<u>**Risk Assessment**</u>

1. **Potential loss of team member - MITIGATED**
   a. Mitigated through redoubled effort of team in the remainder of the sprint. Will be able to plan accordingly for future sprints.
2. **Learning Swing UI - MITIGATED**
   a. Currently no member has experience with Swing outside the homework, so extra time should be allotted to learning this new technology
   Edit: Mitigated during iteration-2, got a working prototype and gaining knowledge on Swing.
3. **Connection between patient, visits, and subsequent visits - MITIGATED**
   a. According to the form, each "visit" is a single entity with entries for subsequent visits. This doesn't mesh well with the way visits would be perceived. But breaking this mold requires reworking how to connect all visits to a particular patient and a particular pregnancy.
   Edit: Mitigated during iteration-2. Every visit and pregnancy has a patient ID to tie it back to.
4. **Dependencies on other teams – MITIGATED***
   a. Currently we require a patient class definition from the Consultant Register group as well as a patient's parity from the Immunization Group. These are things we'll need to discuss with them and work to resolve in future iterations.
   Edit: Mitigated during iteration-2. Implemented patient searching and tied it to an instance of medical information via the patient ID. *Collaborated with Consulting Registry for this but will likely still need collaboration with other groups.
5. **Architectural differences in development - MITIGATED**
   a. In iteration one, it was realized that the team members have different methods of solving the same problem that caused some initial coding clash. Moving forward, we'll need to do better about planning our work to mitigate this problem.
   Edit: Discussed at first meeting of iteration-2, along with workflow (git). Better understanding of what we expect out of a service or controller, perhaps future discussions as well.
6. **Cloud Deployment**
   a. Last iteration will revolve around deployment in the cloud, which currently only one member has any experience with.

7. **Compiling and running code between different environments – New risk that appeared iteration 2**
   a. After implementing external systems (Consulting register patient), things like settings/preferences/classpath conflicting with current JDK or JRE installed on machines consumed a lot of time, especially since most programmers have different environments.