Brain Dump from Focus Group –

1. Cool with the data we have – list off side effects and how frequent one is as compared to the other (or how serious one is compared to the other). We could do this as proportion of adverse events or a ranking of severity.
   1. Data shows that it is either really bad or not bad at all
   2. Frequency versus severity
   3. When these side effects happened this resulted in death or some certain other severe issue
      1. Common side effects
      2. Uncommon side effects
      3. Rare side effects
2. Everyone bought into the geo-located alerts that goes into recalls, enforcement reports, etc. and can create a layered map.
   1. Search based upon geo-location that parses the data
      1. Question: How to you confine the location – point based or boundary based
3. Patent Portal
   1. Government responsibility to put things out there in a way to understand
      1. Finding the middle ground between the complex explanation and a simple explanation
      2. Pictures are helpful – especially if the language is the issue
4. Opt-in system for the development of items
5. \*\*Found a Pill Box on NIH that shows images of drugs\*\*
6. Don’t want Medical Information to go back to the Federal Government
   1. Even if we firewall the information, there would be a perception issue that would prevent the solutions usage

PIVOT!!!

Best idea would be to take the data that we have and see how well our customers can use that data. All of our respondents have said they have never thought about going to the FDA. Any technological solution has to come with a marketing campaign that creates awareness.

Do something basic to opt-in on this list to be notified if there is a recall alert in your location. If it located near you then you would get an alert.

Can we blow the search out to increase the search ability? Search for any recall information, but the purpose of the website is to get drug facts, but it can also be an avenue of a opt-in. So does Opt-in get around the PII information.

Move extra features down the priority list – focus on the geo-location plan.

Need to put personalized things down at the bottom of the backlog – initial results show that we need to run additional tests to ensure if we want to do these priorities or add these features to the website.

Prototype – Search a drug that comes up with interactions, severity, etc. Creating a google via the FDA information? Google for the FDA and Alerts based upon geo-location.

Do these two items showcase our lean start up expertise and user experience expertise which takes an existing tool and improves things dramatically.

Feeling that it isn’t enough features – lets list things out!

Design the prototype to load in one second or less on LTE speed.

Focused on documenting the features we want to work on for each sprint.

Want to be sure we are focusing on making the Medwatch user experience better via the data of open.fda.gov

Terese can mock up the alaerts page. Rick will work on the search side Mock ups.

Q: Do we built wide and shallow or do we build deep a narrow set??

Geo-location is not good (PIVOT) – can we search by batch number?