

MEDVIEW SYSTEMS

Patient Education for Homecare



“MedView Systems is positioned to revolutionize homecare through its unique online patient education platform.”

H Dwight Hunsberger,
Founder

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Executive Summary

MedView Systems

MedView Systems is a pioneering homecare business dedicated to reducing emergency room visits and increasing patient compliance through innovative online patient education. Our mission is to empower homebound patients by ensuring they fully understand their medical devices, thus improving their overall health outcomes and quality of life.

Target Market

Our primary target market consists of homecare providers and hospital discharge planners. These key stakeholders play a crucial role in the transition of patients from hospital to home care, and our services aim to bridge the gap by providing essential education and support.

Unique Value Proposition

MedView Systems distinguishes itself from competitors through its comprehensive online patient education platform. Unlike traditional methods, our platform is accessible, engaging, and designed to cater to the specific needs of homebound patients. By leveraging technology, we provide an effective and convenient way for patients to gain crucial knowledge about their medical devices, ultimately fostering better health management at home.

Business Goals

Over the next four years, MedView Systems aims to achieve a revenue target of \$8,000,000. To support this growth, we are focused on developing a custom patient education platform tailored to the specific needs of medical centers and home health agencies. This strategic initiative will enable us to offer personalized education solutions, enhancing patient care and compliance across various healthcare settings.

Conclusion

MedView Systems is positioned to revolutionize homecare through its unique online patient education platform. By targeting homecare providers and hospital discharge planners, we aim to improve patient outcomes, reduce ER visits, and ensure that homebound patients are well-equipped to manage their medical devices. With our ambitious growth targets and commitment to innovation, MedView Systems is set to become a leader in the homecare industry.

Mission Statement: MedView Systems

MedView's mission is to empower homecare patients and caregivers with accurate, accessible, and easy-to-understand instructions that improve compliance, reduce hospital readmissions, and enhance the quality of home-based care.

MedView Systems is a leading patient education platform focused on the homecare industry. Founded to bridge the knowledge gap faced by non-medically trained patients managing complex home medical devices and therapies, MedView provides comprehensive, manufacturer-supported instructional content to improve patient outcomes and reduce the burden on caregivers and providers. By delivering step-by-step video demonstrations, user manuals, frequently asked questions, and now AI-enhanced guidance, MedView helps ensure patients can safely and effectively follow their prescribed care at home.

History

Over the past several years, MedView has experienced consistent growth in both reach and impact. In 2024 alone, the platform delivered 204,753 sets of instructions—an increase of 36% compared to 150,000 in 2023. The number of unique patients visiting MedView also grew substantially, reaching 105,663 new users in 2024, a 24% rise over the previous year. MedView's content was accessed through multiple devices, with 51% using laptops, 38% using smartphones, and 11% using tablets, reflecting broad accessibility across age groups and digital literacy levels.

MedView's content is organized into five major service categories: Disease Management, Medication Management, Respiratory Devices, Home Medical Equipment, and Telehealth. Each category addresses critical aspects of the homecare experience. In 2024, MedView delivered 20,923 disease management instructions (+7%), 30,058 medication management instructions

(+10%), 24,850 home medical device instructions (+50%), 38,430 respiratory instructions (+16%), and 9,239 telehealth-related instructions. The most accessed content includes tutorials on CPAP machines, oxygen concentrators, infusion pumps, glucose monitors, and virtual care processes. This level of engagement demonstrates MedView's growing importance as a primary educational tool for patients managing chronic conditions and complex home therapies.

The beginning of 2025 has already shown extraordinary progress. In the first quarter, MedView delivered 44,396 sets of instructions, marking a 91% increase compared to the fourth quarter of 2024. Growth was seen across all service categories, led by a 140% rise in disease management views, 90% in medication management, 62% in home medical devices, 79% in respiratory content, and 13% in telehealth. A key driver of this growth has been the introduction of "MedExplains," MedView's AI-driven education component. This tool enables patients to submit questions about their specific medical device and receive dynamic, tailored instructions sourced from manuals, manufacturer guidance, and MedView's own curated content.

In addition to instruction delivery, MedView launched and expanded its "Patient Direct Services" in 2024, connecting users to a network of vetted providers for caregiving, home monitoring, and supply delivery. By the end of 2024, 8 partner companies were listed, with 7,030 patients using these services. In 2025, this network is expected to expand to 12 vendors, further solidifying MedView's role as a comprehensive support system for homecare.

Looking ahead, MedView's strategic roadmap includes several ambitious initiatives. In partnership with the National Library of Medicine, MedView will integrate Medline's disease-specific content into the platform. The MedView mobile app, currently in development, will offer a more convenient interface for patients and caregivers, particularly seniors. Additional expansion includes creating custom educational portals tailored to three hospital systems and a national homecare provider—ensuring seamless discharge planning and continuity of care from hospital to home.

In an era where home-based care is becoming the norm for managing chronic illness, post-acute recovery, and aging in place, MedView stands out as a trusted, scalable solution. Its combination of AI-powered support, evidence-based content, and user-friendly delivery ensures that patients are not only equipped with the knowledge they need but are also empowered to take control of their health with confidence. MedView is committed to continuing its growth, deepening its partnerships, and innovating in the field of digital patient education, ultimately helping millions of patients lead safer, healthier lives at home.

Business Plan: MedView Systems – 2025

MedView Systems is a digital health education platform that delivers critical patient instructions for homecare therapies and medical devices. With over 32 million patients in the U.S. annually receiving homecare, 87% are unprepared to manage their physician-prescribed therapies, resulting in costly ER visits and hospital readmissions. MedView addresses this challenge through a robust platform of multimedia education resources—improving outcomes, reducing care costs, and enhancing patient independence. In 2025, MedView aims to expand its customer base, enhance AI-driven services, and scale internationally.

Business Description

Business Name: MedView Systems

Industry: Digital Health / Homecare Support

Product: Online Patient Education Platform

Services Include:

- 500+ sets of multimedia instructions (videos, manuals, FAQs)
- AI-based explainer content (MedExplains)
- Text-to-speech and clinician-sent personalized instruction tools
- 24/7/365 access for patients and caregivers across devices

Target Market:

- Hospitals and Discharge Planners
- Homecare Providers (HHA, DME, RT, Specialty RX)
- “At-Risk” Payers (ACOs, Medicare Advantage Plans)
- Government Health Services (VA, Medicaid)

Market Problem:

Most homecare patients are discharged with complex treatment responsibilities and lack proper training. This leads to non-compliance, complications, and unnecessary emergency care.

Solution:

MedView equips patients with manufacturer-based, protocol-aligned instructions for safe, effective homecare treatment.

Competitive Advantage

- Only platform with free access for patients and licensed B2B subscriptions
- AI-generated content through MedExplains for enhanced personalization
- Text-to-speech and explainer videos to accommodate low literacy and aging populations
- Built-in clinician portal to prescribe and send specific patient instructions

Revenue Models

MedView operates on two main models:

1. Licensing & Subscription Sales:
 - Hospitals and homecare organizations pay for access and integration of MedView content.
2. Custom Instruction Development:
 - Enterprise clients can request tailored instructions per disease, device, or protocol.

Licensing & Subscription

- MedView license cost - $\$5.00 \times 750 \text{ licenses} = \$3,750$ per month
- Expense of one patient readmission = $\$15,200^*$
- Targeted reduction in readmissions = 10%
- Assume a hospital has 50 readmissions per month

Step-by-Step Cost-Effectiveness Calculation

1. Current hospital/provider expense of readmissions per month = $\$15,200/\text{re-admit} \times 50 \text{ readmissions} = \$760,000$
2. MedView's effect on readmission reduction (10%) = 5 fewer readmissions per month
3. Savings from reduced readmissions = $5 \times \$15,200 = \$76,000$
4. Net benefit after paying for MedView: $\$76,000 \text{ savings} - \$3,750 \text{ license} = \$72,250$ in monthly savings

If MedView helps reduce hospital readmissions by just 10%, the return on investment is enormous. For every \$1 spent on MedView licensing, the hospital could save over \$19 in readmission costs. ($\$72,250 \text{ savings} / \$3,750 \text{ cost} = 19.26\text{x ROI}$)

This makes MedView highly cost-effective, even with modest impact on readmission rates.

MedView Systems is uniquely positioned to transform how patients manage their homecare therapies. With validated outcomes, scalable content, and a growing library of AI-powered instruction tools, MedView is on a clear path to reduce hospital readmissions, increase patient compliance, and support millions of patients worldwide.

* **National Library of Medicine, NIH**, Healthcare (Basel), . 2024 Mar 29;12(7):750.

doi: [10.3390/healthcare12070750](https://doi.org/10.3390/healthcare12070750) Systematic Review and Meta-Analysis of the Financial Impact of 30-Day Readmissions for Selected Medical Conditions: A Focus on Hospital Quality Performance.

Financial Projections (2025–2028)

MVS Projections (4 year)					
Revenue	Year 1	Year 2	Year 3	Year 4	
Hospitals	597,000	690,000	783,000	876,000	
Home Health	757,500	1,425,000	2,700,000	5,175,000	
Other	<u>217,500</u>	<u>409,500</u>	<u>775,500</u>	<u>1,489,500</u>	
Total Revenue	1,572,000	2,524,500	4,258,500	7,540,500	
Operating Expenses					
Utilities	24,000	28,800	34,560	41,472	
Office Rent	24,000	28,800	34,560	41,472	
Office & IT Equipment	12,000	15,600	20,280	26,364	
Sales & Marketing	18,000	24,300	32,805	44,287	
Promotion	<u>12,000</u>	<u>16,200</u>	<u>21,870</u>	<u>29,525</u>	
Sub Op. Exp.	90,000	113,700	144,075	183,119	
Employees					
IT Support	100,000	125,000	156,250	195,313	
Customer Service	75,000	93,750	117,188	146,484	
Implementation	125,000	156,250	195,313	244,141	
Sales/Manager	150,000	195,000	253,500	329,550	
Instructional Design	65,000	71,500	78,650	86,515	
Taxes & Benefits	<u>149,350</u>	<u>186,688</u>	<u>233,359</u>	<u>291,699</u>	
Sub Empl Exp.	664,350	828,188	1,034,259	1,293,702	
Other Expenses					
Attorney	30,000	37,500	46,875	58,594	
Accounting	<u>30,000</u>	<u>37,500</u>	<u>46,875</u>	<u>58,594</u>	
Sub Other Exp	60,000	75,000	93,750	117,188	
Total Expenses	814,350	1,016,888	1,272,084	1,594,008	
EBITDA	757,650	1,507,613	2,986,416	5,946,492	
Margin	48%	60%	70%	79%	

Revenue Growth:

- Year 1: Solid traction through hospital licenses subscriptions
- Year 2: Solid growth through hospital licenses and homecare subscriptions

- Year 3-4: Expand into international markets, scale AI content, and develop mobile app distribution.
- Year-over-year profit growth aligns with reduced development costs per instruction set and expanding subscriber base

Product Roadmap 2025, 2026

- Q2 2025: Launch of enhanced MedExplains AI module
- Q3 2025: Introduce MedView at Homecare Conference
- Q4 2025: Debut of international beta site (select EU markets)
- End of 2026: Target 150 hospital/homecare clients and 400,000 instruction views

Marketing & Sales Strategy

- Direct B2B sales to hospital systems and care providers
- Conference demonstrations at national homecare and discharge planner conventions
- Partner with device manufacturers for co-branded instruction content
- SEO and content marketing to grow organic patient/caregiver traffic

Team & Partners

- Founder with extensive homecare and patient education background
- Technical partner (Emory University collaboration on AI content)
- External vendors for video production, web, and mobile development

International Expansion

MedView sees promising opportunity in 25 additional countries where homecare compliance and hospital readmission are pressing issues. Target markets include Canada, the UK, Australia, and Japan.

Future Development:

- Platform development (AI, mobile, database)
- Video and content production
- Marketing and channel partner development
- Sales and support team expansion

Competitive Analysis

MedView's Position

MedView Systems is a specialized **digital patient education platform** for **homecare therapies and medical devices**, offering multimedia instructions—videos, manuals, FAQs, and AI-powered support. Its focus on homecare differentiates it in a healthcare landscape largely dominated by inpatient or clinic-based education solutions.

Key Competitors

Competitor	Focus	Strengths	Weaknesses
Krames (part of StayWell/Wolters Kluwer)	Patient education content for hospitals and clinics	Deep library of disease-specific education, integrated with EHRs	Primarily for institutional use, limited homecare focus, lacks device-specific instructions
Healthwise	Patient education and shared decision-making	Strong integration with health systems, interactive tools	Generalized content, limited home medical device guidance
Uptodate (Wolters Kluwer)	Clinical reference, some patient info	Clinically trusted, constantly updated	Not designed for non-clinical audiences; text-heavy
Mayo Clinic / MedlinePlus / WebMD	General health info for consumers	Brand recognition, wide coverage	Lacks interactive, device-specific training or guided video instructions
YouTube / Manufacturer Portals	Ad hoc educational videos	Convenience, visual learning	Quality inconsistent, no curation or patient-specific customization, lack of accountability
Care Academy	Training platform for caregivers	Compliance-focused, caregiver onboarding	Designed for professionals, not patients or family caregivers
Telehealth EHR platforms (e.g., Epic MyChart, Teladoc)	Remote care and some instruction	Integrated into patient portals	Limited education depth, not focused on durable medical equipment (DME) or therapy setup

How MedView is Better

Category	MedView Advantage
Device-Specific Education	500+ sets of manufacturer-approved medical device instructions (CPAP, O2 concentrators, infusion pumps, etc.)
Homecare Focus	Built specifically for patients managing care at home—not general clinic-based education
Multimedia Learning	Combines manuals, video demos, FAQs, and now AI-powered explainers (MedExplains)
Accessible 24/7	Content available anytime on mobile, tablet, or desktop without log-in barriers for patients
Customization	Clinicians can send specific instructions tailored to the patient's condition and device
AI-Powered Support	MedExplains offers AI-generated, multi-sourced instructions and text-to-speech capabilities for patients with low literacy or vision issues
No Patient Cost	Free to patients; monetized through institutional subscriptions, removes access barriers for low-income users
Focused on Outcomes	Supports compliance, lowers ER visits, reduces hospital readmissions, and reduces "on-call" provider burdens

While general health education platforms serve a wide audience, **MedView's niche in homecare device and therapy education, combined with its AI integration and accessibility, make it uniquely valuable.** Competitors either lack specific focus (like Healthwise or WebMD), or cater to professional users, not home-bound patients.

MedView fills a critical gap by serving the **"non-clinician caregiver and patient at home"**—a growing, underserved market in today's shift toward decentralized, home-based care.

MedView Financial Analysis (2025–2028)

Revenue Forecast (4-Year Projections)

The projected growth over four years reflects increasing adoption by hospitals and homecare providers through licensing and subscription sales.

Growth Drivers:

- Expanded sales to hospital systems and home health agencies
- Introduction of *MedExplains* (AI-enhanced education tools)
- Custom development projects for enterprise customers
- Mobile app launch and international expansion (25 countries targeted)

Revenue Assumption: Based on market demand and competitive positioning, revenues likely follow a high double-digit compound annual growth rate (CAGR), particularly after the AI and mobile platform enhancements launch in 2025.

Profit Forecast (4-Year Projections)

The increasing profitability is tied to scalable technology and content assets. Once educational content is developed, the cost of distribution is negligible, leading to improved margins over time.

Profitability Enhancers:

- Fixed cost structure for content and platform maintenance
- High-margin subscription revenue
- Custom contracts for tailored instructions or white-labeled solutions
- AI automation reducing future content development costs

Profit Assumption: Break-even projected within the second or third year with high scalability after initial investment in content and platform development.

Cost Structure

- Initial Investment Areas: AI development (MedExplains), mobile app engineering, video production, and content management.
- Ongoing Costs: Licensing fees for third-party integrations, cloud hosting, and customer support infrastructure.
- Low Variable Costs: Once built, content (video/manuals/AI modules) is reused across thousands of patients and providers.

Expansion Potential

- The international markets suggest monetization opportunities in **25+ countries**, particularly in systems with nationalized healthcare and strong homecare infrastructures (e.g., UK NHS, Australia, Canada, EU).
- Multilingual support and regional customization will be key to tapping these markets.

Financial Outlook Summary

Metric	Trend/Notes
Revenue	Strong year-over-year growth driven by licensing and customized patient education programs.
Gross Margin	High due to scalable content and low delivery cost
Net Profit	Increases significantly in Y2–Y4
Break-even Point	Early Year 2
Long-Term Sustainability	Strong—due to recurring revenue, institutional contracts and international growth

News Release:

MedView Patient Education Achieves 91% Growth in Q1 2025, Driven by AI-Powered Instruction Delivery

Atlanta, GA – April 22, 2025 — MedView Patient Education is proud to announce a significant 91% increase in patient instruction delivery in Q1 2025, rising from 23,352 instructions in Q4 2024 to 44,396. This remarkable growth spans all major instruction categories:

- **Disease Management:** +140%
- **Medication Management:** +90%
- **Home Medical Devices:** +62%
- **Respiratory Devices:** +79%
- **Telehealth:** +13%

This surge is attributed to the early 2025 integration of advanced AI large language models (LLMs) into MedView’s platform. These AI capabilities enable patients to submit questions about their specific medical devices and receive comprehensive, personalized instructions generated in real-time. This innovation not only enhances patient engagement but also ensures that educational content is tailored to individual needs, improving comprehension and adherence.

“The integration of AI-driven instruction generation has transformed our approach to patient education,” said HD Hunsberger, Founder at MedView Patient Education. “By providing personalized, on-demand information, we empower patients to manage their health more effectively, leading to better outcomes and increased satisfaction.”

MedView’s platform offers over 500 sets of patient education instructions, accessible 24/7 across various devices, including laptops, smartphones, and tablets. This comprehensive resource covers a wide range of topics, from chronic and acute care illnesses to the setup and maintenance of home medical equipment. [MedView Systems](#)

Looking ahead, MedView is committed to further enhancing its online patient education platform, leveraging AI technology to deliver even more personalized and effective educational experiences.

MedView Progress Summary – 2024 -2025 (Q1)

Historic and 2024 Performance Highlights

- **Total Instructions Delivered in 2024:** 204,753 instructions — up **36%** from 151,735 in 2023
- **New Patient Visits:** 105,663 — up **24%** from 85,694 in 2023
- **Device Access by Platform:** 38% smartphones, 51% laptops, and 11% tablets

Service Category Breakdown – 2024

- **Disease Management:** 20,923 instructions delivered (+7%)
- **Medication Management:** 30,058 instructions delivered (+10%)
- **Medical Device Instructions:** 24,850 instructions delivered (+50%)
- **Respiratory Devices:** 38,430 instructions delivered (+16%)
- **Telehealth Instructions:** 9,239 instructions delivered (modest recovery from prior years)

Q1 2025 Progress

- **Instruction Delivery Growth:**
Q1 2025 saw a **91% increase** in instructions over Q4 2024 (from 23,352 to 44,396)
- **Category-Specific Growth in Q1 2025:**
 - Disease Management: +140%
 - Medication Management: +90%
 - Home Medical Devices: +62%
 - Respiratory Devices: +79%
 - Telehealth: +13%
- **AI Integration Boost:**
Introduction of “MedExplains” — AI-generated instructions responding to patient-specific questions — significantly boosted user engagement

Strategic Advancements

- **AI Enhancements:** Launched “MedExplains” for dynamic, multi-source instruction generation.
- **Mobile App Development:** Underway for increased access and ease-of-use.
- **Expanded Vendor Network:** 12 direct service vendors offering caregiving, supplies, and home monitoring.
- **Custom Programs:** Education solutions tailored for 3 hospital systems and 1 homecare provider

This growth validates MedView’s role as a **critical resource** for patients managing complex home therapies, and reflects its commitment to **improving outcomes, enhancing patient independence, and lowering provider costs.**

Best Use of \$1.5 Million in Investor Funds

1. Technology Development – \$500,000

- **Mobile App Development:** Cross-platform app for iOS/Android with patient login, tracking, and instructional access.
- **AI Integration (MedExplains):** Enhance ChatGPT-driven content, support RAG (retrieval-augmented generation), and data scraping for real-time instructional content.
- **Custom Platforms for Hospitals/Homecare Providers:** Build white-labeled education portals for institutional clients.

2. Sales & Marketing – \$400,000

- **Sales Team Expansion:** Salary and travel costs for healthcare SaaS sales team targeting DME companies, HHA agencies, hospital discharge planners.
- **Digital Marketing Campaigns:** SEO, SEM, and paid ads targeting patients and providers.
- **Conference Participation:** Booths, sponsorships, and materials for major healthcare conferences (e.g., HIMSS, NHIA, Medtrade).
- **Client Relationship Tools:** CRM, lead tracking, and automated onboarding.

3. Content & Platform Expansion – \$250,000

- **New Instructional Content:** Video, voiceover, multi-language content for new devices and therapies.
- **Vendor Recruitment:** Onboarding additional “Patient Direct Services” companies.
- **Text-to-Speech/Accessibility Enhancements:** Ensure ADA compliance and increase patient usability.

4. Operations & Project Management – \$200,000

- **Implementation Support:** Hiring and training staff to onboard clients, manage instructional customization, and train providers.
- **Customer Success Tools:** Real-time analytics dashboard and feedback integration.
- **Security & Hosting Upgrades:** HIPAA-compliant hosting and secure data management.

5. Legal, Licensing & Contingency – \$150,000

- **Content Licensing Agreements:** Manufacturer approvals for device instructions.
- **Legal/Compliance:** Agreements, privacy policy, terms of use, and contracting support.

Recommended Staffing Plan to Support Growth

Sales & Marketing Staff (3 total)

- **1 Director of Sales & Partnerships**
- **1 Sales Manager** – Focused on hospitals, HHAs, DME companies
- **1 Social Media Strategist Digital Marketing Specialist** – Focused on organic growth and patient/provider engagement, SEO, email campaigns, and paid ads

Product & Implementation (2 total)

- **1 Project Manager, Implementation/Client Success Manager** – Onboards hospitals and vendor partners Oversees app dev, AI integration, and platform launches
- **1 AI Product Associate, Instructional Designer** – Manages MedExplains database, prompt testing, and user Q&A feedback

Summary

With a \$1.5M investment, MedView would scale its reach and deepen its platform capabilities—particularly AI, mobile, and custom enterprise solutions. The proposed team of **5 full-time staff** will support national growth, accelerate partnerships with hospitals and providers, and maintain MedView’s leadership in homecare education.

MedView License Agreement

Hospital Homecare Patient Education

Date:

Parties:

- **MedView** (hereinafter referred to as "Licensor")
- **[Hospital Name]**, located at [Hospital Address] (hereinafter referred to as "Licensee")

WHEREAS Licensor is the owner of a proprietary patient education platform known as MedView, which provides educational content for homecare medical devices; and

WHEREAS Licensee desires to obtain a license to provide access to MedView's platform to its homecare patients;

NOW, THEREFORE, in consideration of the mutual covenants and agreements hereinafter set forth, the parties agree as follows:

1. License Grant

* 1.1. Subject to the terms and conditions of this Agreement, Licensor grants to Licensee a non-exclusive, non-transferable, limited license to permit Licensee's enrolled homecare patients to access and utilize the MedView platform for educational purposes related to the following medical devices (the "Specified Devices"):

- * CAP Devices
- * Glucose Monitors
- * Respiratory Devices
- * Infusion Devices

* 1.2. This license authorizes Licensee to enroll its homecare patients ("Enrolled Patients") in the MedView platform. Enrolled Patients will have access to educational materials, including instructions, videos, and other content, related to the Specified Devices.

* 1.3. Licensee's discharge planners and physicians may refer or enroll an unlimited number of Licensee's homecare patients into the MedView platform.

* 1.4. This license includes the provision of monthly patient tracking reports ("Reports") to Licensee. These Reports will include user activity summaries for the Enrolled Patients.

2. License Fee and Payment Terms

* 2.1. Licensee shall purchase a minimum of seven hundred fifty (750) patient licenses per month for access to the MedView platform.

* 2.2. The license fee is Five Dollars (\$5.00) per patient license per month.

- * 2.3. The total minimum monthly license fee shall be Three Thousand Dollars (\$3,750) (750 licenses x \$5.00/license).
- * 2.4. Licensors shall invoice Licensee monthly in arrears.
- * 2.5. Licensee shall pay each invoice within thirty (30) days of the invoice date.
- * 2.6. All payments shall be made in United States dollars via \[Specify Payment Method, e.g., electronic funds transfer, check] to the account designated by Licensors.

3. Term and Termination

- * 3.1. This Agreement shall commence on \[Start Date] and shall continue for a period of one (1) year (the "Term"), unless earlier terminated as provided herein.
- * 3.2. Either party may terminate this Agreement upon thirty (30) days prior written notice to the other party if the other party materially breaches this Agreement and fails to cure such breach within such thirty (30) day period.
- * 3.3. Licensors may terminate this Agreement immediately upon written notice to Licensee if Licensee fails to pay any amount due under this Agreement within ten (10) days of the due date.
- * 3.4. Upon termination of this Agreement for any reason, Licensee's right to grant access to MedView to its patients shall immediately cease. Licensee shall ensure that all Enrolled Patients are notified of the termination and their access to the MedView platform is discontinued.

4. Intellectual Property

- * 4.1. Licensee acknowledges that the MedView platform, including all content, software, and intellectual property rights therein, is and shall remain the sole and exclusive property of Licensors.
- * 4.2. Licensee shall not, and shall ensure that its employees, agents, and Enrolled Patients do not, reproduce, modify, distribute, create derivative works of, publicly display, publicly perform, or in any way exploit the MedView platform or its content, except as expressly permitted herein.

5. Confidentiality

- * 5.1. Each party agrees to maintain the confidentiality of any proprietary or confidential information disclosed by the other party during the term of this Agreement ("Confidential Information"). Confidential Information shall include, but not be limited to, business plans, financial information, patient data, and technical information.
- * 5.2. The obligations of confidentiality under this Section shall survive the termination of this Agreement.
- * 5.3. Licensee shall ensure that all its employees, agents, and contractors with access to MedView and the Reports are bound by obligations of confidentiality no less stringent than those contained herein.

6. Data Privacy and Security

- * 6.1. Licensors shall implement and maintain reasonable administrative, physical, and technical safeguards designed to protect the security, confidentiality, and integrity of patient data accessed through the MedView platform, in accordance with applicable laws and regulations, including but not limited to the Health Insurance Portability and Accountability Act (HIPAA), to the extent applicable.

* 6.2. Licensee is responsible for ensuring that its enrollment and use of MedView complies with all applicable privacy laws and regulations, including obtaining any necessary patient consents for the disclosure of information to Licensors and the use of the MedView platform.

* 6.3. Licensors shall only use patient data as necessary to provide the services under this Agreement and as permitted by applicable law.

7. Disclaimer of Warranties

* 7.1. THE MEDVIEW PLATFORM IS PROVIDED "AS IS" AND "AS AVAILABLE," WITHOUT ANY WARRANTIES OF ANY KIND, EXPRESS OR IMPLIED, INCLUDING BUT NOT LIMITED TO WARRANTIES OF MERCHANTABILITY, FITNESS FOR A PARTICULAR PURPOSE, AND NON-INFRINGEMENT.

* 7.2. LICENSOR DOES NOT WARRANT THAT THE MEDVIEW PLATFORM WILL BE UNINTERRUPTED, ERROR-FREE, OR COMPLETELY SECURE.

8. Limitation of Liability

* 8.1. TO THE FULLEST EXTENT PERMITTED BY APPLICABLE LAW, IN NO EVENT SHALL LICENSOR BE LIABLE FOR ANY INDIRECT, INCIDENTAL, SPECIAL, CONSEQUENTIAL, OR PUNITIVE DAMAGES (INCLUDING, WITHOUT LIMITATION, DAMAGES FOR LOSS OF PROFITS, DATA, USE, GOODWILL, OR OTHER INTANGIBLE LOSSES) ARISING OUT OF OR RELATING TO THIS AGREEMENT OR THE USE OF THE MEDVIEW PLATFORM, EVEN IF LICENSOR HAS BEEN ADVISED OF THE POSSIBILITY OF SUCH DAMAGES.

* 8.2. LICENSOR'S TOTAL CUMULATIVE LIABILITY UNDER THIS AGREEMENT SHALL NOT EXCEED THE TOTAL LICENSE FEES PAID BY LICENSEE TO LICENSOR DURING THE TWELVE (12) MONTHS IMMEDIATELY PRECEDING THE EVENT GIVING RISE TO THE CLAIM.

9. Indemnification

* 9.1. Licensee agrees to indemnify, defend, and hold harmless Licensors and its officers, directors, employees, and agents from and against any and all claims, liabilities, damages, losses, costs, and expenses (including reasonable attorneys' fees) arising out of or relating to:

* (i) Licensee's or its employees', agents', or Enrolled Patients' use of the MedView platform in a manner not authorized by this Agreement;

* (ii) Licensee's breach of any provision of this Agreement; or

* (iii) Any claim that Licensee's use of the Reports or data provided by Licensors violates any applicable law or regulation.

10. Governing Law and Dispute Resolution

* 10.1. This Agreement shall be governed by and construed in accordance with the laws of the State of \[Specify State], without regard to its conflict of laws principles.

* 10.2. Any dispute arising out of or relating to this Agreement shall be resolved through \[Specify Dispute Resolution Method, e.g., binding arbitration in accordance with the rules of the American Arbitration Association]. The venue for any such arbitration shall be \[Specify City, State].

11. Entire Agreement

* 11.1. This Agreement constitutes the entire agreement between the parties with respect to the subject matter hereof and supersedes all prior or contemporaneous communications and proposals, whether oral or written.

12. Amendments

* 12.1. No amendment to or modification of this Agreement shall be effective unless in writing and signed by duly authorized representatives of both parties.

13. Notices

* 13.1 All notices and other communications hereunder shall be in writing and shall be deemed to have been duly given when (a) delivered personally, (b) sent by a nationally recognized overnight courier service, (c) transmitted by facsimile or email (provided that confirmation of transmission is received), or (d) sent by certified or registered mail, return receipt requested, postage prepaid, to the address of the party set forth in the preamble of this Agreement or to such other address as either party may designate in writing from time to time.

IN WITNESS WHEREOF, the parties have executed this License Agreement as of the date first written above.

MedView

By: _____

Name:

Title:

[Hospital Name]

By: _____

Name:

Title:

MedView Patient Education Homecare

Website Design Plan

MedView Patient Education is envisioned as a comprehensive, multi-page web platform to support homecare patients and their caregivers. The goal is to improve patient engagement and self-care in the home setting – ultimately boosting treatment compliance, reducing the burden on homecare management, and lowering avoidable hospital readmission rates. Inadequate patient understanding is a known contributor to non-compliance and readmissions; studies show many readmissions happen because patients **“do not fully understand their conditions or how to manage them”**, indicating that **“inadequate patient education can lead to non-compliance with treatment plans”**. By providing clear, accessible educational resources and tracking patient progress, the MedView platform aims to empower patients with the knowledge to manage complex medical equipment and chronic conditions at home. It will also leverage modern technologies – including AI-driven personalized content and text-to-speech – to enhance comprehension for a diverse senior patient population.

Key Objectives and Features:

To meet these goals, the MedView homecare website will include:

1. **Secure Patient Login & Dashboard:** A patient portal where users create a secure account to access personalized content and tracking features.
2. **Personalized Learning Plan:** Tailored educational modules based on the patient’s conditions and home medical devices (e.g. oxygen therapy, CPAP, insulin pump), potentially suggested by AI or the patient’s healthcare provider.
3. **Progress Tracking:** The ability to mark modules as completed, track quiz results or content viewed, and possibly share this progress with clinicians for follow-up.
4. **Multi-Modal Content Delivery:** Educational material provided in various formats – readable text, videos, infographics, and interactive tutorials – to suit different learning preferences. Each content page will also offer a “Listen” option via text-to-speech for audio playback of the information.
5. **Accessible, Senior-Friendly UI:** An intuitive interface designed for older adults, with large text, high-contrast colors, simple navigation, and clear calls-to-action. This includes considerations for those with limited tech experience or visual/hearing impairments.
6. **AI Integration:** Use of AI to generate or tailor patient information (e.g. simplifying medical jargon into plain language, translating content, or answering patient questions via a chatbot). AI-driven text-to-speech voices will read content aloud in a natural tone for improved understanding.
7. **Integration with Healthcare Systems:** Compatibility with existing platforms and EHR systems so that MedView can be embedded into a hospital’s patient portal or update the EHR when a patient completes education. Support for standards like **SMART on FHIR** will enable seamless data exchange (e.g. pulling patient diagnoses to recommend content, or documenting education completion in the EHR).

By combining these features, the MedView site will serve as a one-stop patient education hub that is engaging, easy-to-use for seniors, and connected with broader care workflows.

Design and Branding with a Blue Color Scheme

Visually, the MedView site will adopt a professional yet calming aesthetic, centered around various shades of blue as the primary brand colors. Blue is widely used in healthcare branding because of its positive connotations – **“Blue signifies stability, safety, intelligence, tradition, maturity, tranquility, and trust”**, and it **“is heavily used in healthcare because of its calming and trust-building properties”**. MedView’s design will leverage a palette of blues (for example, a light blue background with darker navy accents and bright blue action buttons) to evoke a sense of trust and reassurance for patients. This aligns with industry trends – over half of healthcare websites incorporate a shade of blue in their color schemes to appear reliable and soothing.

To keep the interface visually appealing and accessible, blue elements will be balanced with plenty of white space and high-contrast text. For instance, headings and body text might be dark gray or black on a white background for legibility, with blue used in the header bar, icons, and buttons. Important interactive elements (like a “Login” or “Start Lesson” button) can use a bold, saturated blue to draw attention, whereas softer blues can highlight informational panels or hover states. The consistent color scheme will also reinforce MedView’s branding across all pages.

Example of a homecare website using a blue-and-white design. In the example above, a senior care website utilizes a calming blue header and a friendly hero image to welcome users. MedView will similarly use a blue-themed layout with clear navigation and bold call-to-action buttons (e.g. “Sign Up” or “Learn More” in blue) to create a trustworthy, easy-to-navigate interface. The blue color not only provides a cohesive brand identity but also meets accessibility needs by offering good contrast when paired with white text or backgrounds. Overall, a blue-centric design will convey the professionalism and comfort that MedView aims to provide to homecare patients.

Senior-Friendly User Experience (UX) Design

Designing for an older adult user base is a central requirement for MedView. The interface and content presentation must accommodate age-related challenges in vision, hearing, cognition, and motor skills. Research confirms that **“interface design for seniors usually involves larger text sizes, increased color contrast, straightforward navigation, and simplified functionality”**. In practice, this means every aspect of the UX should be optimized for clarity and ease of use:

- **Readable Typography:** Use large base font sizes (at least 16px for body text) with the option to increase font size. Adequate line spacing and short line lengths will prevent text from feeling cramped. All text will be in clear, sans-serif fonts for legibility (e.g. a font like Arial or Open Sans, avoiding decorative or serif fonts that might blur for some users). Important points will be highlighted with bold text or larger headings rather than italics (since italics can be harder to decipher).

- **High Contrast:** Ensure a strong contrast between text and background. For example, black or dark blue text on a white background for main content, and use of light text on dark blue for headers or footers. Sufficient contrast makes reading easier for users with diminished vision or common conditions like cataracts. As guidance, **high-contrast color choices are “essential, as they significantly improve visibility” for older adults.** The color scheme will also avoid problematic combinations (like red/green) that could affect color-blind users.
- **Simplified Navigation:** The site structure will be kept intuitive and shallow. A top-level navigation menu with clearly labeled sections (e.g. Home, My Learning, Resources, Support, Contact) will help users easily find content. We will avoid complex drop-down menus or any requirement for precision mouse use – which can be difficult for seniors with declining motor skills or hand tremors. (Notably, standard UI elements like small dropdowns or sliders are **“more difficult for [older] users with declining motor skills”** on touch interfaces, so alternate UI controls like larger buttons or simple toggles will be used instead.) Each page will have a consistent layout (logo and menu at top, maybe a sidebar for quick links) so that once a user learns the navigation, it remains familiar throughout the site.
- **Large Clickable Elements:** Buttons and links will be designed with ample size and padding. Rather than text-only links in a paragraph, important actions will appear as distinct buttons in high-contrast colors (often blue) that are easy to tap on a tablet or click with a mouse. Icons used will be simple and universally recognizable (e.g. a download icon for saving a PDF). Moreover, **“larger icons are easier to see and decrease the chance of erroneous clicks or taps”**, improving the experience for users with limited dexterity. Interactive elements will also have clear focus states and hover indicators to aid users who tab through links or those with cognitive difficulties in tracking their cursor.
- **Short, Focused Content:** To avoid overwhelming users, information on each page will be chunked into small sections with descriptive headings. Seniors can have trouble with information overload or remembering complex instructions, so the site will favor a step-by-step or modular presentation. For example, instead of a long text block on “Managing Your COPD,” the content might be split into tabs or accordion sections: “Understanding COPD,” “Using Your Inhaler,” “Oxygen Therapy at Home,” etc. This approach aligns with best practices to **keep paragraphs short and use clear headers** so content is digestible. Interactive tutorials will pause at logical breakpoints and allow the user to proceed when ready, rather than animating or scrolling too quickly.

A caregiver assists a senior in using a tablet, underscoring the need for intuitive, senior-friendly design. The MedView platform will be built so that even patients with limited tech experience can navigate it – often older patients rely on family or caregivers initially, but the interface should be simple enough that they gain confidence to use it independently. Features like **large text and simple menus reduce the learning curve for seniors.** Additionally, visual cues will be provided: for instance, a progress bar or checklist icon might show which learning modules are completed, using clear symbols and text labels rather than color alone (helpful for those with low vision or color-blindness). By prioritizing accessibility (adhering to WCAG guidelines for contrast, font, and interaction feedback) and testing with actual senior users, the UX will ensure that patients in their 70s, 80s, and beyond can comfortably engage with the site.

Another consideration is language and literacy. The content will be written in plain language, avoiding medical jargon or explaining it in context, since nearly half of American adults have limited health literacy. Patient education experts recommend materials be **around a 6th-grade reading level or lower** to reach a broad audience. MedView will follow this guideline by using simple vocabulary and short sentences. In fact, an AI language model can assist by evaluating the reading level of content and simplifying text as needed (this is discussed more in the AI Integration section). By making both the design and the text senior-friendly, MedView aims to eliminate barriers that might prevent older patients from using digital educational tools.

Educational Content and Resources for Homecare

At the heart of MedView is a rich library of patient education materials, focused on topics most relevant to homecare, especially the operation of complex home medical devices and the management of chronic diseases. The content strategy will ensure that **top instructional topics** – such as respiratory therapy devices and chronic condition self-management – are prominently featured and easily accessible.

Content Topics and Scope: Patients and caregivers will find guidance on using and maintaining home medical equipment, including but not limited to:

- **Respiratory care devices:** e.g. oxygen concentrators and tanks, CPAP/BiPAP machines for sleep apnea, nebulizers and inhalers for COPD or asthma, ventilator care for those on home ventilation, and suction devices. Proper usage of these devices is critical; home health providers routinely “teach [patients] how to take their medication, and work on techniques to improve lung function,” including **“proper use of breathing devices or equipment”**. MedView will translate those teaching points into on-demand lessons (for example, a video demonstration on how to clean and replace a CPAP filter, or a step-by-step text guide on using a nebulizer with tips to ensure medication effectiveness).
- **Chronic disease management:** e.g. diabetes management (using a glucometer, insulin injection techniques or insulin pump operation, foot care), heart failure (daily weight monitoring, low-sodium diet education, recognizing signs of fluid buildup), COPD self-care (energy conservation techniques, breathing exercises), hypertension (using a home blood pressure monitor, lifestyle modifications), and so on. Education in these areas helps patients recognize early warning signs and adhere to treatment plans, preventing complications. For instance, a COPD module might cover breathing exercises and inhaler use, while a heart failure module emphasizes medication adherence and when to call the doctor.
- **Other homecare topics:** While respiratory and chronic illness content is the priority, the site can also include educational material for wound care (for patients with dressings or pressure ulcers at home), medication management (pill organizer usage, understanding prescription labels), mobility and fall prevention (safe use of walkers or canes, exercises to improve balance), and caregiver self-care tips. These topics round out a holistic homecare education resource.

Format and Presentation: Each topic in the library will be delivered in multiple formats to cater to different learning styles and accessibility needs:

- **Written Articles/Handouts:** Concise, easy-to-read articles with illustrations. These can often mirror or simplify the instructions that come from device manufacturers or hospital discharge papers. For example, MedView might host a “**CPAP Machine 101**” article, which simplifies the user manual into key points with diagrams (similar to the *CPAP Patient FAQ Sheet* provided by Johns Hopkins Home Care). All such write-ups will be available as printable PDFs so patients or caregivers can download and refer to them offline.
- **Videos and Animations:** Many patients benefit from visual demonstration. Short explainer videos will show how to perform tasks (like how to prime and inject insulin, or how to assemble a nebulizer). These videos will include voice-over narration and captions for accessibility. We will ensure these **educational videos are captioned** and possibly offer them in multiple languages, so they remain usable by hearing-impaired or non-English-speaking patients. Videos will be integrated via an easy-to-use player with playback controls (play/pause, rewind 10 seconds, etc.) since seniors may need to replay sections to fully grasp a procedure.
- **Interactive Tutorials:** For complex procedures, interactive modules can step the user through each stage and ask simple questions to reinforce understanding. For example, an insulin injection tutorial might pause and quiz “Where is an appropriate injection site?” and give immediate feedback. Such interactivity promotes engagement and ensures the patient doesn’t just passively consume information. The X-Plain platform is a model here – it provides **interactive tutorials that ask patients questions and give feedback to ensure understanding**. MedView can implement similar quiz checkpoints or a “knowledge check” at the end of each module, with gentle remediation (i.e., if a user answers incorrectly, it explains the right answer or directs them back to the relevant section).
- **Infographics and Quick Reference Aids:** Key points (like an asthma attack action plan, or a “signs of infection to watch for” checklist) can be delivered as one-page infographics. These visually appealing summaries are easy to print and stick on a fridge, for instance. They serve as memory aids for important steps or warning signs, reinforcing the longer tutorials and articles.

All educational content will be **designed for accessibility**. This means using plain language (as noted, ~6th grade reading level), and providing alternative formats: every video will have an equivalent text transcript; audio-based lessons will have text; images will have descriptive alt-text. The inclusion of text-to-speech on each content page is another way we address different needs – if a patient prefers to listen or has limited reading ability, they can click the “Play Audio” button and have the article read aloud in a clear, synthetic voice.

To assist non-English speakers or those more comfortable in another language, MedView could offer translations of key content. Initially, this might be a library of pre-translated materials for common languages (Spanish, Chinese, etc.). In the future, AI translation could dynamically convert any given article into the patient’s preferred language. Indeed, generative AI allows for creating content with “**narration in various languages**”, ensuring patients from diverse linguistic backgrounds can comprehend the information. The system might auto-detect the browser language or offer a language switcher to choose a translation.

Emphasizing Relevance and Top Topics: On the homepage or main dashboard of MedView, we will highlight the “*Top 5 Educational Topics*” that are most applicable to our user base. For a homecare audience, this might include titles like “*Using Your Oxygen Therapy Equipment Safely*,” “*Preventing Hospital Readmissions for Heart Failure*,” “*Mastering Your Medications*,” etc. By spotlighting these, we draw users into the most impactful content right away. Additionally, if the user’s profile indicates they have a specific device or diagnosis (say, COPD), the site will feature relevant content prominently for them (e.g. a COPD patient sees a “**Lung Health**” section on their dashboard with links to inhaler, nebulizer, oxygen use tutorials). This personalization (discussed next) helps make the vast library less overwhelming – the patient can still search the full library, but the most relevant lessons bubble up first.

Finally, MedView will maintain **up-to-date and evidence-based content**. Medical information changes (new guidelines, device recalls, etc.), so an editorial process will be in place to review and update materials regularly. Integration with sources like MedlinePlus or professional societies can help ensure accuracy. For example, if a new recommendation comes out for diabetic foot care, the relevant module on MedView would be revised accordingly. By providing trustworthy, current information, the site builds credibility with both patients and clinicians who may refer patients to use it.

AI Integration and Text-to-Speech Features

One of the distinguishing features of the MedView platform is the integration of artificial intelligence to enhance patient education. AI will be employed in several ways to make the content more **personalized, understandable, and interactive**:

1. Personalized Content Generation: Using generative AI (like large language models), MedView can tailor information to the individual patient. Instead of one-size-fits-all text, the system could dynamically generate a summary or explanation that factors in the patient’s specific conditions, treatment plan, or even their progress so far. For example, if a patient with diabetes and hypertension logs in, the landing page might greet them with: “*Welcome! Here are today’s tips: How to manage your blood sugar when you’re feeling sick, and a reminder to check your blood pressure properly.*” This message can be generated by AI pulling from a knowledge base of diabetes and hypertension education. Generative AI is capable of “**translating complex medical jargon into layman’s terms**”, effectively acting as an intermediary between clinician-level information and patient-friendly language. This means MedView could take something like a hospital discharge summary or a doctor’s notes and produce a simplified explanation for the patient to review at home (with appropriate safeguards and accuracy checks). It’s important to note that any AI-generated content would be vetted for medical accuracy – likely by having the AI stick to a curated database of facts or by requiring a clinician to approve custom outputs for critical instructions.

2. Adaptive Literacy and Language Level: AI can help adjust the reading level of content on the fly. If a patient is struggling with the material (perhaps indicated by quiz performance or by explicit feedback), the platform could offer an easier-to-read version generated by AI simplification. There is emerging evidence that tools like ChatGPT can successfully “**simplify written patient information, making it more accessible and comprehensible**” for the average

reader. MedView could implement a feature where each article has a toggle: “Simplify this for me,” which triggers the AI to rephrase paragraphs at a lower reading level (while preserving the key information). Similarly, AI can generate content in multiple languages. Instead of static translations, the system might use a model to provide on-demand translation or even culturally tailored examples. For instance, a dietary advice section could be tweaked by AI to include food examples familiar in the patient’s culture. The generative AI in cardiovascular education research has shown the potential of such adaptation, noting that AI can **“consider patients’ respective levels of health literacy”** and even cultural background to make content more relatable. This level of personalization could greatly increase understanding and retention of information.

3. Chatbot Support and Q&A: We can incorporate a chatbot feature – an AI assistant that patients can ask questions to. This would function like a conversational agent available on the site (perhaps a “Ask MedView” chat bubble on the corner). Patients could pose questions like, “What should I do if my catheter insertion site looks red?” or “How often should I clean my CPAP mask?” The AI, backed by the MedView knowledge base, can provide immediate answers or direct the user to the relevant module. Chatbots in healthcare have been used to guide patients to information and even help with triage in some cases. Our chatbot would strictly stick to educational guidance – it’s not a doctor – but it can be very useful for reinforcing education. If it encounters a question, it cannot answer or is beyond its scope (for example, very specific to the patient’s medical data), it can prompt the user to contact their healthcare provider. Over time, the chatbot’s interactions could also inform us what new content might be needed in the platform (e.g. if many ask about a particular side effect, perhaps a section on that is missing).

4. Text-to-Speech (TTS) for Audio Learning: A core AI feature is the text-to-speech integration. All textual content on MedView can be converted to spoken audio with natural-sounding AI voices. This is extremely valuable for patients who have visual impairments, low literacy, or even those who simply prefer listening over reading (some seniors might find it less tiring to listen). The site will have a prominent “Listen” or speaker icon on each article page – clicking it will invoke an AI voice that reads the content aloud. Modern AI voice technology produces **voices that sound much like real people, with the ability to adjust speed and tone.** Users might be able to control the playback speed (slow it down if needed), and the voice can emphasize important points (for example, a caution or warning might be read in a concerned tone). The text being read could be highlighted in sync, providing a follow-along pointer that can improve comprehension for those with cognitive difficulties. Studies have shown that such voice tools in patient education **make patients happier and more likely to follow their treatment plan**, as they truly understand the information. By hearing instructions in simple language, patients can grasp complex instructions more easily – they can replay the audio as many times as needed until they feel comfortable. TTS also enables **hands-free** learning; a patient could listen to a module while resting or while practicing with their device. For hearing-impaired individuals, MedView’s approach would be to ensure closed-captioning on videos and possibly provide sign-language video snippets for critical information (though sign-language content is more specialized, AI is starting to generate **sign-language videos to accommodate patients with hearing impairments** – a future feature we might explore).

5. Voice Interaction: In addition to on-screen chatbot text, we could integrate voice recognition to allow patients to *speak* questions or commands, which the AI then responds to verbally. This would mimic a virtual voice assistant (like Alexa or Siri) focused on homecare education. For example, a patient could press a mic button and ask, “Please read my wound care instructions” and the system will jump to that content and read it aloud. Such voice-based interfaces can be particularly helpful for those who have trouble typing or navigating menus. While this is a more advanced feature, it aligns with making MedView as accessible as possible – technology permitting users to interact naturally can break down tech barriers for seniors. Voice recognition accuracy for older voices and medical terms will need careful tuning, but recent AI advances are making this more feasible.

Overall, the AI components of MedView serve to **augment the educational experience, not replace the vetted content or the healthcare provider’s input**. They act as a personalized layer of support: ensuring the information is at the right comprehension level, providing audio/visual alternatives, and giving users on-demand help as questions arise. Importantly, these features will be implemented with oversight to maintain accuracy and consistency with standard care instructions. For instance, AI-generated advice can be cross-checked against a library of approved answers; any critical safety information will always be scripted and not left to AI improvisation. With these precautions, MedView’s AI and TTS capabilities can significantly enhance patient understanding and engagement, making the education process more interactive and inclusive.

Patient Portal Functionality and Tracking Progress

MedView will function as a patient portal specifically dedicated to education. Upon logging in, patients will enter a personalized dashboard that organizes their learning journey. The portal design will borrow familiar patterns from other patient portals (to minimize the learning curve) while focusing on educational content rather than medical records.

Login and User Profiles: Each patient (or their caregiver) will have a secure login (username/password, with options for two-factor authentication to protect sensitive health data). The profile setup could allow the user to input or verify their key health information – such as diagnoses, list of homecare equipment, preferred language, and accessibility needs (e.g. “large text mode” or “colorblind-friendly mode”). This profile data will help customize the experience (for example, if a profile lists “insulin pump,” the system knows to highlight diabetes device content). If MedView is integrated with an EHR or referral system, some of this data might flow in automatically (e.g. the hospital could pre-register a patient and tag which modules are prescribed to them).

Dashboard and Navigation: After login, the **Dashboard** page will greet the user by name and provide an overview of their educational plan. Key components of the dashboard might include:

- **“My To-Do List” or Assigned Modules:** a list of education modules the patient is recommended to complete, possibly with due dates (for instance, a note like “Complete ‘Managing Heart Failure at Home’ by Oct 10” if a provider set a due date before a follow-up appointment).

- **Progress Indicators:** a visual representation (such as a progress bar or checklist) showing how many modules have been completed out of those assigned or available. This gamification element can motivate patients to continue learning. If, say, 3 of 5 recommended lessons are done, a progress bar might show 60% complete, encouraging them to finish the remainder.
- **Recent Activity:** a section that shows what the patient last viewed and offers quick resumption (e.g. “*Continue watching Oxygen Safety Video (last viewed 3 days ago)*”). This helps users pick up where they left off.
- **Achievements or Compliance Tracking:** MedView could award badges or acknowledgments for completion of certain key modules (like a badge for completing all “Respiratory Care” lessons). More tangibly, if integrated with provider oversight, it might show a message like “*Dr. Smith has been notified of your progress – great job completing your education!*” which reinforces that their effort is recognized in their care.

Navigation through content will be straightforward. From the dashboard, clicking an assigned module takes the user directly into that lesson page. There will also be a top menu link to “**Education Library**” where all available topics are categorized for browsing (for instance, categories like Respiratory, Cardiac, Diabetes, Equipment, Activities of Daily Living, etc.). A search bar will allow users to search the site for specific topics or keywords (e.g. “nebulizer cleaning” would bring up the relevant section in a module). Given that older users might not use search extensively, we will also include a **glossary/index** of terms that links to the pages where those terms are explained, and a FAQ section for common user questions about using the portal itself.

Tracking and Feedback: A major feature of the portal is tracking what the patient does and feeding that information back in useful ways. For the patient, being able to see their own progress (as mentioned) can be rewarding. For example, after completing a module, the portal might show a checkmark and “*Completed on [date]*”. The patient could also rate the module or mark if they had difficulty understanding it – this feedback can be used to further personalize their content (for instance, if they indicate a module was too advanced, the system might suggest a more basic overview next).

From the healthcare provider side (or caregiver side), tracking is invaluable. If MedView is connected to an EHR or provider dashboard, clinicians can verify which education components the patient has engaged with. WebMD’s Ignite platform, for example, lets providers “**check patient records... [to know] exactly what educational tools and videos patients accessed**”. Similarly, MedView can generate reports or notifications: e.g., “*Patient John Doe has completed the Heart Failure education module and scored 80% on the quiz.*” This allows the home health nurse or physician to focus follow-up conversations on areas the patient might have missed or misunderstood. Conversely, if a patient isn’t completing assigned education, the care team can be alerted to reinforce the importance or assist the patient in using the portal. This kind of **shared tracking between care teams and patients** encourages accountability and collaboration in patient education.

Caregiver Access: Since many homecare patients have family caregivers assisting them, MedView could offer caregiver/family login access (with the patient’s permission) or simply

encourage patients to go through modules together with their caregiver. A caregiver might have their own credentials that are linked to the patient's account (with appropriate privacy controls). This way, an adult child, for example, can log in and monitor that their elderly parent is keeping up with the learning, or even complete modules on their behalf and then teach the parent in person. Supporting caregivers in this manner recognizes that homecare is often a team effort. It also helps reduce caregiver burden by giving them resources and confidence – a well-informed caregiver can manage care tasks with less stress. (Caregiver burden is a real issue; home health experts note that agencies should efficiently **provide education and support to caregivers to keep them going**. MedView can be one form of support available 24/7.)

Notifications and Reminders: The portal can send gentle reminders to patients via email or text (depending on user preference settings). For example: *“Don’t forget to complete your ‘Safe Injection Practices’ module this week. You’re almost finished – 2 of 3 lessons done!”* or *“New content added: Watch our new video on Preventing Falls in the Home.”* Reminders will be carefully timed and not too frequent (to avoid annoyance), but they can significantly improve engagement by nudging patients who might procrastinate or forget. If integrated with a health system, these notifications might also appear in their general patient portal or app.

Finally, the portal will include a **Help/Support** section. This will provide guides on how to use the site (possibly a tutorial module about using MedView itself), a way to contact technical support, and perhaps a community forum or common Q&A. Some seniors may be new to using an online portal, so offering patient tech support is crucial. A phone hotline or chat for technical help could be listed prominently.

In summary, the patient portal aspect of MedView ensures that education is not just a static one-off resource but part of an ongoing process. By logging in and tracking progress, patients are more likely to engage repeatedly, and providers can integrate these activities into the patient's care plan. It transforms patient education from pamphlets handed at discharge (often forgotten or lost) into an interactive, monitored, and adaptive journey.

Integration with EHR and Existing Platforms

To maximize its impact and usability, MedView will be built with the capability to integrate into existing healthcare IT ecosystems, especially electronic health record (EHR) systems and hospital patient portals. Integration ensures that MedView can complement clinical workflows rather than exist as an isolated tool. Here are key considerations for integration and compatibility:

SMART on FHIR Integration: MedView will support **SMART on FHIR** standards – a modern protocol for embedding third-party apps within EHR systems like Epic or Cerner. Using SMART on FHIR, MedView can launch inside a health system's patient portal or clinician interface, pulling context such as the patient's diagnoses, medications, and demographics securely (with consent). This is similar to how WebMD's *Ignite on FHIR* works, providing **“educational content directly in the patient portal”** and integrating into EHR workflows. For

example, a clinician using Epic could trigger MedView for a specific patient at discharge: the clinician selects an “Education” tab, which opens the MedView interface showing recommended modules for that patient (based on their problem list). The patient, on their end, could access MedView through their regular hospital portal login without needing a separate account – single sign-on would pass them into MedView seamlessly.

Patient Context Sharing: With integration, MedView can automatically tailor content using the patient’s data from the EHR. If the EHR indicates the patient has COPD and was prescribed a nebulizer, MedView can highlight the nebulizer tutorials, saving the patient from searching. Likewise, if the patient’s preferred language in the medical record is Spanish, MedView can default to showing Spanish content if available. The integration will utilize FHIR resources such as Condition, Medication, Device, etc., to get this context. An **Infobutton** mechanism (HL7 Context-Aware Knowledge Retrieval standard) could also be used – this is a simpler way some EHRs link out to education: e.g., the clinician clicks a button next to a diagnosis in the chart, and it opens the patient education page for that condition. MedView can act as an Infobutton provider, meaning if a doctor clicks “Education on Heart Failure” in the EHR, it opens the MedView heart failure page for that patient. The X-Plain system notes that the most common integration is via an Infobutton link on the patient portal, and MedView will support that for broad compatibility.

Write-Back and Documentation: Integration isn’t just one-way. Ideally, MedView will report completion data back into the EHR. This means when a patient finishes a module, a record could be added to the EHR (for instance, in Epic it might create an “Education” record or note in the patient’s chart indicating completion of that topic on a certain date). This helps providers document that required education was provided (which can be important for compliance with care standards, and even for billing in some cases). The data exchanged will, of course, comply with privacy laws (HIPAA in the U.S.), meaning the patient’s consent is required to share their usage data. Since MedView is part of their care plan, typically patients do consent to such tracking as it’s similar to documenting they received educational materials.

From a technical standpoint, using secure APIs and standards ensures that integration does not pose security risks. All data transmission will be encrypted. We would also design MedView’s architecture to be modular: it can run as a standalone web application for direct users, or embedded within another site via a secure frame or redirect, depending on the health system’s preference.

Compatibility with Devices: Apart from EHR integration, MedView should integrate with the variety of devices patients might use. The website will be fully **responsive** – accessible on desktop computers, tablets, and smartphones. Many seniors use tablets (with larger text) for patient portals, so the design will cater to touch input and different screen sizes. If the platform is widely adopted, a dedicated mobile app could also be developed for even easier access (though a web-responsive design is the primary plan, as it covers all devices without requiring installation).

Embedding in Other Platforms: Home health agencies or device manufacturers might want to link or embed MedView content in their own platforms. For example, a home infusion therapy company could link their patients to relevant MedView modules. To facilitate this, MedView can

offer **embed codes or partner access** – perhaps even a way to white-label or co-brand the content if needed. However, managing the integrity and updates of content is easier if accessed through the main site or via integration rather than distributing content packages.

Interoperability with Health Apps: Many patients and caregivers use medication management apps or telehealth services. MedView could in the future integrate with such tools – for instance, if a telehealth nurse is doing a video visit, they could push an education module to the patient’s MedView dashboard in real-time (“I’m sending you a video on how to change your wound dressing; you’ll see it in your MedView learning list”). This kind of interoperability extends MedView’s usefulness across different care delivery methods.

In essence, integration ensures that MedView is not an extra burden for patients or providers to manage, but rather an organic part of the care continuum. When a patient moves from hospital to home, MedView travels with them through the EHR link; when a home health nurse visits, they know exactly what the patient has been learning via the portal; and when the patient returns for a clinic visit, the doctor can see education engagement data to discuss. By designing for integration from the start (using widely adopted standards and flexible login/authentication methods), we set MedView up to be easily adopted by healthcare organizations. This also increases the likelihood that providers will actively use and recommend the platform – if they can prescribe an education module with one click and see results, it becomes a powerful extension of their teaching, rather than something that lives separate from the medical record. Compatibility and integration, therefore, significantly amplify MedView’s impact on patient outcomes.

Emphasizing Patient Compliance and Reducing Readmissions

A core premise of MedView is that better patient education will lead to better adherence to care plans and ultimately better outcomes. Thus, the site’s design and content continuously reinforce compliance behaviors and address factors that commonly lead to homecare difficulties or hospital readmissions.

Promoting Adherence: Every module on MedView will highlight the “*why*” behind the instructions – connecting the educational content to the real-world benefit for the patient. For example, a medication management lesson will explicitly note that taking medications as prescribed will keep the condition under control and *prevent urgent hospital visits*. By understanding the rationale, patients are more likely to follow through. Research shows that “**the more clearly a disease is understood, the more likely it is that an individual will be comfortable with their care and adhere to necessary regimens**”. We leverage this by ensuring clarity and understanding. Additionally, MedView can include practical tools to aid compliance: downloadable medication checklists, symptom diaries, or device maintenance logs. These can be filled out by patients to track their own adherence (e.g., a daily checklist for completing all required therapies/exercises). Such tools, when used, give patients a sense of control and routine, which improves persistence with treatments.

Feedback Loops: The tracking features described earlier also serve to improve compliance. Knowing that their healthcare team can see their progress might motivate patients to complete modules (similar to how having a pedometer or fitness tracker nudges people to hit their step

goals). We will, however, be careful to keep the tone encouraging rather than punitive. If a patient falls behind, MedView might display a gentle reminder or even adjust by offering smaller, easier bits of content to re-engage them rather than scolding. Positive reinforcement (like congratulatory messages or even small rewards such as certificates of completion) can boost confidence and encourage continued compliance.

Addressing Readmission Risk Factors: Many readmissions in homecare happen due to misunderstandings or not recognizing warning signs in time. MedView’s content strategy specifically targets these gaps. For instance, for heart failure patients, a critical part of education is knowing the early signs of decompensation (weight gain, swelling, shortness of breath) and what actions to take. MedView will have dedicated sections like *“When to Call Your Doctor or 911”* within each relevant module, written in clear terms. Patients will be taught not just routine care but also how to respond to problems. By preparing patients and families to handle issues, we can help avoid crises that lead to ER visits. **Lack of patient education is cited as a major modifiable factor in readmissions** – patients who don’t understand their care instructions are far more likely to be readmitted. Conversely, providing **“transparent, accessible educational materials”** and ensuring patients grasp their treatment plan is associated with fewer complications and readmissions. We will make sure that MedView covers discharge instructions thoroughly (almost serving as a digital discharge packet that patients can revisit anytime).

Moreover, each module will stress the importance of adherence in tangible terms. For example, a lesson might explicitly state: *“Taking your COPD medication daily as directed can keep you out of the hospital. Studies show that when patients follow their treatment plan, they have fewer flare-ups and ER visits.”* In fact, evidence in the American Journal of Medicine found **“patient education significantly improves compliance... Lack of compliance is associated with poor clinical outcomes, increased hospitalizations, lower quality of life, and higher overall health costs.”** We will incorporate such insights (in lay language) to underline how the patient’s actions (like proper device use and medication adherence) directly influence whether they stay well at home.

Caregiver Empowerment: Reducing the homecare management burden is another angle. A well-educated patient often means a less stressed caregiver. MedView will include content meant for caregivers – for instance, how to safely assist with mobility, how to prevent caregiver burnout, respite resources, etc. By addressing caregivers’ needs, we indirectly improve patient care because the caregiver is an integral part of homecare for many. An informed caregiver can better help the patient stick to the care plan (like reminding about exercises or coordinating follow-up appointments) and can also take proactive steps to avoid caregiver fatigue. The platform could also foster communication between patient, caregiver, and providers by allowing caregivers to leave notes or questions in the system for the provider to see (if integrated, perhaps a message like *“We had trouble using the new feeding pump – can someone review it with us?”*). This ensures issues are caught early rather than resulting in acute problems.

Outcome Metrics: Over time, MedView itself could contribute to quality improvement by tracking outcomes. For example, we could monitor whether high-engagement users have fewer readmissions or urgent calls than low-engagement ones. This data (de-identified and aggregated) can help refine the content to focus on what’s most effective. But even without that, we design

based on known best practices – such as the *teach-back method*, which has been shown to reduce readmissions. While MedView isn't in-person to do teach-back, our interactive quizzes and summaries essentially simulate teach-back, confirming patient understanding. If a patient can answer the quiz questions correctly, that's a form of teach-back success, indicating they comprehended the key points.

Encouraging Continuity of Care: Another compliance angle is ensuring continuity and follow-up. MedView can remind patients of upcoming appointments or prompt them to schedule things like routine lab tests (if this info is synced from the EHR). It can also direct them to local resources (for instance, if a patient needs a flu shot, MedView might pop up a reminder and a link to find nearby clinics). These “care coordination” touches further reduce the chance of lapses in care that lead to complications.

Patient education done right benefits everyone in the healthcare system. As one summary put it, **“Patient education promotes patient-centered care and increases adherence... An increase in compliance leads to a more efficient and cost-effective healthcare delivery system. Educating patients ensures continuity of care and reduces complications.”**. MedView's entire design is built to realize these benefits: by educating patients (and caregivers) in an engaging way, reinforcing important behaviors, and integrating with their care team, it seeks to improve health outcomes and reduce preventable healthcare utilization. Lower hospital readmission rates are a tangible metric of success – if patients stay healthier at home because they are empowered with knowledge, then MedView will have achieved its purpose.

Similar Healthcare Education Platforms and Inspirations

In developing MedView, we draw inspiration and lessons from existing healthcare and patient education websites. There are several analogues in the industry that address parts of this problem, and examining them helps inform the best practices for our design:

- **WebMD/Krames “Ignite” Platform:** WebMD Ignite (formerly Krames on FHIR) is a solution that integrates patient education into clinical workflows. It uses SMART on FHIR to embed content in EHRs like Epic, allowing clinicians to easily prescribe education and patients to view it in their portal. Notably, it features a mix of **digital, video, and printable content based on the patient's profile**, and lets care teams track what education has been accessed. This platform reinforces the importance of integration and tracking, which MedView also prioritizes. It also shows the value of having up-to-date, curated content libraries that can be matched to a patient's specific encounter or condition. Our design echoes these ideas by making content easy to share between provider and patient, and by covering multiple content formats (video, print, etc.).
- **X-Plain Patient Education Library:** X-Plain is a product that provides an online health education library for patient portals. It includes **interactive tutorials, videos, and illustrated handouts** on a wide range of topics, and importantly, **patients can choose their preferred format** (tutorial, video, or text) for learning. X-Plain's approach of offering the same content in multiple formats validates our plan to do likewise – because some users will watch a video while others may read a handout, depending on their preference. X-Plain also uses quizzes to ensure understanding, an approach we have

incorporated. Essentially, X-Plain demonstrates a successful template for multimedia education delivery within a portal, and MedView aims to provide a similarly rich, flexible experience but with added AI features and a specific focus on homecare scenarios.

- **Hospital Patient Portals (with Education sections):** Many hospital systems have patient portals (like MyChart from Epic) that include sections for patient education. For example, some portals allow patients to review **personalized education materials that were shared by their provider**. Often these are PDF handouts or links to trusted websites (like MedlinePlus or disease-specific organizations). The take-away for MedView is that being integrated and *prescribed* by providers increases usage. We want MedView to be the place providers send patients for more info. Additionally, seeing how portals organize content – usually by condition or date shared – influenced our idea for a dashboard that lists assigned modules. We also know from these portals that **single sign-on and ease of access** is key; if logging in is too cumbersome, patients won't use it. So we would strive to let MedView be accessed from a link in the existing patient portal if possible, to leverage established user habits.
- **Home Health Agency Websites:** Some homecare organizations provide educational content on their websites or through emailed newsletters. For instance, CenterWell Home Health's site emphasizes patient and family education, noting that **"tools and education can help you become more confident in managing your condition so you know what to do... preventing unplanned hospitalizations."** This highlights the messaging angle – these sites often speak directly to the value of education in staying healthy at home, something MedView will also emphasize throughout its content. However, agency websites typically provide only general tips or downloadable guides, not an interactive portal. MedView differentiates by being a full-fledged interactive platform. Still, the success of those sites in engaging families (through blogs, articles, etc.) suggests that combining informative content with real-life testimonials or stories could enhance relatability. We might include short patient success stories (e.g., "Meet Jane, who used these lessons to master her IV care at home – and how it helped her avoid complications") to motivate users.
- **Public Health Education Resources:** Resources like **MedlinePlus Easy-to-Read** and CDC's patient education materials serve as quality benchmarks for content. They ensure information is accurate, up to date, and written in plain language. MedView will leverage such reputable sources when creating content (and even directly link out to them for additional reading). The **MedlinePlus Easy-to-Read** collection, for instance, provides health information that is simplified for those with limited literacy. We can use that as a reference to check our content's readability. While these public sites are not personalized or interactive, they remind us to maintain clarity and evidence-based information.

By examining these existing solutions, we reinforce that MedView's feature set is aligned with proven strategies: integration (WebMD Ignite), multimedia and interactive content (X-Plain), user-friendly access (hospital portals), motivational framing (home health sites), and plain-language accuracy (MedlinePlus). MedView's innovation is in combining these elements into one cohesive platform specifically tailored for homecare patient needs and layering AI capabilities on top for personalization and engagement.

Conclusion – Website Design

MedView Patient Education for Homecare is designed as a comprehensive, user-centered platform that brings together the best practices in patient education, senior-friendly web design, and health technology integration. Through a calming blue-themed interface, clear navigation, and accessible content, it will welcome even the least tech-savvy senior patients. Each page and feature are crafted to remove barriers – whether by using large, legible text for the visually impaired, offering one-click audio playback for those who prefer listening, or breaking down complex caregiving tasks into simple, stepwise lessons.

Functionality-wise, MedView goes beyond a static repository of pamphlets. It is a dynamic portal where patients log in to find personalized learning plans, engage with interactive tutorials, and receive gentle guidance shaped by AI to fit their unique needs. The incorporation of text-to-speech, chatbots, and adaptive content means that patients will not be left puzzled by medical jargon or lengthy instructions – the platform actively works to **translate “doctor-speak” into plain language and actionable steps**. This level of support can significantly boost a patient’s confidence in self-care.

Crucially, MedView is not an island; it’s built to plug into the existing healthcare continuum. By integrating with EHR systems and being prescribed by providers, it ensures continuity between what happens in the hospital or clinic and what happens at home. The patient’s care team remains in the loop, able to see educational progress and reinforce it, effectively extending the reach of clinical education into the home environment. This closes the feedback loop that is often missing after discharge – no longer does a patient have to rely on memory or scattered papers; they have a tailored educational coach at their fingertips.

The anticipated outcomes of implementing MedView are compelling. Educated patients are empowered patients – they are more likely to take medications properly, use their medical devices safely, and recognize when to seek help. Over time, this translates into fewer emergency calls and rehospitalizations for preventable issues. As cited, patient education has a **“profound connection”** with reduced readmissions and improved satisfaction. By focusing on the areas that matter most (like respiratory device management and chronic disease control), MedView targets those very factors.

Additionally, MedView provides relief to caregivers and home health professionals. It offers a scalable way to deliver consistent training without overburdening nurses with repeated explanations. Caregivers gain a reliable reference to consult 24/7, which can alleviate anxiety and reduce burnout. The platform essentially becomes an always-available extension of the care team, ready to answer questions or review instructions as often as needed.

In summary, the MedView Patient Education website will be a **modern solution for an age-old challenge**: how to ensure patients truly understand and follow through with care instructions once they are on their own at home. By blending a thoughtful UX (grounded in senior UX principles and a trustworthy blue palette) with rich educational content and smart technology, MedView stands to improve patient engagement and outcomes in the homecare industry. Patients will feel supported and empowered, providers will gain partners in care who are

informed and proactive, and healthcare organizations will see the benefits in improved metrics like compliance rates and reduced readmissions. MedView’s design and structure, as outlined in this report, aim to make patient education more effective, enjoyable, and integrated than ever before – ultimately helping more homecare patients live safely and independently, with knowledge as the best medicine.

Sources: The design recommendations and strategies above are supported by current best practices and findings in patient education and UX design, as referenced throughout, among others. Each cited source reinforces key aspects of the plan – from the choice of color scheme to the importance of interactive content and the positive impact of education on patient outcomes. These references ensure that the MedView platform is built on evidence-based principles and real-world examples of success in the healthcare domain.