IntPowers

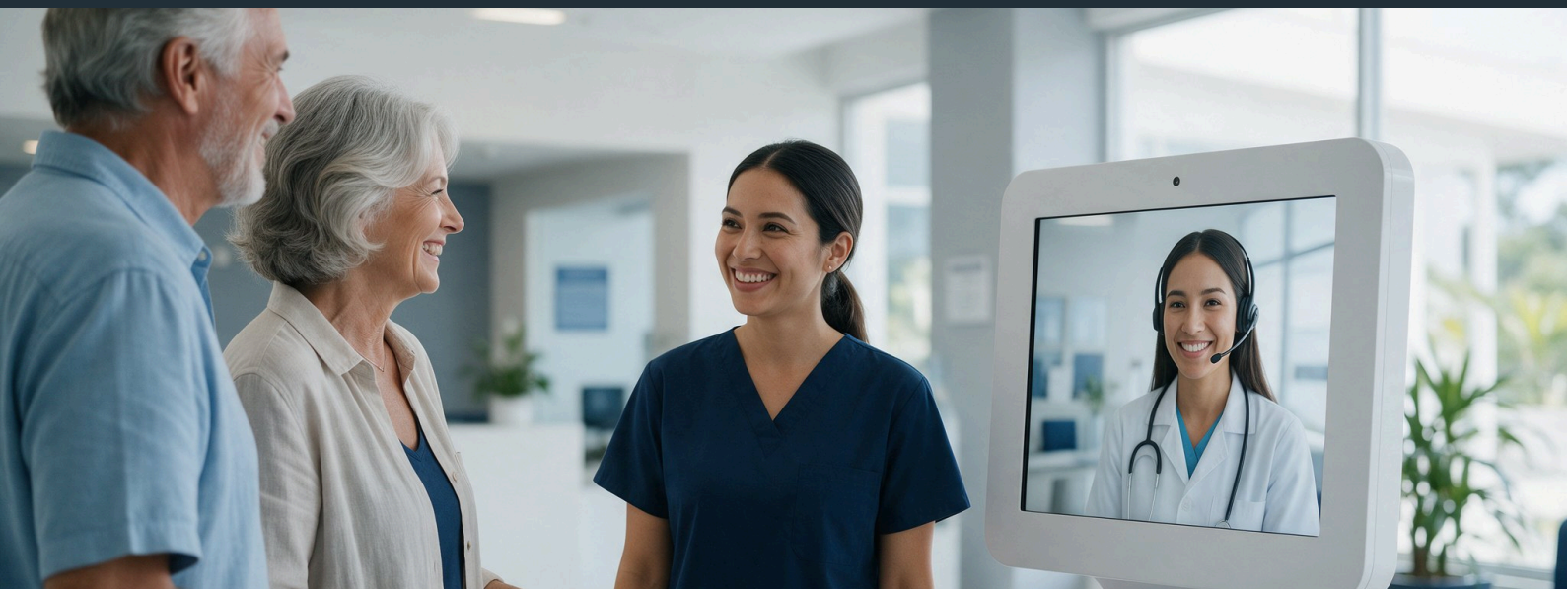
TELEPRESENCE · CLINICS & HEALTHCARE

Phygital Clinic

When the front desk is swamped, the clinic keeps serving patients.

Remote medical receptionists on video in the lobby, the pharmacy, the patient room or on the patient's phone. Appointments, calls and changes go to a remote human team.

PROPOSAL FOR CLINIC LEADERSHIP
Interactive Powers · October 2026



Every question answered

Appointments, changes and questions go to a remote receptionist on video, with no line at admissions.

All schedules, one team

Calls and appointments for every physician go to a remote team; physicians focus on their patients.

Kiosk, tablet or phone

Patients choose: lobby, pharmacy, patient room or their own phone via QR code. No app to download.

More revenue per patient

The kiosk offers insurance, pharmacy and lab services to each patient, with a commission for the clinic.

Overwhelmed front desks

One receptionist per physician handles patients, phones and rescheduling at once. If they are out, that schedule stalls.

Lines and calls on hold

Insurance, appointment, prescription or bill: every two-minute question means a line or a call no one returns.

Services left unoffered

Pharmacy, lab or coverage sell when someone guides the patient. At an overloaded front desk, no one does.

The idea A remote medical-reception team serves every physician and point of care in the clinic; the front desk keeps payments and check-in, with no lines or waiting.

WHAT CHANGES IN THE CLINIC

Medical reception, centralized and on video

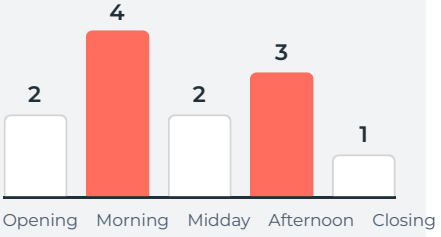
SITUATION	TODAY	WITH REMOTE AGENTS
Rescheduling	A line at admissions or a call on hold.	A remote receptionist handles it by video from the kiosk or the phone.
Incoming call	Rings in every exam room; no one answers.	The remote team takes it, by voice or video, for every physician.
Receptionist out	That physician's schedule comes to a halt.	The remote team keeps the schedule and calls running, no urgent fill-in.
Insurance question	The patient calls from the hallway, on hold.	The insurer serves them by video inside the clinic, with their policy at hand.
Prescription	Another line at the pharmacy to pick it up.	The exam room sends the order to the pharmacy; the patient pays by phone.
After hours	In the afternoon, the question waits until tomorrow.	The storefront kiosk and the phone connect to the remote team.

HOW IT WORKS

The patient taps; a person responds

1. **The patient scans the QR code** on the kiosk, the tablet or their card and talks from their phone. Nothing to download.
2. **A remote receptionist appears on video:** confirms the appointment, handles the change or points to the right room.
3. **If needed, they transfer the call** to the insurer, the pharmacy or nursing, with the patient's full context.
4. **At the front desk, on-site staff** keep payments and check-in, without the phone ringing.

Remote Agents open throughout the day



Illustrative example. The actual number is set by each physician's daily calls and appointments.

The result A single remote team handles every physician's schedule and calls: the clinic pays for service capacity, not one receptionist per exam room.



FOUR SERVICE FORMATS

More ways to stay close to your patients



Video Kiosk at rest

A display for the clinic

When idle, it shows checkups, campaigns and insurer plans, each with a QR code. The patient scans it and a remote receptionist takes over.



Pharmacy tablet

One more counter position

At the pharmacy counter or admissions, a remote person handles questions, coverage and payments while staff dispense, bill and check in patients.



Patient-room tablet

One tap, one person

Admitted patients talk to nursing, nutrition or administration by video. Fewer call buttons, fewer trips across the floor, and the family kept informed.



The patient's phone

The clinic, at home too

From home or a hotel, with the QR code on their account: a video checkup, a follow-up visit or a billing question. No app, no travel, no waiting.

What the clinic gains

Schedules never stall

No absence holds up a physician's appointments.

Quiet exam rooms

Calls go to the remote team, not the exam room.

Service revenue

Insurance, pharmacy and lab from the kiosk.

Patients who return

The follow-up visit is booked before they leave.

How to start · 1. Assessment → 2. First site with measurable goals → 3. Insurers, pharmacy and external network

Already in production in banking, insurance and healthcare, brought to your clinic. It scales with data, not promises.
Let's walk through it in 45 minutes on one of your sites.

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