the paper | Miss Roselle will check this part on where the abstract should be positioned. Hence, we’ll just edit it accordingly. |
| In Plan to Integrate CAMSS, the ‘S’ after letter ‘M’ means “Social” and not “Social Media”. Therefore, revised your plan in Social in CAMSS. | The Plan is not part in the paper. Nevertheless, the plan to integrate ‘Social’ in the system to be developed will be the following:   * The patient can give feedback on each operation. * The patient can make suggestions or share their thought about their experience in the clinic. |
| Make a feature that automatically captures the information in the index card (uses NLP). | This feature is still tentative, but the developer will try to add this feature so that the transition from manual index card to computerized system will not be so hard. |
| Put quadrant in each tooth of the interactive teeth model. | Same to the related studies and systems that have been published on the internet, the developer will make a partition on each tooth like quadrant and one circle in the middle so that diagnosis will be more accurate. |