PROJECT CASE STUDY

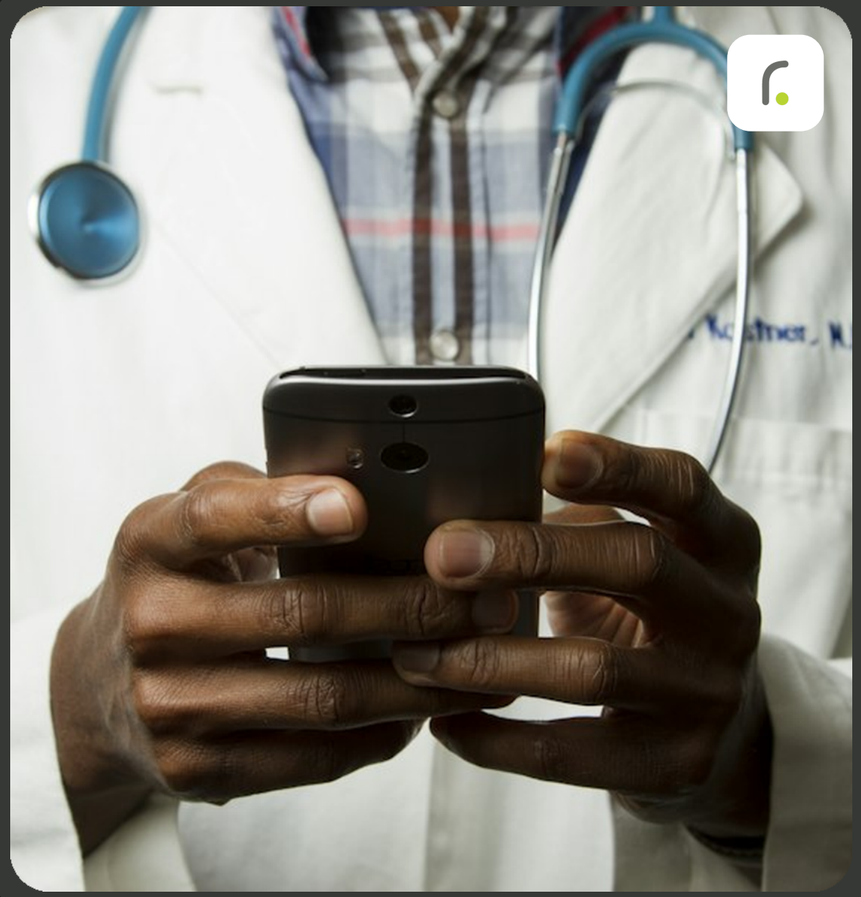
Medora Healthcare

Care discovery, with a clearer path

A human-centered healthcare discovery and care-access concept, shaped around patients, providers and healthcare organisations.

DOCUMENTED STATUS

Healthcare discovery website concept



Representative healthcare imagery from the Ramlogics website; not a Medora interface screenshot.

Source brief: pp. 1-2, 32-33

One care journey, many connected needs

Medora is a healthcare discovery and care-access concept that brings patient, provider and organisation journeys into one coherent digital experience.

01 For patients

Explore care options, providers, appointments, health information and support through a clearer starting point.

02 For care teams

Review workspace concepts for doctors, clinics and hospitals without implying live operational systems.

03 For platform teams

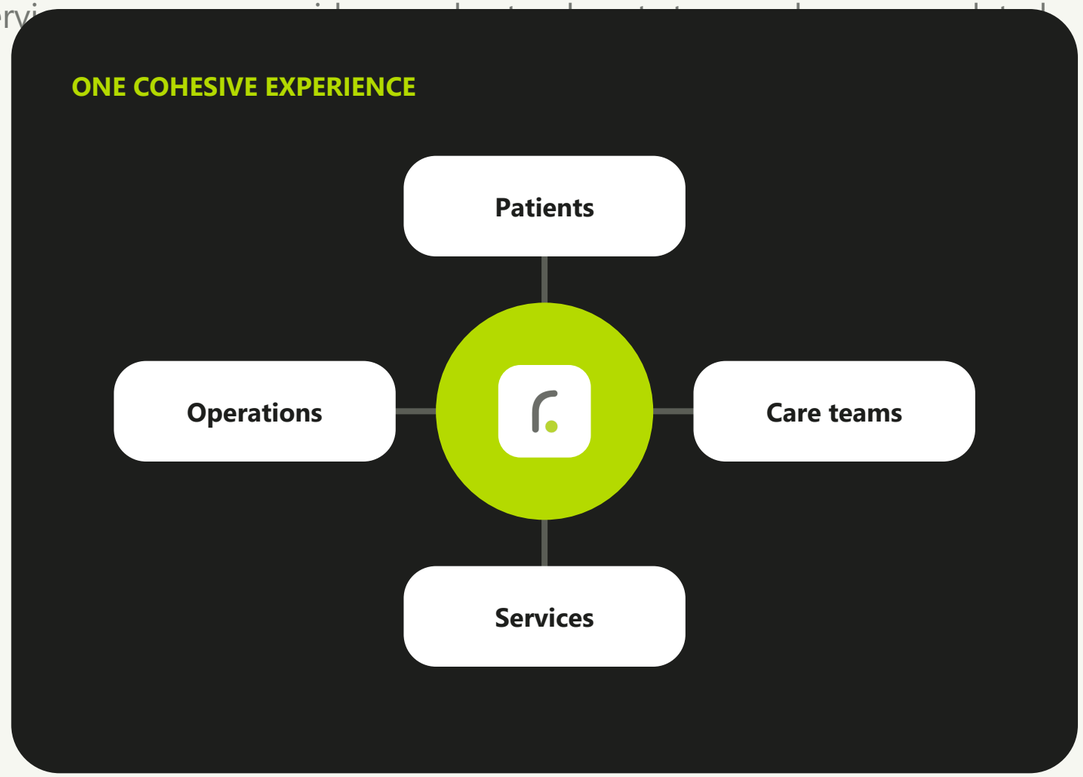
Consider how content, roles and administration could sit alongside public-facing discovery.

The supplied brief describes a product concept and interface direction, not measured clinical or business outcomes.

Source brief: pp. 1-2, 32-33

Make complex healthcare journeys easier to follow

The brief identifies a fragmented experience: people may need to discover servi… information.



01

Too many starting points

Service, provider, laboratory, pharmacy and education journeys can feel disconnected when presented without a clear structure.

02

Important context is easy to miss

People need understandable descriptions, useful provider context and clear actions before continuing.

03

Different users need different views

Patients, doctors, clinics, hospitals and administrators have distinct tasks and information needs.

04

Trust depends on honest boundaries

Healthcare concepts must distinguish illustrative information from verified services and clinical care.

These are design needs described in the project brief; the PDF does not claim that every need has been validated with users.

Source brief: pp. 1-4, 27-29

A calm, clear and responsive experience

The stated objectives emphasize understandable discovery, role-aware journeys and a consistent visual language across screen sizes.

01	**Simplify discovery**	Make healthcare categories, provider information and possible next actions easier to understand.
02	**Keep actions visible**	Use clear navigation, familiar language and action-oriented guidance throughout the experience.
03	**Adapt to each user**	Organize patient, doctor, clinic, hospital and administrator concepts around their different needs.
04	**Design for multiple screens**	Use responsive layouts and reusable interface patterns for desktop, tablet and mobile.

Objectives and design intent are documented in the brief; accessibility, usability and responsive behavior still require release testing.

Source brief: pp. 2, 5, 16-19, 27-28

Five user groups, distinct responsibilities

The source brief separates the experience into role-oriented concepts rather than presenting one generic workspace for everyone.

01 Patients

Explore services, providers, appointments and personal account concepts.

02 Doctors

Review provider profiles and a dedicated workspace concept.

03 Clinics

Consider appointments, care-team coordination and clinic operations.

04 Hospitals

Review admissions, scheduling, staff and service operations.

05 Administrators

Consider accounts, roles, content, settings and platform oversight.

These are conceptual roles. Identity verification, permissions and real organisation accounts are not established by this case study.

Source brief: pp. 3-4, 12, 24-26

Help visitors find a useful starting point

The homepage and getting-started concepts are intended to orient visitors before they enter account-based or provider journeys.

01 Discover
See the healthcare focus and available service categories.

→

02 Explore
Read a service description and understand the options it represents.

→

03 Choose
Continue toward provider discovery or an account journey.

→

04 Sign in or join
Open the relevant patient entry flow when needed.

A homepage and account-entry concept are described; this is not a claim that a real appointment or care relationship is created.

Source brief: pp. 5-6, 20

Organize services around what people seek

The brief gives examples of service categories and describes browse, search, filtering and clear service information as core discovery needs.

01 Primary care

A category concept for general healthcare discovery.

02 Mental health

A category concept presented with clear, supportive language.

03 Dermatology

A specialty category example within the wider service catalogue.

04 Nutrition

An example service area for browse and discovery patterns.

05 Condition management

A category concept that requires careful, non-promissory wording.

06 Service details

Descriptions and suggested care channels help visitors understand a possible next step.

Categories are examples from the supplied brief, not confirmed, bookable or clinically reviewed services.

Source brief: pp. 6, 13, 27-29

Give provider information useful context

Provider search and profile concepts are intended to help a visitor compare information before reviewing a possible next step.

01 Search and filter

Explore specialty, location, experience, rating and consultation-type criteria.

02 Review a profile

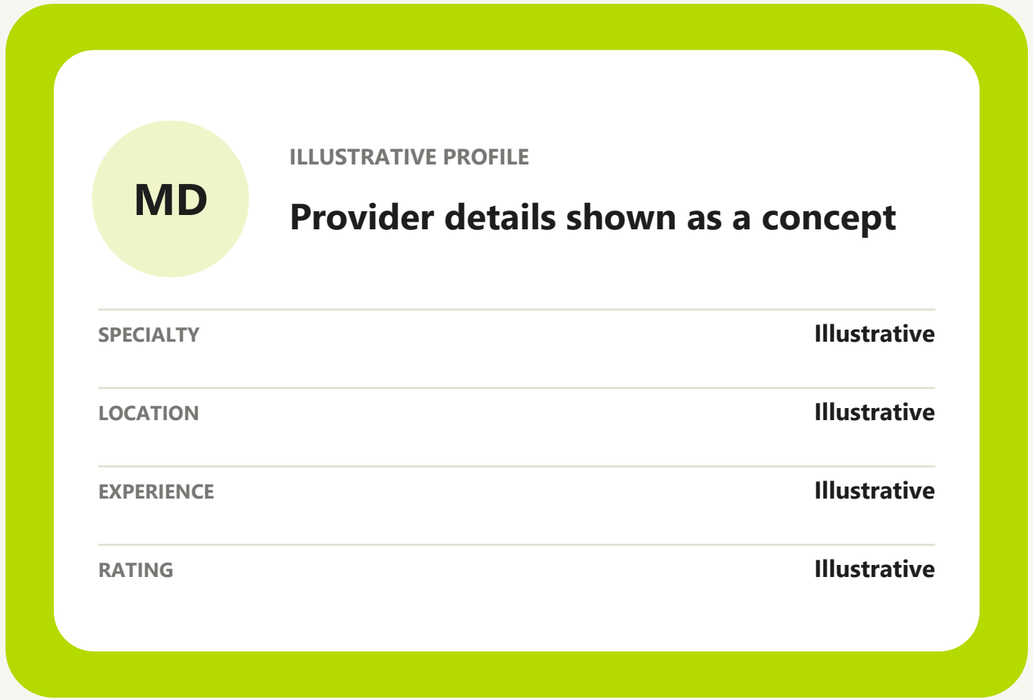
See a provider summary, specialty, experience and location in one place.

03 Compare information

Use a consistent presentation to understand the information shown for each profile.

04 Continue with care

Open an appointment-journey preview without implying that availability is real.



Provider names, credentials, experience, ratings and availability are illustrative and are not verified professionals or real schedules.

Source brief: pp. 6-7, 13, 21-22, 29

Show the steps before a user continues

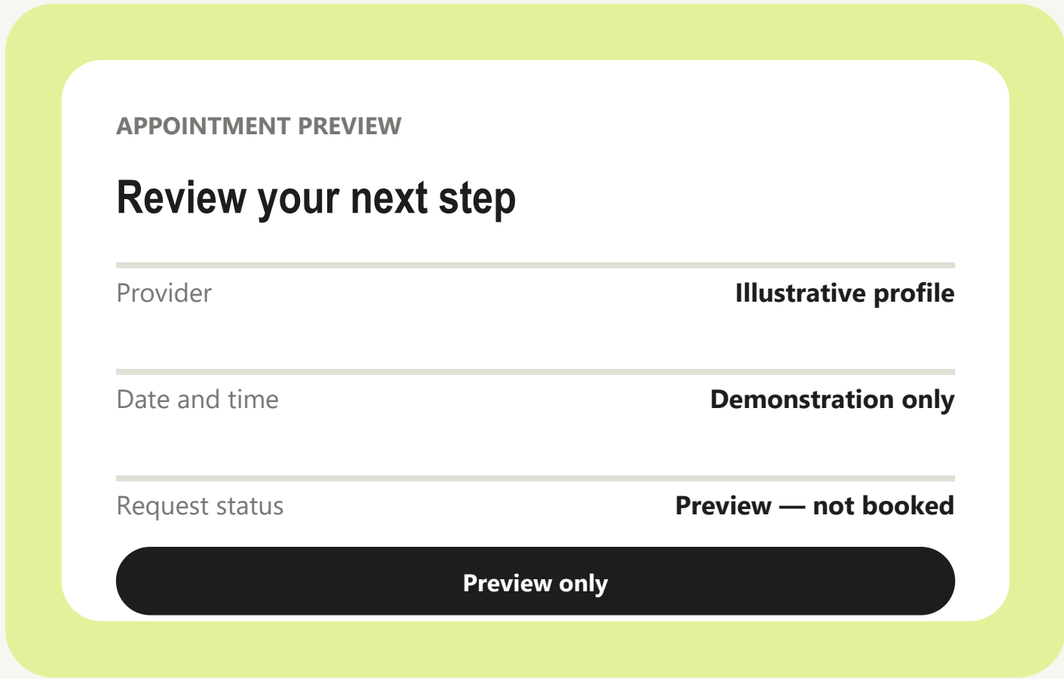
The appointment experience is a guided preview: it explains the shape of a request without representing a live booking.

01 Select
Choose an illustrative provider profile.

02 Review
See sample availability and appointment context.

03 Choose
Select a possible date or time in the demonstration flow.

04 Confirm the preview
Review the request summary and next-step messaging.

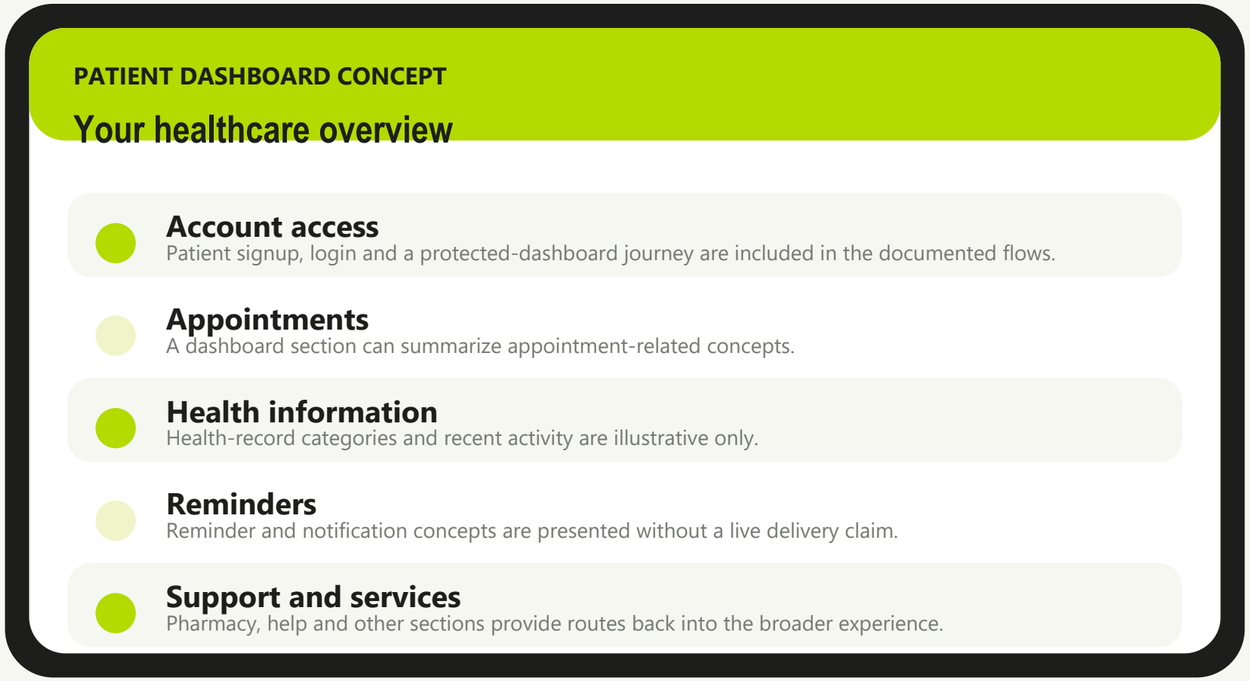


No real appointment is scheduled, no provider availability is checked and no care is arranged by this prototype.

Source brief: pp. 7, 13, 22, 29

Bring personal journeys into one dashboard concept

The patient-facing account concepts connect sign-in with a role-appropriate overview of healthcare-related sections.



A role-aware starting point

- Account access begins with signup or login concepts.
- Dashboard sections bring related journeys into one overview.
- Protected content should remain behind verified authentication.
- Personal health data is not connected in this prototype.

The brief describes dashboard concepts; it does not establish a secure production account or connect personal health data.

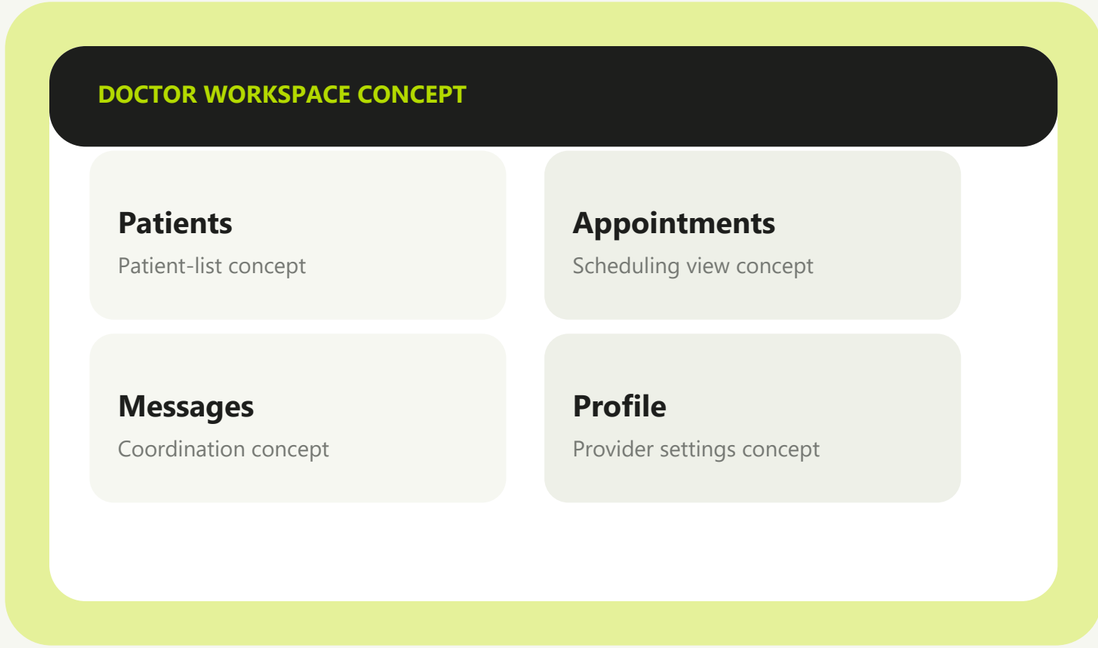
Source brief: pp. 8-10, 20-23, 26, 29-31

A dedicated workspace concept for doctors

The doctor role is represented separately from the public discovery journey, with workspace sections described in the source brief.

A dedicated workspace, separate from public discovery

- A doctor-facing view for reviewing a patient-list concept.
- A workspace section for appointment-related information.
- Provider profile and settings concepts sit alongside the workspace.
- Communication and coordination are represented as interface concepts, not live care channels.



This is not a production medical practice system and is not connected to patients, clinicians or clinical records.

Source brief: pp. 3, 10-11, 24, 29

Separate operational needs by setting

Clinic and hospital concepts share a healthcare context but have different operational responsibilities in the source brief.

CLINIC

Clinic appointments

A clinic workspace concept for appointment-related tasks.

Care-team coordination

Patient coordination, care teams and clinic profile concepts.

HOSPITAL

Admissions and scheduling

Hospital concepts include admissions and scheduling views.

Service operations

Laboratory, pharmacy, billing, staff and operational areas appear in the hospital brief.

SHARED OPERATIONS

Settings and oversight

Organisation settings and broader operational views are described as concepts.

Clear role boundaries

Each workspace should show information appropriate to its user role.

No clinic or hospital operations are performed by the prototype; organisation accounts and permissions remain production work.

Source brief: pp. 3-4, 11-12, 24-25, 29-31

Present exploration without implying fulfillment

Laboratory and pharmacy journeys are distinct browsing concepts in the project brief and both require explicit prototype boundaries.

01 Laboratory test discovery

- Sample package names and descriptions
- Illustrative included tests and preparation information
- Indicative pricing and a possible inquiry action
- No real lab order, booking or sample collection

02 Pharmacy browsing

- Browse, search and filter illustrative products
- Review product information and adjust cart quantities
- Preview delivery, payment and order-confirmation steps
- No real inventory, prescriptions, payment or fulfillment

The brief explicitly treats test packages and pharmacy products as illustrative; no real service or order is connected.

Source brief: pp. 7-8, 13-14, 22-23, 29-31

Make sensitive information boundaries visible

The project describes health-record and reminder concepts while explicitly avoiding connections to real medical records or notification services.

PERSONAL HEALTH INFORMATION DESERVES CLEAR BOUNDARIES

01	**Record categories**	Present example health-related document categories and recent activity.
02	**Illustrative information**	Use sample records only; do not imply that actual patient information is stored.
03	**Reminder concepts**	Show how a reminder or notification experience could be organized.
04	**No live delivery**	Email, SMS and push notifications are listed as future or incomplete capabilities.

The prototype is not connected to a hospital, doctor, laboratory, EHR, EMR or notification provider.

Source brief: pp. 8-9, 18, 23, 29-31

Keep guidance supportive and clearly scoped

The health library, help and membership concepts focus on general information, useful guidance and a clear separation from diagnosis or treatment.

> “
>
> **The content is intended for general education and is not a substitute for medical advice or professional diagnosis.**
>
> **A content boundary stated in the supplied Medora brief.**

Useful guidance, not a diagnosis

01 **Browse articles**
Explore health-education content by category and open a selected article.

02 **Use plain language**
The brief calls for clear, readable content with supportive guidance.

03 **Find help**
FAQs, getting-started topics, account support and service guidance are described.

04 **Keep content responsible**
Avoid unverified medical claims, guaranteed outcomes and confusing clinical language.

05 **Membership and settings**
Membership, account preferences and settings are secondary concepts, not a live subscription service.

Educational content is not medical advice; membership plans, payments and notifications are illustrative in the source brief.

Source brief: pp. 5, 9-10, 15, 27-29

Bring content and oversight into view

The administrator workspace is a central management concept for understanding how a multi-role healthcare platform might be organized.

01

Accounts and roles

Review user and role-management requirements for different platform users.

02

Healthcare content

Consider service and educational-content administration.

03

Operational overview

The source brief describes dashboard metrics and broad oversight concepts.

04

Payment and settings

Payment overview, settings and platform configuration appear in the concept.

05

Audit and permissions

Audit logging and advanced role permissions are identified as production requirements.

06

Organisation management

Organisation accounts and administration require additional implementation.

Administrator actions, dashboard metrics, payments and audit controls are illustrative or future requirements—not verified features.

Source brief: pp. 4, 12, 15, 25-26, 29-31

Usability, accessibility and responsive behavior

The source sets quality expectations for a future release; listing a requirement does not mean it has been built or independently tested.

01 Usability

Clear navigation, simple healthcare terminology, useful feedback and fewer unnecessary steps.

02 Accessibility

Readable content, keyboard access, visible focus, semantic structure and accessible actions.

03 Responsive design

Flexible layouts, mobile navigation, responsive cards, forms and dialogs without horizontal overflow.

04 Performance

Prioritize key content, efficient assets and responsive interactions.

05 Compatibility

Review the experience across supported devices, browsers and screen sizes.

06 Maintainability

Use clear naming, reusable components and a separation of UI and server responsibilities.

Accessibility audits, build checks, route validation and device testing are listed in the source quality checklist.

Source brief: pp. 16-19, 28

A prototype is not a production care system

The source brief is explicit about what remains before the platform could be used with real users or real healthcare information.

01 Illustrative only

Profiles, ratings, schedules, lab packages, pharmacy catalogues, records and dashboard metrics.

02 No external services

Prototype workflows do not contact providers, labs, pharmacies, payment systems or record platforms.

03 Security and privacy review

Complete legal, privacy, healthcare-compliance, security and data-protection reviews.

04 Identity and access

Design and verify authentication, role authorization, account recovery and audit controls.

05 Data and operations

Define encryption, backup, incident response, monitoring, retention, deletion and consent.

06 Clinical governance

Establish provider verification, clinical governance, support and escalation processes.

Do not use the concept for real medical, clinical, pharmacy, payment or health-record operations.

Source brief: pp. 18, 29-33

Eighteen scenarios shape the product conversation

The supplied brief documents 18 use cases. The groups below summarize those scenarios; they are not a count of implemented or tested features.

Discovery and access	06 SCENARIOS	Patient self-service	06 SCENARIOS	Operations and account	06 SCENARIOS
01	Discover care	01	Preview an appointment	01	Review doctor workspace
02	Create an account	02	Explore laboratory tests	02	Review clinic workspace
03	Sign in	03	Browse pharmacy products	03	Review hospital operations
04	View dashboard	04	Review health records	04	Review administrator workspace
05	Search for a doctor	05	Manage reminders	05	Sign out
06	Review a provider profile	06	Read health education	06	Redirect an unauthenticated visitor

Use cases describe expected journeys in the brief. They do not prove that live services, integrations or security controls exist.

Source brief: pp. 20-26, 29

19 / NEXT STEPS

A thoughtful foundation for product validation

Medora brings patient discovery and role-oriented healthcare concepts into one visual story. Before production, the documented product, legal, privacy, security and clinical-governance work must be completed.

01 Validate

Approve product scope, user needs and acceptance criteria.

02 Review

Complete legal, privacy, security and healthcare-compliance reviews.

03 Design

Specify verified providers, integrations, data flows and operational ownership.

04 Test

Validate accessibility, protected routes, devices, failure paths and rollback readiness.

VIEW THE MEDORA PROJECT

Source brief: pp. 28-33