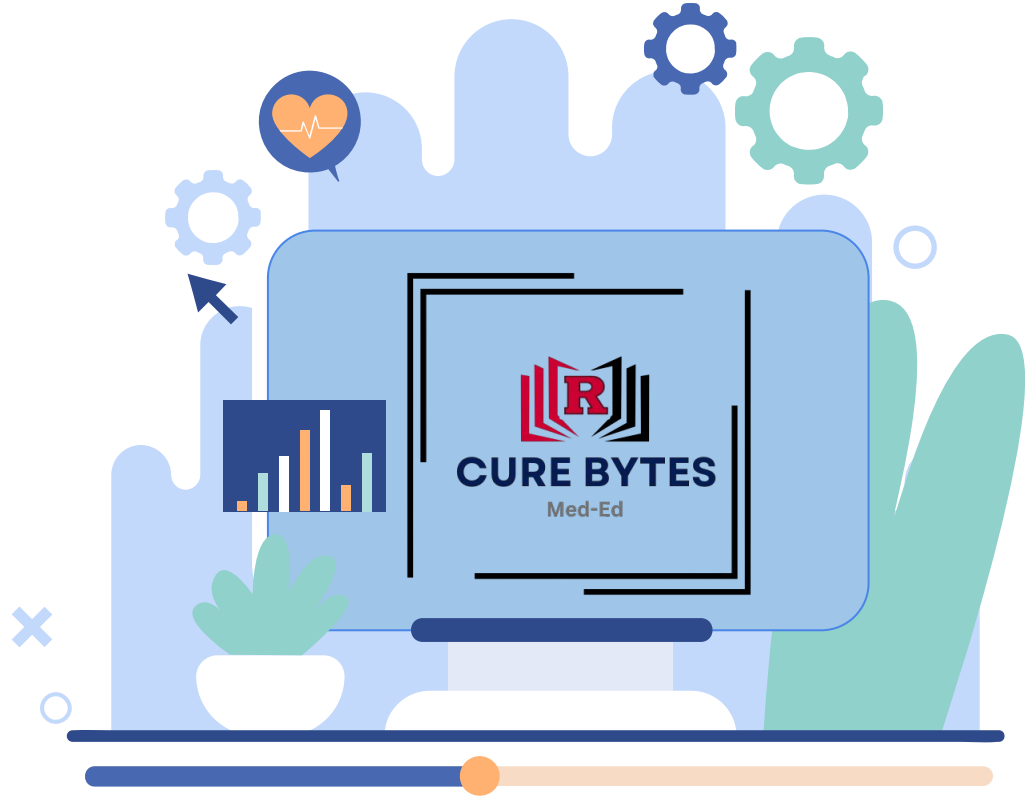


CureBYTES

Prescribe Success ^{Rx}
Empowering the Future of Med-Ed





Mission Statement

Our mission is to enhance medical student learning by providing medical students with AI-driven insights on their clinical documentation. We aim to deliver constructive feedback, fostering the development of clinical communication between medical students and Doctors.

Meet Team 2



Meet Team 2

Medical Research

Shariar
Azra
Manav
Nikhil
Naveen

Application Developers

Rishabh
Preet
Azra
Abhinav
Sumedh

AI & Cloud

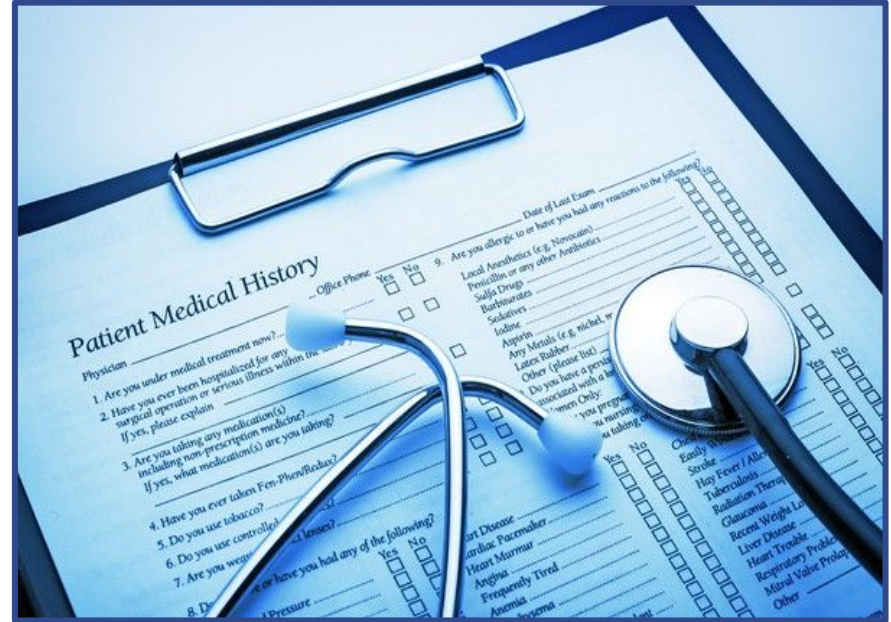
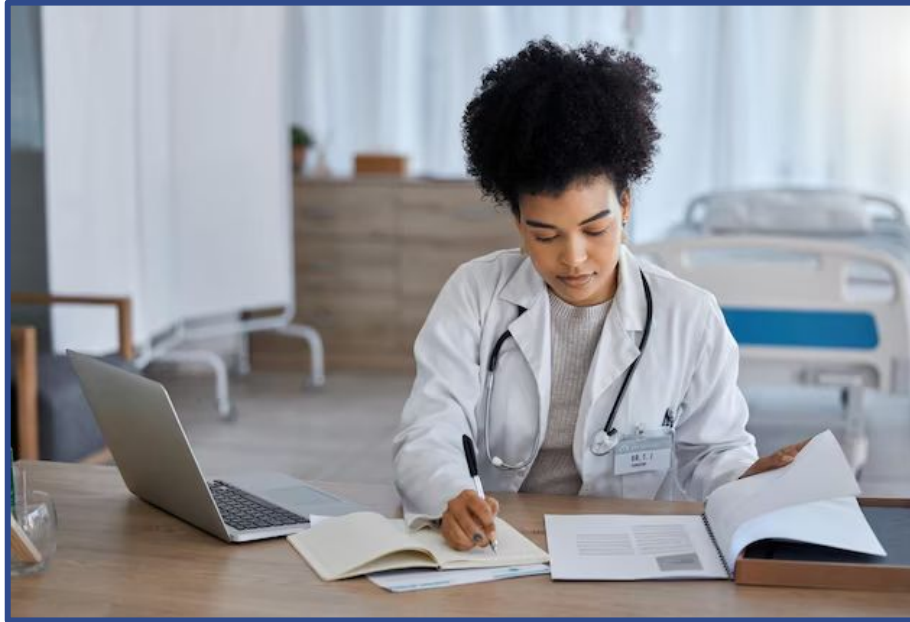
Ben
Naveen
Wanzhao
Preet
Sumedh
Abhinav

Project Design

Naveen
Ben
Shariar
Azra
Nikhil
Manav



Problem



Our Solution and Significance

Dataset from Rutgers Health

History and Physical Examination
Patient Name:
Date:
Referral Source: Emergency Department
Data Source: Patient, reliable
Chief complaint: Fever, chills and productive cough for the last 2 days
History of Present Illness:
JS is a 82 y.o. female with PMH of HTN, Asthma, COPD, uterine cancer (in 20s), DVT of LEs (2017), stress induced cardiomyopathy (07/2021), and possible coronary vasospasm vs NSTEMI (09/01/22) who is presenting with fever, chills, productive cough with yellow-green sputum, nausea and vomiting since Saturday morning 9/24/22. She does not report any sick contacts or recent travel out of the country and notes she spends most of her time home. She notes her son who lives at home with her had a cough as well but not feeling similar symptoms. She notes that on Saturday she was vomiting material that was non bloody and dark in color all night but has not vomited since then. She is unsure how many times she vomited. She notes 2 months of intermittent left sided chest pain and was hospitalized for possible coronary vasospasm vs NSTEMI (09/01/22). She describes this

First, I want to thank you for getting this H&P to me in such a timely manner. It greatly uncomplicates my own time management.
Second, I want you to know that this second H&P shows very good improvement over the first one, which itself had many strengths. My "usual" comments follow:
1. I commend you for beginning with identifying the informant and the reliability of the informant. This is a convention that is very useful and it also allows the reader to apply the appropriate degree of skepticism to what is reported. (We should always be skeptical of reported information until we can prove it.)
2. I commend you for including the duration of the chief complaint right up front with the chief complaint itself. As we have discussed, the chief complaint generates a differential diagnosis which directs all of the questions asked to construct the HPI. The duration of the chief complaint very much influences the differential diagnosis.
3. As this patient's present illness involves lung disease that has been present for some time, it would be very logical to begin with the very first manifestation or risk factor for his lung disease, and the status of his health at that early time.
Then you would construct a narrative that is very

MedEdPORTAL® | The Journal of Teaching and Learning Resources

 OPEN ACCESS | December 7, 2006

OSCE in Internal Medicine for Undergraduate Students Newly Encountered with Clinical Training

Hani Almoallim, MD¹

Author Information

https://doi.org/10.15766/mep_2374-8265.429

Source of Rubrics

Student Medical Note

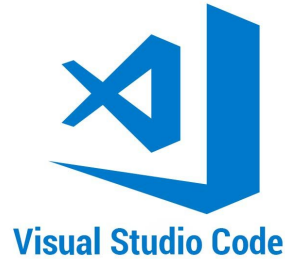
Attending (Teacher)
Commentary

Research

“Electronic Health Records (EHRs)...[are] an essential skill for medical students to succeed in residency and post-residency training. The increased use of medical student progress notes...raise the need for the education and assessment of quality note writing.”

Kim M, Chan N, Evans J, Min JK, Hayton AC. Improving Medical Student Inpatient Documentation Through Feedback Using a Note Assessment Tool. Cureus. 2022 Mar 21;14(3):e23369. doi: 10.7759/cureus.23369. PMID: 35475068; PMCID: PMC9020806.

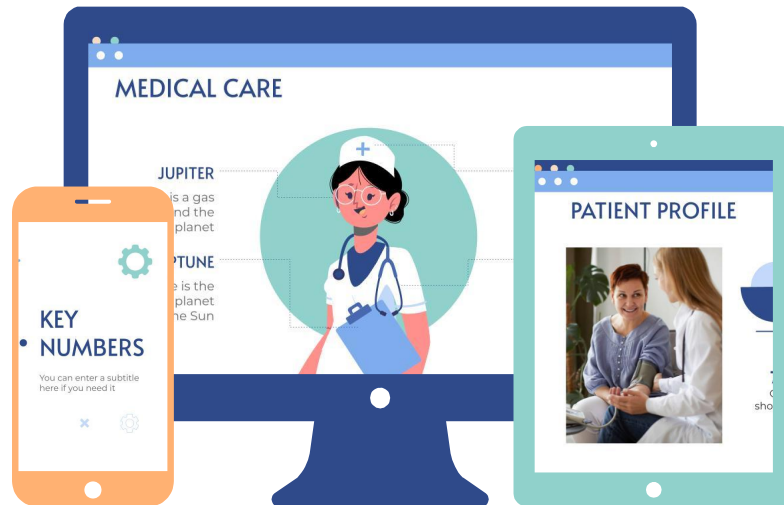
Project Components



Note: We are accessible on the Cloud!

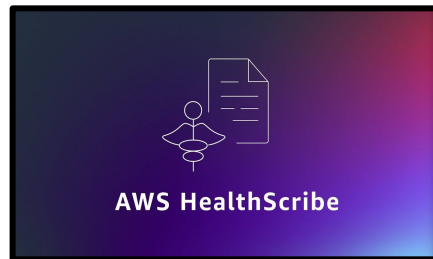
DEMO

Let us walk you through our website!



Field Competition & Differentiation

01. AWS
HealthScribe



02. Freed



03. Ambience



Future Outlook & Scalability

Future Plans

- Customization of Teacher Rubrics
- Uploadable student notes
- Additional rubrics for other disciplines
- Storing student ID
- Verifiable feedback
- Storage via AWS DynamoDB

Cross Field Use Cases

Extend use to dental, pharmacy, and nursing students

Development

Implementation

Scaling

Idea Phase

Health Hack development

Early Adoption

Large need in medical schools with high student/faculty ratio

Special Thanks to Our Mentors



Akanksha Arya, MD MBA

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and Brigham and Women's Hospital



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Rutgers Health



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Mt. Sinai Elmhurst



Jay Naik, MD

Assistant Professor



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CVS Health



Sarah Baron MD

Montefiore Medical Center



Nirav Shukla

Amazon Web Services



Deepak Raj

Amazon Audible



**Naveena Yanamala,
PhD**

*Associate Professor of
Medicine*

THANKS!

Questions and comments can be directed to:
azra.bano@rutgers.edu

We encourage and welcome any feedback!

