Docspoct: Seamless Appointment Booking for Health

Project Report

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INTRODUCTION

1.1 Project Overview

Docspoct is an innovative MERN stack web application crafted during our Smartbridge internship, revolutionizing medical appointment booking by enhancing accessibility, efficiency, and user satisfaction for patients and healthcare providers. Patients can search for doctors by specialty, location, and availability, book appointments with ease, and manage schedules via an intuitive interface, while providers use a comprehensive dashboard to update availability, review appointments, send reminders, and reduce manual workload. Built on MongoDB for scalable data, Express.js and Node.js for robust backend logic, and React for a dynamic frontend, Docspoct ensures security and performance. The project emerged from the COVID-19-driven demand for telehealth, addressing traditional booking inefficiencies like long wait times and errors.

Development involved Ganta Anji leading backend tasks (API design, server logic), Ruttala Lokesh crafting the React frontend with reusable components, and Sankara Hari Krishna optimizing MongoDB schemas and performance. Using agile methodology with bi-weekly sprints, the 13-week internship included daily stand-ups, code reviews, and pair programming to ensure quality. The team tackled challenges like cross-device compatibility and security, leveraging tools like BrowserStack and TLS 1.3 encryption.

1.1.1 Theoretical Context

Rooted in healthcare informatics, Docspoct draws from the American Medical Informatics Association (AMIA) findings that digital systems cut no-show rates by 30

1.1.2 Importance and Relevance

With patient volumes rising 15

1.1.3 Objectives and Scope

Goals include a sub-2-minute booking interface, HIPAA-compliant security (encryption, audits), and scalability for 500+ users (validated by load tests). Features cover JWT authentication, advanced search filters (rating, language), real-time booking with conflict checks, and customizable notifications. Future plans include EHR integration, a mobile app, and AI scheduling, serving as a full-stack case study in web development and healthcare informatics.

1.1.4 Challenges and Opportunities

Challenges included cross-platform testing (using BrowserStack) and security (TLS 1.3, input sanitization), while opportunities lie in AWS scalability, AI for peak-time prediction (10

1.1.5 Stakeholder Involvement

Surveys with 20 patients and 10 doctors highlighted mobile access (75

1.1.6 Historical and Market Context

From 1950s paper logs to 1990s computers, scheduling evolved to today's 211billion digital health market (State 1950s)

1.1.7 Team Dynamics

Rotating scrum roles and consensus conflict resolution (e.g., calendar vs. list view, 80

1.1.8 Conclusion

This chapter establishes Docspoct's purpose, grounding it in theory and market needs, setting up chapters on ideation, requirements, design, planning, testing, results, advantages, conclusion, and future scope.

1.2 Theoretical Depth

Queueing theory (Gross Harris, 1998) models patient flow to optimize wait times (15 to 5 minutes), while the Technology Acceptance Model (Davis, 1989) targets 90

1.3 Practical Scenarios

A rural patient books a 100-mile specialist visit (4-hour save), and a doctor manages 20 appointments (95

1.4 Research Directions

Studies on digital trust (85

1.5 Ethical Focus

AWS carbon-neutral hosting and GDPR-compliant consent forms reduce environmental impact (10 $\,$

IDEATION PHASE

2.1 Problem Definition

Manual booking causes 20-minute waits and 15

2.2 Empathy Map

Patients need quick access, facing 30-minute waits and travel issues, gaining convenience from reminders. Doctors need efficiency, battling no-shows (25

2.2.1 User Insights

Patient anxiety over delays and doctor admin burdens shaped search and notification features. Receptionist offline mode requests led to future plans, validated by 10-user surveys.

2.3 Brainstorming

Starting with a booking form (Miro), three 2-hour sessions added search filters (Amazon-inspired), notifications (travel industry), a doctor dashboard (Epic-like), multilingual support, feedback, and gamification. Deferred EHR and AI focused on feasibility, yielding a rich prototype.

Refinement Three rounds—core features (sketches), advanced (mockups), feasibility (mentor input)—used Miro and Figma. A "save search" option (40

2.4 Stakeholder Engagement

Surveys (20 patients, 10 doctors) and Zoom demos shaped features like conflict checks. Mentor guidance on MERN ensured technical viability, with 80

2.5 Competitive Analysis

Zocdoc's networks and Practo's costs contrast with Docspoct's open-source and 1.5-second response target, validated by user reviews.

2.6 Idea Validation

An MVP test with 10 users (80

2.7 Framework

HCI, queueing theory, and informatics ensure a balanced approach, with 90

2.8 Conclusion

This phase defined problems and validated ideas, leading to technical requirements.

REQUIREMENT ANALYSIS

3.1 Customer Journey

Registration (2 minutes, CAPTCHA), search (filters, autocomplete), booking (QR code, <2 minutes), and dashboard management with reminders define the journey, validated at 90 Stages Awareness (1,000 impressions), consideration (70

3.2 Solution Requirement

JWT authentication, search filters, real-time booking, and notifications are functional needs. Non-functional goals include 500-user scalability, 2-second response, HIPAA security, and 99.9 Prioritization MoSCoW rated authentication and booking as 90

3.3 Data Flow

Input (search query) flows through Express to MongoDB (User, Appointment, Availability schemas), returning results via React, with Redis caching (20

Entities User, Appointment, and NotificationLog entities with indexing optimize performance (0.5-second searches).

3.4 Technology Stack

MERN (MongoDB, Express, Node, React), Mongoose, Redux, Tailwind, Postman, Git, Docker, and Jenkins form the stack, chosen for consistency and security (HTTPS).

3.5 Use Case Analysis

"Book Appointment" (95 Extensions "Bulk Booking" and "View History" are future plans, per 50

3.6 Non-Functional Testing

Load (1.8 seconds, 500 users), security (no vulnerabilities), and usability (90

3.7 Conclusion

This chapter frames requirements, leading to design.

PROJECT DESIGN

4.1 Problem Solution Fit

Real-time booking cuts 90 Validation 20 users (85

4.2 Proposed Solution

A web platform with patient (search, book) and doctor (dashboard) portals, Twilio/SendGrid notifications, and feedback buttons, tested with dummy data.

Features Autocomplete search, color-coded calendar, QR confirmation, and no-show analytics were validated.

4.3 Solution Architecture

A three-tier model (React, Express/Node, MongoDB) with TLS 1.3, JWT, load balancers, and Redis caching supports scaling, planned for AWS.

Component Design React hooks, validation middleware, and indexed databases optimize performance (0.5-second searches).

4.4 Design Patterns

MVC and SOLID principles ensure maintainability, supporting future mobile apps.

4.5 Prototyping

Balsamiq wireframes and Figma mockups (blue/white, hover effects) achieved 90

4.6 UI Design

Minimalist navigation, high-contrast mode, and WCAG 2.1 compliance reduce wait perception by 20

4.7 Security Design

Parameterized queries, CSP, AES-256, and login alerts achieve a 95/100 score.

4.8 Conclusion

This chapter solidifies design, leading to planning.

PROJECT PLANNING & SCHEDULING

5.1 Project Timeline

13 weeks: Week 1-4 (design), 5-10 (development), 11-12 (testing), 13 (deployment), with a 10 Schedule Detailed weekly tasks from requirement gathering to deployment ensure 90

5.2 Resource Allocation

Ganta (40

5.3 Risk Management

Scope creep (MoSCoW), technical debt (95 Contingency A 1.3-week buffer and Firebase fallback ensure resilience.

5.4 Progress Tracking

Jira (50+ tasks), daily stand-ups, and burndown charts achieved 90

5.5 Stakeholder Communication

Weekly emails, Google Forms (80

5.6 Budget

100(50 APIs, 20 AWS, 30 licenses) with 20 contingency, tracked via Toggl(90)

5.7 Team Dynamics

Rotating roles and consensus resolved disputes, fostering QR code innovation.

5.8 Conclusion

This chapter structures execution, leading to testing.

FUNCTIONAL AND PERFORMANCE TESTING

6.1 Performance Testing

JMeter tests (150 users, 1.5 seconds, 50 requests/second) and stress tests (300 users, 0.5 Metrics Latency (1.5s), throughput (50/s), error (0.5

6.2 Functional Testing

Unit (100

6.3 Test Cases

"Valid Login" (100 Examples "Bulk Booking" (85

6.4 Defect Management

Jira tracked 15 bugs (100

6.5 User Acceptance Testing

10 users (4.5/5) completed tasks (94) Metrics 94

6.6 Security Testing

OWASP ZAP (no vulnerabilities), CSP, and logging achieved 95/100.

6.7 Performance Optimization

Indexing (30

6.8 Conclusion

This confirms reliability, leading to results.

RESULTS

7.1 Output Screenshots

Login (80

Analysis Validation reduced errors and improved efficiency.

7.2 Performance Outcomes

200 users (1.8s), 20

7.3 User Feedback

50 users (90

Implementation Stripe (2 months) and CSS themes are planned.

7.4 Quantitative Results

150 bookings (3.3

7.5 Comparative Analysis

Docspoct's 90

7.6 Cost-Benefit

100yielded1,500 savings, a 5:1 ratio.

7.7 Impact Assessment

30 freed slots and 10 rural users (2-hour save) align with SDG 3.

7.8 Conclusion

Success sets up advantage analysis.

ADVANTAGES & DISADVANTAGES

8.1 Advantages

20

Impact 15

8.2 Disadvantages

1-hour learning curve (30 minutes post-training), 5

8.3 Mitigation

Videos (80

Considerations 10/yearmaintenancevs.200/year growth.

8.4 Comparative Evaluation

5:1 ratio, 5x cost advantage, and 10

8.5 Risk-Benefit

15

8.6 Improvement

Offline syncing, AI, and UI lightening are planned.

8.7 Conclusion

This balances strengths and weaknesses, guiding future steps.

CONCLUSION

9.1 Summary

1.5-second response, 99.9 Reflection MERN mastery, agile gains, and scope management enhanced skills.

9.2 Lessons

Early testing (20

9.3 Recommendations

Stripe (15

9.4 Future Vision

Teleconsultation, wellness tracking, and claims processing target 10,000 users and 50,000/year.

9.5 Impact

 $30~{\rm slots}$ freed, $10~{\rm rural}$ users served, and open-source potential inspire a health tech ecosystem. Growth 90

9.6 Conclusion

Docspoct's impact and potential pave the way for growth.

FUTURE SCOPE

10.1 Mobile Application

A React Native app with push notifications, offline mode (50 appointments), and geolocation (15 $\,$

Details WebSocket sync, biometric login, and <5

10.2 EHR Integration

FHIR APIs (50

10.3 AI and ML

TensorFlow predicts peaks (10 Strategy Anonymized data and cloud scaling target 10,000 users.

10.4 Global Expansion

Multilingual support and South Asia pilot (5,000 users, 10,000) startYear2.

10.5 Partnerships

Insurance and hospital ties (20

10.6 Advanced Features

WebRTC, wellness tracking, and NLP chatbot (80

10.7 Sustainability

5/month(200subscribers, 1, 200) and open-source (30 $\,$

10.8 Upgrades

Node.js 20, GraphQL, and serverless (20

10.9 Conclusion

This roadmap positions Docspoct as a health tech leader.