

# Hackathon 25 - Dosage Schedule with Example Chart

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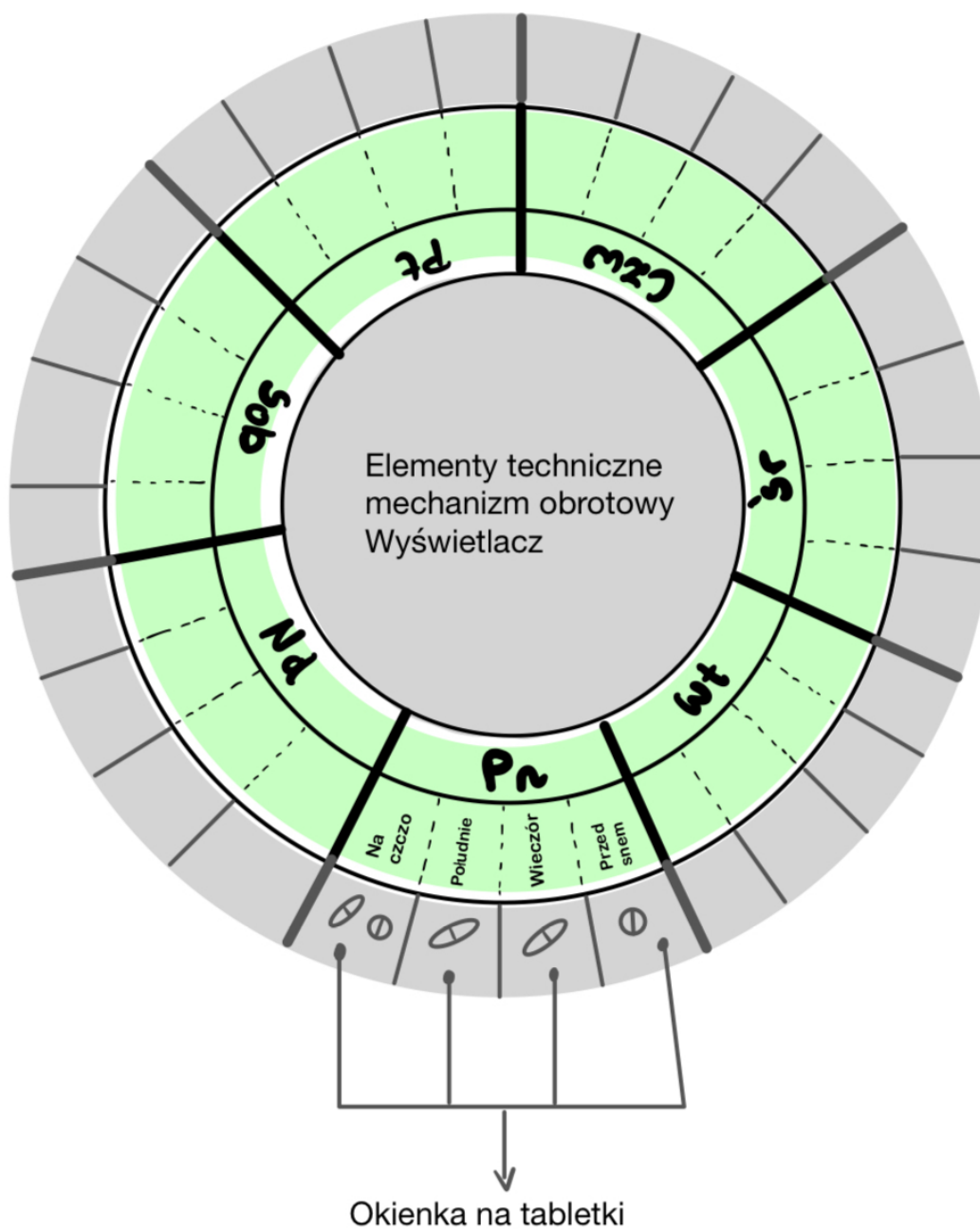
## Example 7-Day Dosage Schedule (28 ‘pockets’ in the pillbox)

Time of Day	Mon	Tue	Wed	Thu	Fri	Sat	Sun
On an empty stomach	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Afternoon	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Evening	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Before sleep	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ represents one pocket for medication taken on a given day and at a specified time.

## Sample Wheel Chart Based on the Schedule Above

The gray parts are fixed elements of the pillbox, while the GREEN section is a replaceable chart depending on needs – it can be made of cardboard/light plastic, for example.



## Possible Dosage Schemes Determining Other Combinations on the Chart

(schedule depending on the frequency of taking medication during the day)

### 1x daily (once a day)

Schedule	Detailed Description
1x daily	On an empty stomach
1x daily	Morning (with a meal)

1x daily	Noon (with lunch)
1x daily	Evening (with dinner)
1x daily	Before sleep

### 2x daily (twice a day)

Schedule	Detailed Description
2x daily	Morning – Evening
2x daily	Morning – Noon
2x daily	Morning – Before sleep
2x daily	Empty stomach – Evening
2x daily	Empty stomach – Before sleep
2x daily	Noon – Evening
2x daily	Morning – Afternoon (after meal)
2x daily	Morning – Night

### 3x daily (three times a day)

Schedule	Detailed Description
3x daily	Morning – Noon – Evening
3x daily	Empty stomach – Noon – Before sleep
3x daily	Morning – Afternoon – Night
3x daily	Morning (with meal) – Noon – Dinner
3x daily	Empty stomach – With lunch – After dinner
3x daily	Every 8 hours (e.g. 6:00 – 14:00 – 22:00)
3x daily	Morning – Noon – As needed

### 4x daily (four times a day)

Schedule	Detailed Description
4x daily	Morning – Noon – Evening – Night
4x daily	Empty stomach – Noon – Evening – Sleep
4x daily	Every 6 hours (e.g. 6:00 – 12:00 – 18:00 – 24:00)
4x daily	Morning – Noon – Evening – As needed
4x daily	Before every meal
4x daily	With every meal + before sleep