

pDUA Principles Starter

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Assumptions

(which turn into guiding principles)

Equal opportunity

Stable, static system

No war or natural disasters

People will make different choices because they have more information

High level of access to care

Patients are passive

A lot is out of control of the patient (and family)

Atmosphere of positive intent

Patient health may be determined outside the patient's control

Changes in data ownership mean the dynamic will change

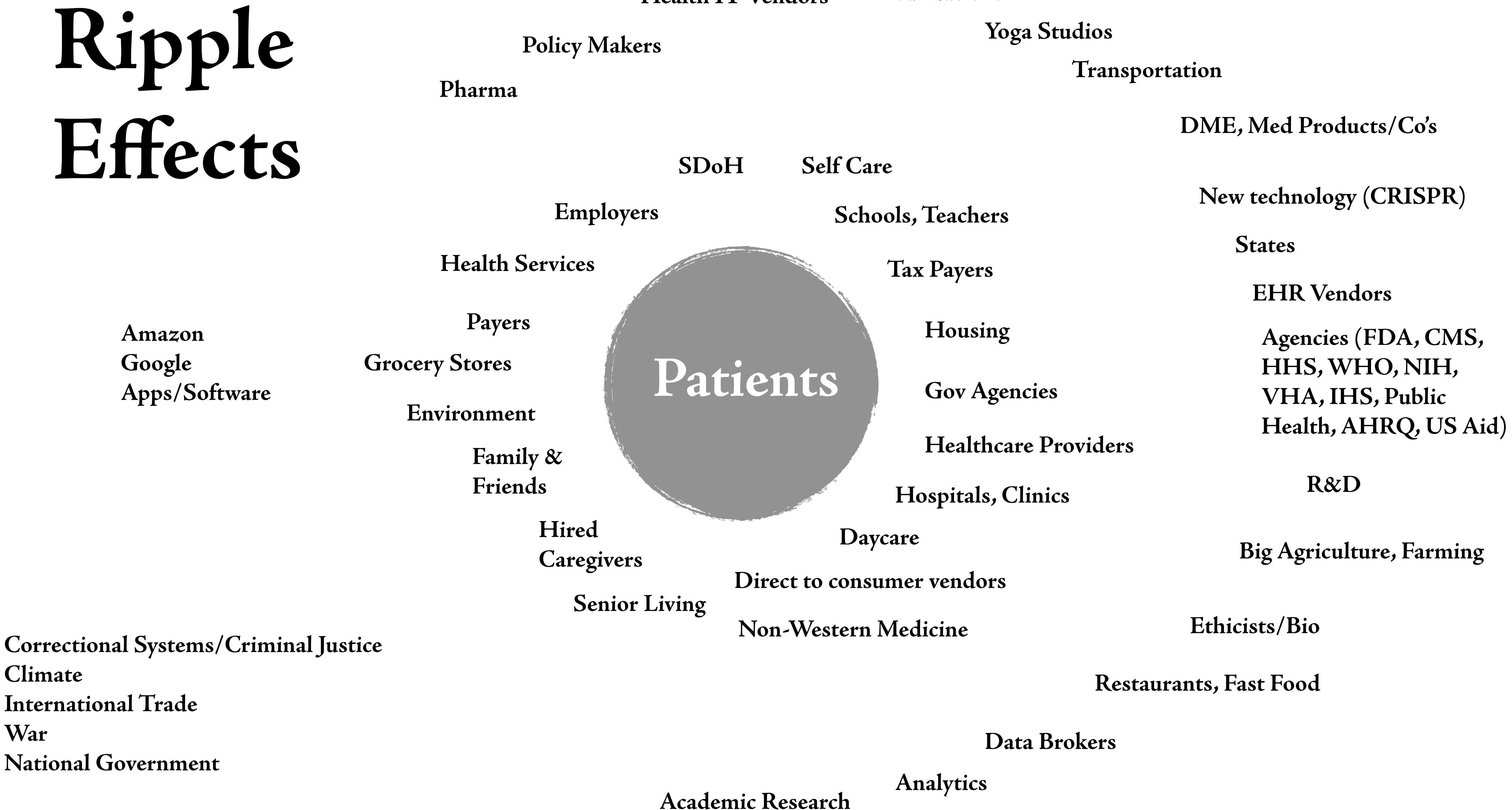
Access = changes health outcomes

Relationships between patient and healthcare people change

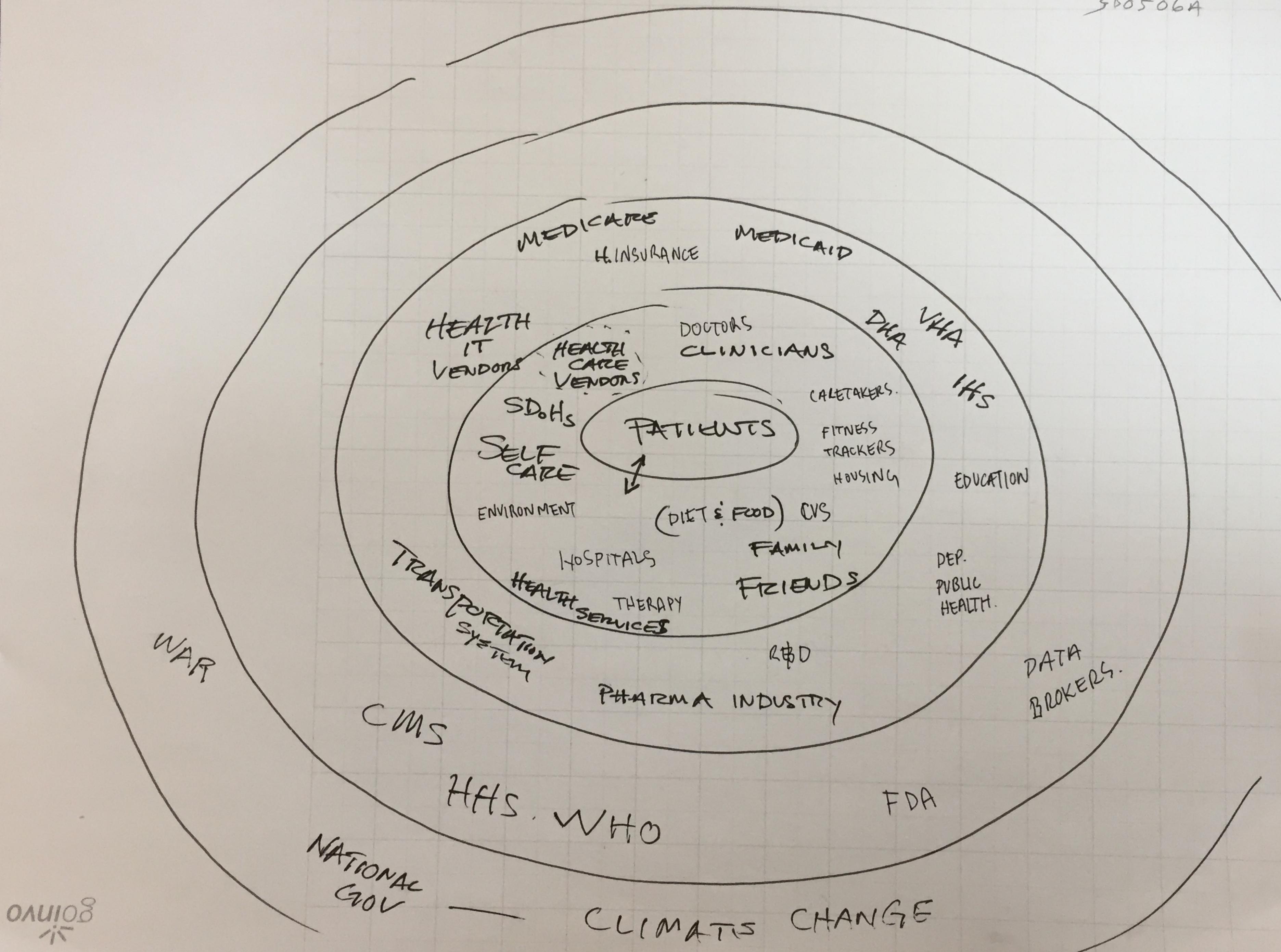
Core healthcare is supplied by humans (with machine-support)

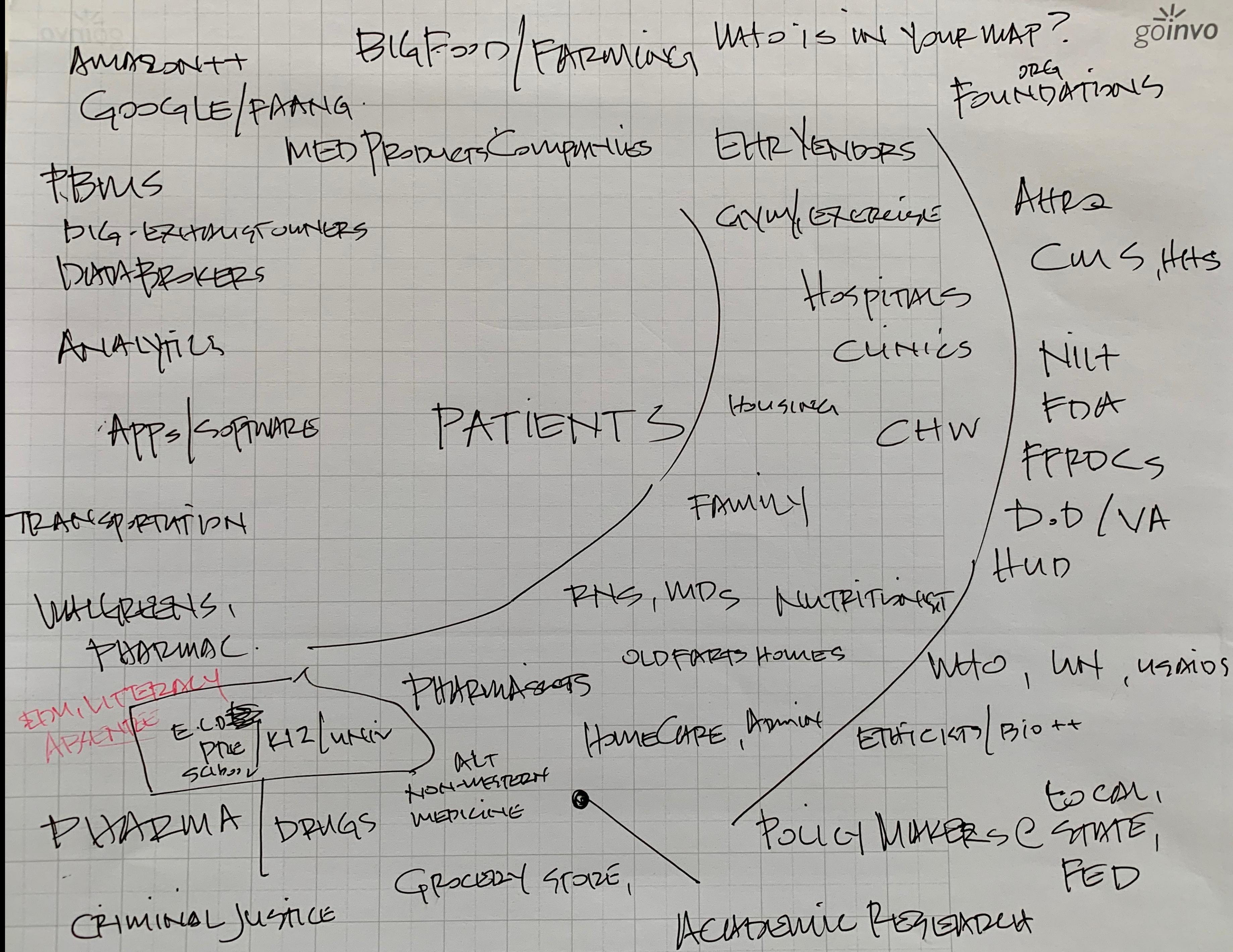
Ripple Effects

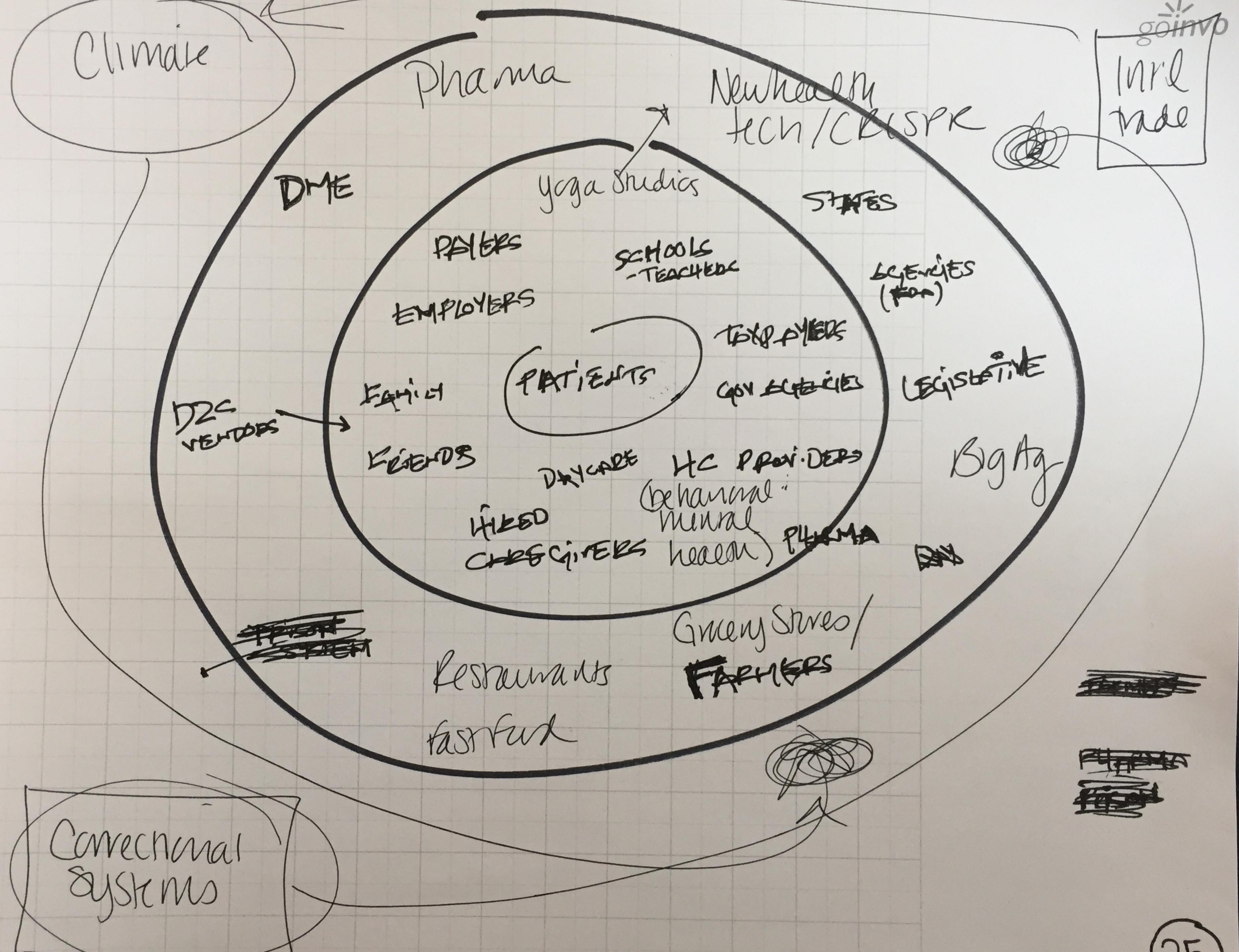
Correctional Systems/Criminal Justice
Climate
International Trade
War
National Government



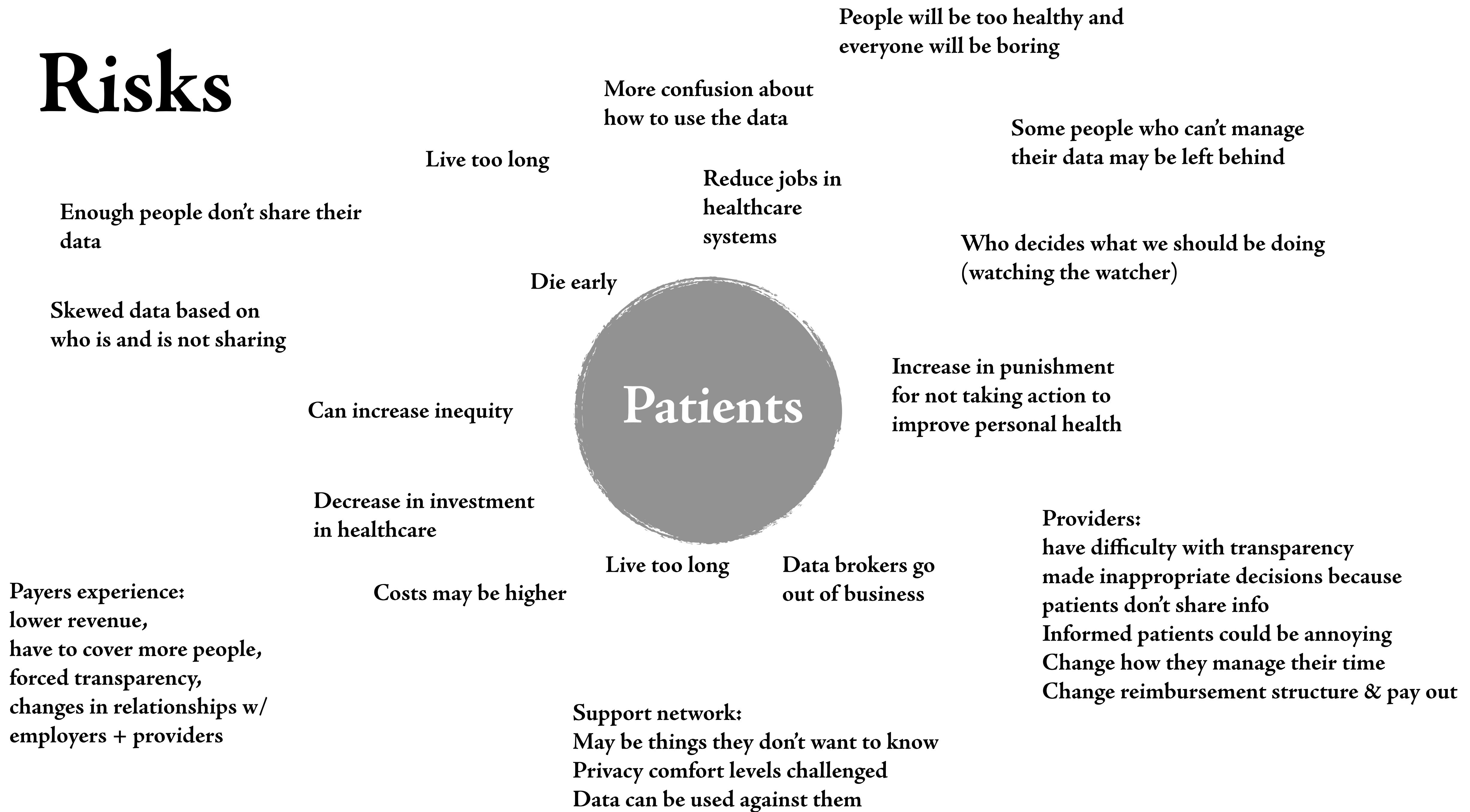
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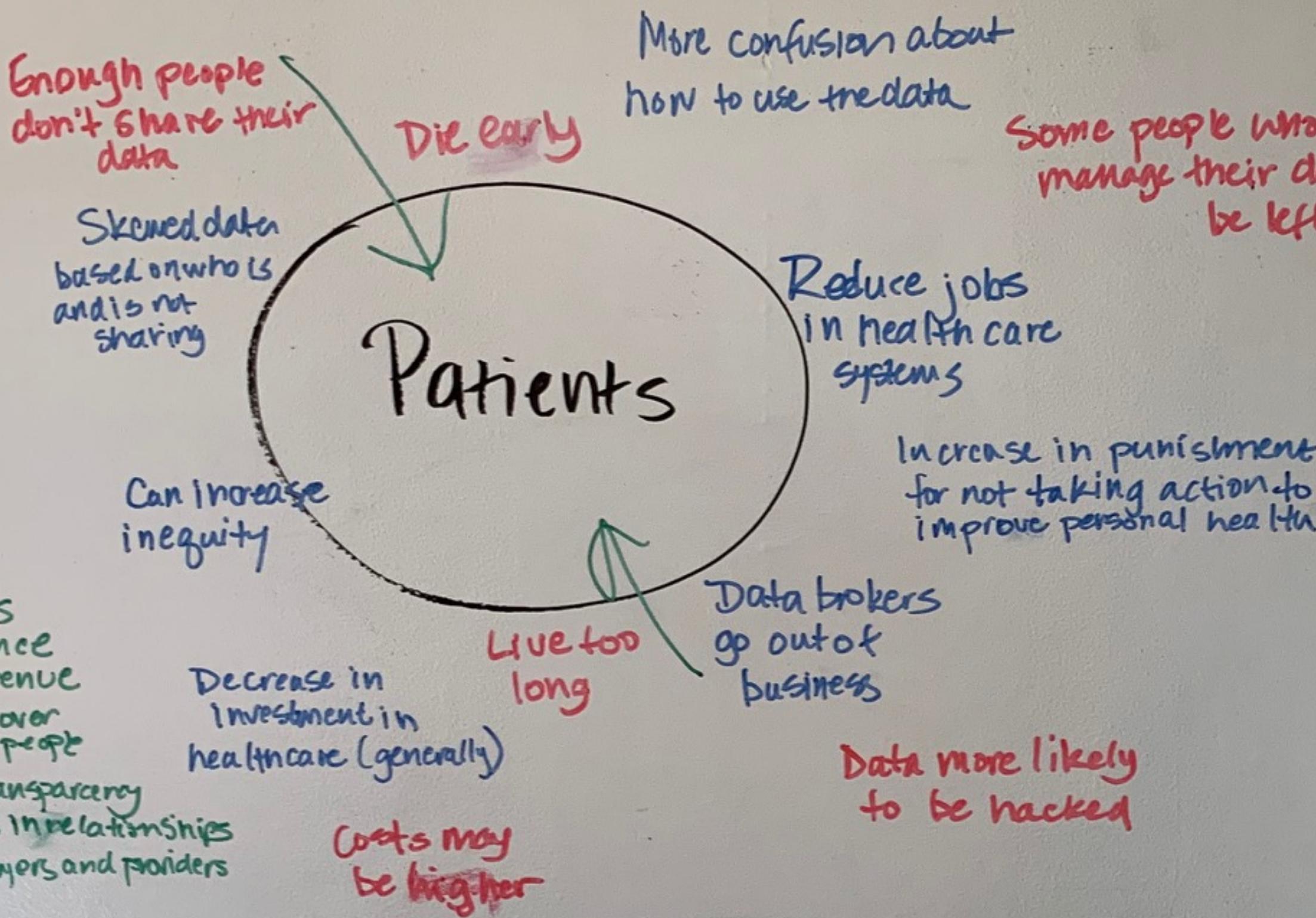






Risks





People will be too healthy
and everyone will be boring

Who decides what we
Should be doing? (watching
the watcher)

Providers

- have difficulty w/ transparency
- make inappropriate decisions because patients don't share info
- Informed patients could be annoying
- change how they manage their time
- Change reimbursement structure & amount