SAVE UR MOM

ENHANCING THE RURAL HEALTH CARE

1

PROBLEM

USING MOBILE TECHNOLOGIES, ENHANCE RURAL HEALTH CARE

OVERVIEW

- Connecting the Patients to the remote specialists through Rural Health Care Centre.
- A Rural health care member monitors the patients vitals and sends the data through our web app to the specialist assigned.
- The specialist reviews the severity of the patients state and accordingly offers diagnosis.

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PROBLEMS FACED IN RURAL HEALTH CARE

The Rural areas do not have any well-equipped health care centres along with not so qualified doctors who can just perform the vital checks and are often incapable of diagonising and curing the patients' disease.

So, connecting these centres to the specialists who can diagonise the disease is a major requirement in enhancing the healthcare of our country.

SOLUTION

We can solve this problem by connecting the not so qualified doctors to the specialists assigned for the specific time-slot through our web-page.

The doctor in the rural health care centre can measure the basic vitals of the patient and fill the form for the patient. The data from this form gets stored on a cloud server from where it can be accessed by a doctor who is more qualified and much more equipped with better resources.

- FETCHES THE PATIENT DB
- REVIEWS THE SEVERITY
- PRESCRIBES DIAGNOSIS

CLOUD BASED DATABASE

SPECIALIST

- CHECK PAITENT VITALS
- UPLOADS DATA TO DB
- WAITS FOR SPECIALIST RESPONSE

PATIENT

Rural health care member

FEASIBILITY

1

A wide variety of easily scalably network solutions that can be easily integrated into any infrastructure.

2

WIRELESS TERRESTRIAL BROADBAND

Enables the lightning-speed network speed to the customers.

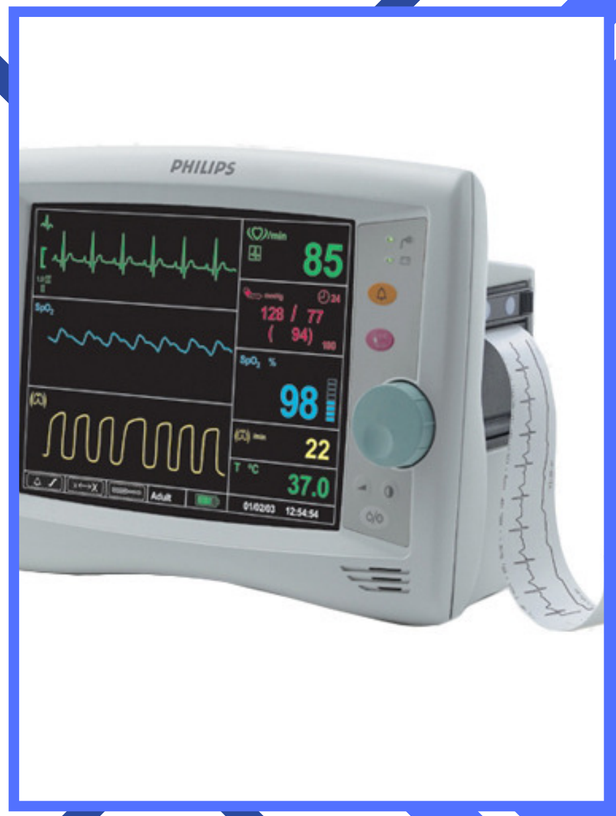
3

TELECOM VALUE ADDED SERVICE

An offering of relevant, customized, and content-based service over SMS, USSD, and WAP.

FEASIBILITY

- A basic MBBS degree in India requires 5 years.
- In India, the number of patients per doctor is around 1700, which is more that the WHO suggested 1000.
- Long term goal - increase the number of doctors.
- But vocational training - cheaper and takes less time.
- We can thus, train many more primary health care workers than have well trained doctors, and with the help of our technology we can have their access spread to the remotest locations.



The doctor studies the report and then can generate 3 levels of alert.

1) Low level alert- In this case the doctor just sends a prescription

2) Medium level alert - In this case, a video call is scheduled between the doctor and the regional doctor.

3) High level alert - In this case, the patient might be in a life threatening situation thus he/she is sent to nearby hospital with the help of an ambulance.

FUTURE GOALS

The future goals for this project include-
1) Adding language assistance for the regional(village) doctors so that they can communicate in their native language as they may not be comfortable with English language.
2) With the expansion of PM Wani taking this model to more and more rural areas so that it can reach the remotest part of India.

THANK YOU