Phygital Clinic

TELESERVICES DECK

Clinics and Hospitals

The clinic that serves patients at every touchpoint

Human service by video, voice and chat in the lobby, the pharmacy, the patient room, the hotel and the patient's home. No apps, no lines, no phone hold.

CLINICS, INSURERS AND MEDICAL TOURISM HOTELS

Interactive Powers · October 2026

IntPowers



One scan, and a person on the other end

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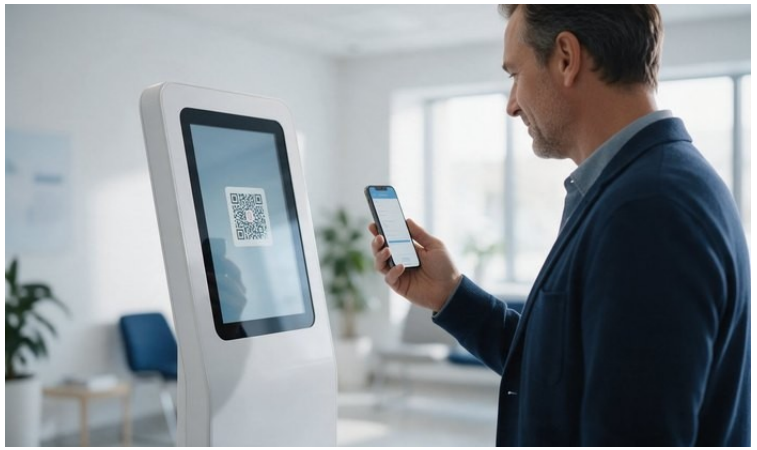
apps to install

Everything runs in the phone's browser or on the screen at the point of service.

1

QR code for the entire episode of care

On the kiosk, the tablet, in the room, on the insurance card and at the hotel.



24/7

the patient chooses the mode

After hours, the street-facing kiosk and the patient's phone connect to the remote team or an AI agent.

5

ways to talk

Video Kiosk, video call, voice call, the clinic's WhatsApp and AI agent.



Assisted Service: a person guides; VGO schedules, collects payment and delivers.

01 · THE OPPORTUNITY

Patients arrive with a need and a question, and no one answers the question

Insurance, appointment, prescription, bill, discharge. Today each one goes through a line, a phone on hold or a WhatsApp chat that never calls back.





The two-minute question decides whether the patient comes back.

Admissions, insurance, pharmacy and discharge: four counters, four lines, one patient.

What patients experience today, and what we offer them

TODAY	WITH PHYGITAL CLINIC
A line at admissions for a two-minute question.	Video Kiosk in the lobby: a remote medical receptionist answers instantly, no line.
For insurance questions, the patient calls the insurer from the hallway and listens to hold music.	Video call with the insurer from inside the clinic, with policy details already captured.
Picking up the prescription means another line at the pharmacy.	Express pharmacy order created during the visit: pay by phone, hand-delivered with a QR code.
At 7:00 PM the clinic closes and the question waits until tomorrow.	After hours, the street-facing kiosk and the patient's phone connect to the remote team or an AI agent.

Assisted Service, not self-service or a switchboard

	Clinic app	Phone call center	WhatsApp	Phygital Clinic
Install or sign-up	Download, account and password	None	Meta account	**None: QR code and browser**
Human service	No	Voice, after a menu	Chat, with delays	**Instant video, voice and chat, with escalation**
What it handles	Information requests	Appointments and questions	Messages	**Appointment, insurance, order, payment, delivery and follow-up**
Patient context	Entered by the patient	Repeated every time	Lost in the message thread	**Captured before connecting, visible to the agent**
Where it works	Phone only	Phone line only	Phone only	**Lobby, pharmacy, patient room, hotel, home**
Hours	24/7, no people	Switchboard hours	Operator hours	**24/7: the patient chooses a person or an AI agent**





Top: a remote medical receptionist in the clinic's Video Contact Center. Bottom: what stands in for her today, a phone on hold.

02 · THE EXPERIENCE

Seven moments in one episode of care

We follow Laura, 58, an insured patient who arrives at the clinic for a specialist visit and finishes her recovery at home. Each moment calls for a different mode of service; the account is always the same.



Seven moments, five modes, one patient account



Day 1 · 8:40 AM

Arrival

Video Kiosk



Day 1 · 8:55 AM

Insurance

Insurer video call



Day 1 · 9:30 AM

Visit

Video specialist consult



Day 1 · 10:15 AM

Pharmacy

Express order



Day 2 · 7:30 AM

Patient room

Bedside tablet



Day 3 · 12:00 PM

Discharge

Appointment and transport



Day 10 · 6:00 PM

Home

Video follow-up

5

modes in a single episode

One patient account for the entire episode. Every remote receptionist, nurse, physician or AI agent sees the captured context, appointments and orders: Laura never repeats herself, and each touchpoint picks up the conversation where the last one left off.

MOMENT 1 · DAY 1 · 8:40 AM · LOBBY

Video Kiosk: arrive, scan and talk to a person

The lobby kiosk displays the clinic's services and a QR code. Laura scans it, chooses Video Kiosk and, without installing anything, talks from her phone with Marta, a remote medical receptionist, while seeing her on the kiosk screen.

The patient Confirms her Dermatology appointment and asks whether her insurance covers the visit.

The remote receptionist Completes check-in, gives her the exam room and offers to sort out the insurance now, by video.

The system (VGO) Sends a text with the confirmation, the exam room and a link to her patient account.



TEXT MESSAGE · WHAT LAURA RECEIVES

Appointment confirmed: 9:30 AM, Dermatology, Exam Room 4, 2nd floor. Track your visit and orders at pwrs.in/p/8K2M.

Result Checked in standing up, in two minutes, without going to the front desk.

The patient chooses where and how to start the conversation



Multimodal Video Kiosk

Audio on the patient's own phone, video on the kiosk screen. No touching the kiosk, no sharing a phone number.



Countertop tablet

The same counter, staffed by a Remote Desk when on-site staff are busy or away.



On the patient's own phone

Video or voice call from the waiting room, the patient room or home. Same QR code, same account.

Three entry points, one service queue and one shared context for whoever answers.



MOMENT 2 · DAY 1 · 8:55 AM · ADMISSIONS

The insurer serves Laura inside the clinic, by video

Laura needs to confirm coverage and her copay before going in. From the admissions tablet, the remote receptionist transfers the video call to her insurer's Remote Desk, with the policy number and reason for the visit already captured. The insurer's representative authorizes on screen.

Data captured

Policy and reason, before connecting

Transfer

To the insurer's queue, with context

Authorization

In the same video call

Copay collected

VGO payment link on her phone

For the insurer it serves its member at the moment of truth, inside the clinic, with no branch office or phone call center in between.

The insurer, present in the clinic without being in the clinic





Insurer's Remote Desk
The insurer's own representatives, in its own Video Contact Center, receive the video calls the clinic transfers to them.

Controlled transfer
The clinic hands off the conversation with context, without sharing phone numbers or records. The patient doesn't start over.

Sponsorship
The insurer pays for the service and for advertising on the kiosk: its members find it where they need it.

Interactive Powers doesn't sell the insurer a call center: the clinic opens a service point for the insurer's members.

MOMENT 3 · DAY 1 · 9:30 AM · EXAM ROOM 4

Video specialist consult: a second opinion in the same visit

The dermatologist wants Oncology's opinion before deciding. From the exam room, she opens a video call with the specialist in another building, who sees Laura, reviews the images on a shared screen and decides with her.

The physician Transfers the conversation to the specialist by video, without sharing a phone number or leaving the exam room.

The remote specialist Reviews the shared images, asks the patient questions and agrees on the procedure.

The system (VGO) Books the procedure in the first slot with capacity and creates the pharmacy order with its payment link.



EMAIL · WHAT LAURA RECEIVES

Your procedure is scheduled: tomorrow, 7:30 AM, Minor Surgery Unit. Prep and instructions attached.

Result A decision in the same visit. No second in-person appointment, no weeks of waiting.



MOMENT 4 · DAY 1 · 10:15 AM · EXPRESS PHARMACY

Express pharmacy: the order was ready before she left the exam room

The dermatologist's prescription is a VGO order in Laura's account. She pays from her phone with the link she received and, at the clinic pharmacy, the pharmacist scans her QR code, hands it over and closes the order in VGO. No line: filling started as soon as she paid.

VGO order

Created during the visit, in seconds

Payment by phone

Secure VGO link by text and email

Filling

The pharmacy fills the paid order

QR code pickup

Order closed in VGO

For the pharmacy payment before filling, logged delivery and assisted add-on sales by video when the pharmacist isn't at the counter.

Same flow, different counter: pharmacy, lab and billing





Express pharmacy
VGO order from the visit, payment by phone, hand delivery or shipping to the hotel or home.

Lab and imaging
The technician explains prep by video; results arrive as documents attached to the order.

Cashier and billing
Billing questions are resolved by video with the business office; payment goes through a VGO link.

The conversation identifies the need; the order captures the exact service. No menus, no forms.

MOMENT 5 · DAY 2 · 7:30 AM · ROOM 214

The connected patient room: one tap, one person

Admitted for the procedure, Laura has the room tablet. One tap and she's talking to remote nursing; another, to nutrition or the business office. The same tablet connects her by video with her family, who follow along from home.

The patient Asks about the procedure time and requests a change to her dinner diet.

Remote nursing Covers several rooms from a Remote Desk; escalates to the floor only what requires someone in person.

The system (VGO) Logs the request as an internal order and notifies the kitchen and the floor nurse.



TEXT MESSAGE · WHAT HER FAMILY RECEIVES

Laura has invited you to join her by video. Open pwrs.in/f/3R7Q in any browser, nothing to install.

Result Fewer call lights, fewer trips across the floor, a family kept informed.



MOMENT 6 · DAY 3 · 12:00 PM · EXIT

Discharge is wrapped up at the exit kiosk, with everything scheduled

Before leaving, Laura's companion scans the QR code on the exit kiosk. The remote receptionist books the follow-up in the first slot with capacity, sends the discharge instructions and arranges the ride home, already paid.

Discharge

Instructions and documents by email

Follow-up appointment

Slot based on the department's actual capacity

Transport

VGO order paid, provider assigned

Reminders

Texts before the appointment and the follow-up

For the clinic the follow-up appointment isn't lost in a call nobody returns: it's booked before she walks out, and the schedule fills according to each department's capacity.

MOMENT 7 · DAY 10 · 6:00 PM · AT HOME

Video follow-up from home: the clinic is still there

From home, Laura opens her account QR code and requests a video call with nursing. She shows the wound on camera, the nurse takes a snapshot for the chart and confirms that healing is on track. If needed, she transfers to the physician by video.

The patient Gets her question answered without traveling or booking an in-person visit.

Remote nursing Reviews, documents with a snapshot and decides whether to escalate to the specialist.

The system (VGO) Saves the snapshot and the closing survey to the account; books the next follow-up if needed.



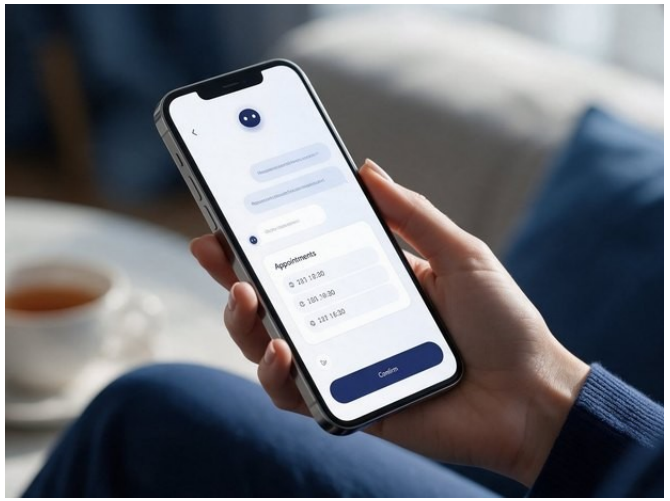
CLOSING SURVEY · IN THE SAME VIDEO CALL

How would you rate the care you received today? 1–5. Would you recommend this service to a family member?

Result The clinic retains the patient after discharge; follow-up care doesn't go to another practice.

Always informed: text and email at every status

Event	Patient receives	Team receives	Channel
Appointment booked	Date, time, exam room and link to their account	Appointment on the department schedule	Text + email
Order created	VGO payment link and confirmation code	Pending order on the dashboard	Text + email
Payment received	Confirmation and receipt	Order ready to fill	Email
Documents	Results, instructions, vouchers	—	Email
Reminder	Before the appointment or follow-up	—	Text
Cancellation	Notice and refund to the original payment method	Slot released on the schedule	Text + email





A single clinic sender ID on every message; HTTPS session links, no app.

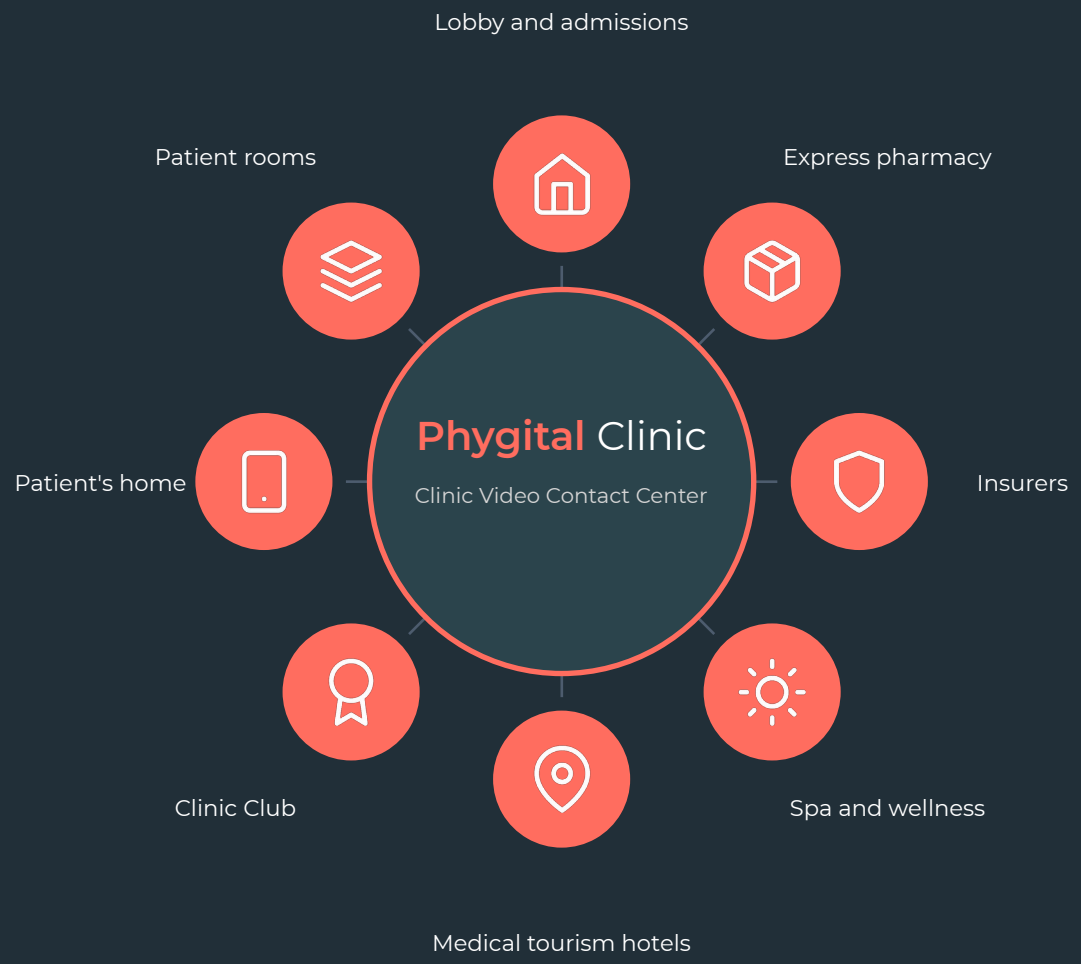
03 · THE NETWORK

The clinic as the hub of a care network

Medical tourism hotels, insurers, pharmacy, spa and club: every point connects to the clinic's same remote team. The patient stays in the network, and the network grows with every partner.



One remote team, many points of service



Clinic Sponsors the network and runs the remote team

Insurers Their own Remote Desk; they pay for service and advertising

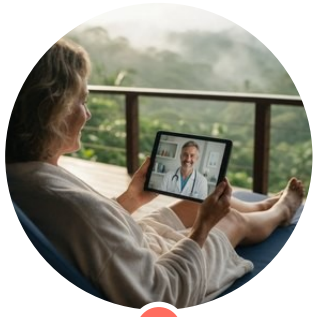
Hotels Kiosk and tablet at the front desk; supervised recovery

Pharmacy and spa Paid VGO orders, delivery and scheduling

Club Member card with QR code; priority and benefits

Interactive Powers Platform, integration and support

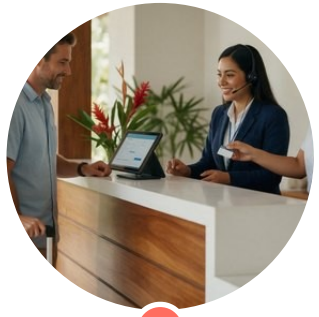
Medical tourism: arrive connected, leave connected



Before the trip

Evaluation

Video call from home country



Day 1

Hotel

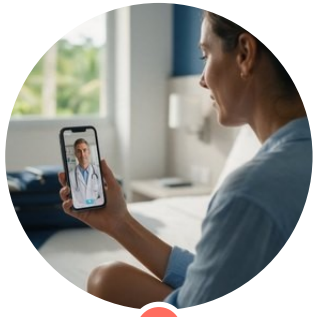
Kiosk and tablet at the front desk



Day 2

Clinic

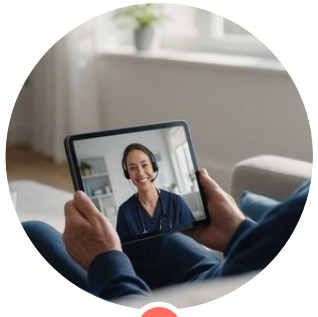
Procedure, account already open



Days 3–6

Recovery

Daily video check-in at the hotel



Day 7

Return

Follow-up from home

EN

Service in the patient's language, from the same remote team

Michael, from Texas, never downloads an app. He receives his account QR code with his quote. At the hotel, the kiosk and front-desk tablet connect him with the clinic; in his room, with nursing; back home, with his physician. No roaming: just the hotel Wi-Fi and his browser.

MEDICAL TOURISM HOTEL · LOBBY AND GUEST ROOM

The hotel hosts; the clinic provides care, by video, from the hotel

The lobby kiosk and front-desk tablet carry the hotel's brand and connect to the clinic's remote team. Guests get answers on prep, transfer times and medication without hotel staff needing any medical knowledge.

The guest-patient Asks about pre-procedure fasting and wants to confirm the pickup time.

The clinic's remote nursing Answers in his language, reviews his order and confirms transport.

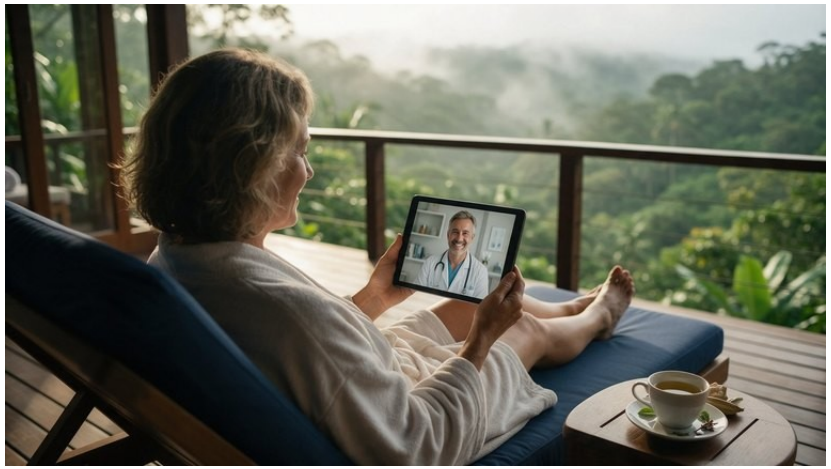
The hotel Receives the service order at the front desk: adapted breakfast and departure at 6:30 AM.

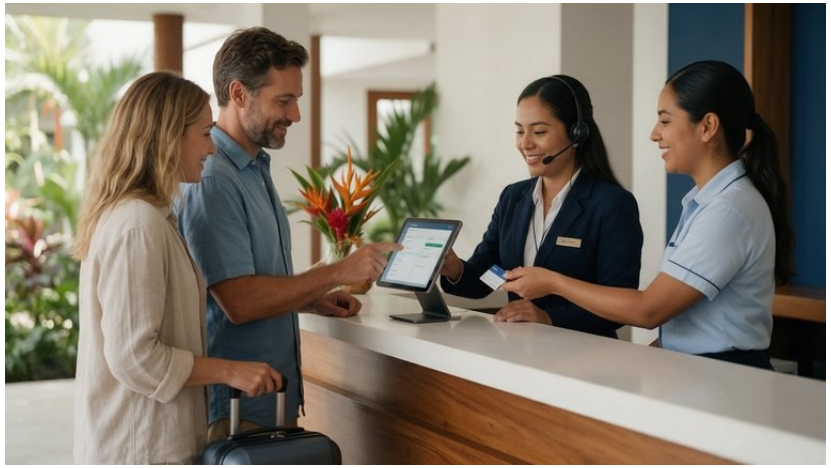


For the hotel it sells recovery packages with real clinical supervision, without hiring medical staff or building its own contact center.

Telepresence kiosk in the lobby of a partner hotel, with the hotel's brand and the clinic's team.

Recovery at the hotel, under the clinic's supervision





Daily video check-in
At the scheduled time, nursing calls the room tablet or the patient's phone. Snapshot to the chart.

Escalation to the physician
If something looks off, the nurse transfers the video call to the specialist with full context.

Unexpected events
A help button on the tablet opens voice or video with the clinic; any transfer is coordinated as a VGO order, with the hotel notified.

For the clinic: a supervised hotel bed is recovery capacity without the cost of a hospital stay.



SPA, NUTRITION AND PREMIUM SERVICES

From exam room to spa: order, booking and prepayment

The physician recommends physical therapy and a nutrition program. The recommendation is a VGO order in the patient's account: the clinic spa sees it, advises the patient by video from its counter, books the first slot and collects the prepayment by link. At the medical tourism hotel, the hotel spa joins the same loop.

Recommendation	VGO order	Booking	Prepayment
From the visit	In the patient's account	Slot with actual capacity	VGO link, before the service

For the spa and premium services assisted sales that start in the exam room, a full schedule in off-peak hours and VGO prepayment before booking.



A QR code with ID and token. No app.

Members open their conversation with the clinic from any browser; the physical card carries the clinic's brand and the sponsor's.

The Clinic Club: one QR card, connected all year

ID and security token
The member QR code opens a conversation with their care team in the browser. No app, no personal data stored on the phone.

Direct access and priority
Priority video and voice queue, in the member's language; appointment and order history visible to the agent.

Sponsored by the insurer or employer
The card carries the sponsor's brand next to the clinic's: members and employees arrive with the service included.

Network benefits
Discounts on pharmacy, spa, partner hotels and transport, managed as Club VGO orders.

1- or 12-month validity
The same QR code works for one episode or the whole year; it renews without replacing the card.

QR code ads: revenue that sustains the Phygital network

When no one is using it, the kiosk is the clinic's communication channel: its own campaigns, network services and ads from insurers, hotels and vendors. Each ad has its own QR code, every conversation or order records which ad and kiosk it came from, and what advertisers pay funds part of running the Phygital network.

Carousel by kiosk and time slot

Different content in the lobby, the pharmacy, the exit or the hotel, managed centrally.

One QR code per ad

Checkups, vaccination campaigns, insurance plans, hotel stays: each QR code opens a conversation with the right service.

Supplemental revenue

Impression tracking and attribution for every order: advertisers pay for visibility and for results, and that revenue sustains the network without passing costs on to patients.



Ad carousel on the lobby kiosk, with its own QR code on each piece.

For the clinic an owned channel at every point, with operating costs partly covered by advertising from insurers, hotels and vendors: the Phygital network pays for itself.

04 · BEHIND THE EXPERIENCE

People, supervised AI and a platform for appointments and orders

What the patient experiences as a conversation is, behind the scenes, the clinic's Video Contact Center, AI agents with their own accounts and a system that schedules, collects payment, notifies and tracks deliveries.



One dynamic QR code, five ways to talk

Mode	Handled by	When patients choose it	What it handles
Video Kiosk	Remote receptionist, nursing	Just arrived, no data or app	Check-in, insurance, wayfinding
Video call on the phone	Nursing, physicians, insurer	Patient room, hotel, home	Follow-up, specialist consult, authorization
Voice call	Remote receptionist, AI agent	No camera, on the move	Appointment, reminder, question
The clinic's WhatsApp	AI agent, with escalation to a person	Patients who already message the clinic	Multi-step appointment and VGO payment
AI agent (chat and voice)	AI with an agent account	Overnight, FAQs	Prep, hours, simple scheduling

The patient always decides. All five modes are available at any hour. Any of them escalates to a person by voice or video with full context: that's Seamless Escalation. And a digital voice call costs neither the patient nor the clinic any minutes: just internet.





Top: a video call from the countertop tablet. Bottom: the same QR code on the patient's phone, on speaker.



One person, many points. That's the Remote Desk.

The clinic's Video Contact Center covers the lobby, pharmacy, patient rooms and hotels with the same team, and escalates to in-person staff only what requires it.

AI absorbs the volume; people bring the judgment

AI agents
Reminders, test prep, hours and simple scheduling, with their own agent account. Always an option the patient chooses; never an order without a human owner.

Remote medical receptionists and nursing
The Remote Desk: one person covers several points at once (lobby, pharmacy, patient rooms, hotel) and escalates to in-person staff only what requires it.

Physicians and specialists
Receive the conversation by voice or video, transferred with context, without sharing their phone number or calendar. Specialist consults and second opinions in the same visit.

On-site staff
Pharmacy, hotel front desk, spa: they deliver, book and close the order by scanning the patient's QR code.

Three mechanisms to keep from losing the patient

1. Escalation with context

If the AI agent is unsure, if the receptionist needs the physician or if the clinic transfers to the insurer, the conversation travels with the handoff. The patient repeats nothing and doesn't go back into the queue.

2. Rescue call

If a VGO payment doesn't come through within ten minutes or a video call drops, an alert fires and a person calls the patient to resolve it and resend the link. Card details are entered only through the secure link.

3. Continuity on the phone

A conversation started at the kiosk or tablet continues on the patient's phone as they move: to the pharmacy, to their room or out of the clinic. Same agent, same session.

VGO · APPOINTMENTS, ORDERS, PAYMENT, NOTIFICATIONS AND DELIVERY

Every conversation ends in a booked appointment or a paid order

Appointment Slots offered based on the actual capacity of each department and location, without overloading the exam room schedule.

VGO order The receptionist, physician or AI agent creates it in seconds from the conversation: pharmacy, spa prepayment, transport, stay.

VGO payment Secure link by text and email: card or PayPal, no details given over the phone. Prepaid or postpaid in several steps, depending on the service.

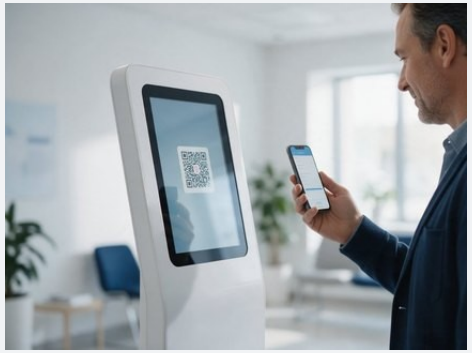
Notification Patient and team notified at every status, in the patient's language.

Delivery and tracking The pharmacy, hotel or spa closes the order with the QR code. Every VGO order records the source mode, kiosk and ad.





Four layers, one platform



1 · Touchpoints

Video Kiosks, tablets at counters and in patient rooms, QR codes on cards, ads and in hotels. Hardware-agnostic: the clinic chooses.



2 · Conversation

Video RTC: WebRTC video, voice and chat in the browser. The clinic's WhatsApp connected. Chat and voice AI agent.



3 · Operations

Web ACD as the Video Contact Center, or the clinic’s CCaaS (Genesys Cloud and others): queues by department, Remote Desks, transfers to physicians and insurers.



4 · Transactions

VGO: orders, payment, notifications, reconnection, rescue and delivery tracking. Capacity-based appointments with Scheduler.

Resilience phone support with Smart IVR connected to the Video Contact Center, rescue calls and technical support. Interoperable with the clinic's existing contact center (Genesys Cloud and others), over SPLIT trunking.

Health data, under the clinic's control

HIPAA and GDPR

What Interactive Powers attests to. The AWS infrastructure carries its own certifications (SOC, ISO, PCI), declared separately, never combined.

Context before connecting

The information the patient provides is captured in the pre-call form and shown to the agent: never read out over the phone or sent through a chat.

Region and jurisdiction

Deployed in the country's AWS region and, if the clinic requires it, on its own infrastructure. Data stays within the jurisdiction.

Optional recording, by service

Only where the clinic decides (authorizations, consents), with its own custody, metadata and SSO access.

Owned channel

Video and voice over WebRTC in the browser, without going through social messaging. WhatsApp connects as an entry point, not as a repository for the medical record.

Identity and access

Per-session token in every QR code, visual verification by video and fixed backgrounds per service: patients always know who they're talking to.

Infrastructure certifications are not service certifications; every proposal lists them separately.

05 · VALUE AND MODEL

A clinic service that creates value for every partner

The clinic provides the setting and the remote team; insurers, hotels, pharmacy and spa provide the service; the platform schedules, collects payment and delivers. Every conversation benefits everyone.



Assisted catalog: what gets booked and what gets sold



Appointments and follow-ups

Visits, procedures and follow-up, based on each department's actual capacity.

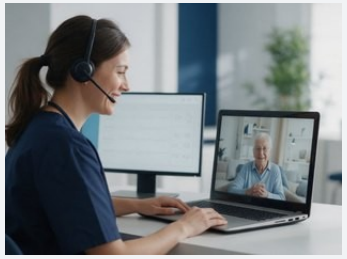
Phase 1



Express pharmacy

Prescriptions from the visit paid in VGO by phone, picked up with a QR code or delivered to the hotel.

Phase 1



Lab and imaging

Prep explained by video; results delivered as order documents.

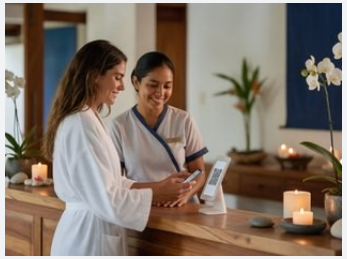
Phase 1



Insurance and coverage

Authorization and copay with the insurer, inside the clinic.

Phase 2



Spa, nutrition and wellness

Programs recommended during the visit, booked and prepaid in VGO.

Phase 3



Recovery stays

Partner hotels with clinical supervision by video and transfers, as VGO orders.

Phase 3

Assisted Service: not self-service, not e-commerce. A person guides the decision; VGO executes the order.

Tangible value for every player in the network



Clinic

- Expands team capacity: one Remote Desk covers several points at once.
- New, traceable revenue: pharmacy, spa, stays and club, by point and by ad.
- Retains patients after discharge and stays with them beyond the building.
- No proprietary app to build or maintain.



Insurer

- Serves members at the moment of truth, inside the clinic.
- Authorization and copay in the same conversation.
- Brand presence on kiosks and cards, paid by results.



Medical tourism hotel

- Recovery packages with real clinical supervision.
- Front desk connected to the clinic, no medical staff required.
- Stay services sold as paid VGO orders.



Patient

- A person instantly, in their language, with no line and no app.
- No repeating their story: context travels with them.
- Secure payment, hand delivery and their entire episode in one QR code.

Who pays for what in the network

Core service, paid by the clinic
Remote Desks, kiosks and tablets in its buildings, with the network license plan and VGO for payments. This is the investment that opens the door to the other partners.

Insurers: service and advertising
They pay for their Remote Desk within the network and for brand presence on kiosks and cards. The clinic sponsors them to their members.

Hotels, spa and vendors: per order
Setup, monthly support and a fee for each paid VGO order: stay, transfer, wellness prepayment, delivery.

Club: sponsored membership
Insurers and employers include the member card in their plans; the patient pays no subscription.

The patient pays no subscription and downloads nothing. Plans, fees and percentages are set per project with each partner and settled using VGO attribution data: by point, by ad and by order.

WHY PHYGITAL CLINIC

Five differences patients notice and leadership values

No app Everything in the browser: QR code, video, payment and follow-up. Zero adoption friction, including for older and international patients.

Augmented, not replaced The clinic team covers more points with the same people. AI absorbs the repetitive work; judgment stays human.

Seamless Escalation From AI to person, receptionist to physician, clinic to insurer: the conversation travels with its context.

Owned channel WebRTC video and voice, no roaming, no reliance on WhatsApp or third parties to serve a patient.

Ready to demo Platform in production in banking, insurance and healthcare since 2015. The demo takes 20 minutes.





06 · HOW TO GET STARTED

Three phases: measure before you expand

First inside the clinic, then with insurers and the club, and finally the external network of hotels and spas. Proposed targets, a baseline and six steps to launch.



Three phases, one platform

Phase 1 · Inside the clinic

- Video Kiosks in the lobby, at the exit and street-facing; tablets in admissions, pharmacy and patient rooms.
- Remote medical receptionists and nursing on Remote Desks.
- Capacity-based scheduling, express pharmacy with VGO, video specialist consults.
- Baseline and first metrics.

Phase 2 · Insurers and club

- Insurer Remote Desks connected to the clinic.
- Authorization and copay by video; sponsorship and advertising on kiosks.
- Member card with QR code, priority and benefits.
- AI agents for overnight volume and reminders.

Phase 3 · The external network

- Medical tourism hotels: kiosk, tablet and supervised recovery.
- Spa, nutrition and premium services as prepaid VGO orders.
- At-home video follow-up after discharge.
- New partners on the same platform.

Proposed targets for Phase 1

≥ 50%	Admissions inquiries resolved without going to the front desk
≤ 2 min	From QR code scan to talking with a person
≥ 80%	Pharmacy orders paid in VGO before reaching the counter
≥ 4.5 / 5	Average rating on the closing survey





Hypotheses to validate against a baseline in the first weeks, not promises. Every conversation and order records the source mode, kiosk and ad, so measurement comes from the platform, not from a separate survey.

To launch Phase 1

1. **Locations and hours**
   Lobby, exit, street-facing, admissions, pharmacy and pilot patient rooms; remote service hours.

2. **Initial services and queues**
   Check-in, appointments, express pharmacy and specialist consults; who handles each queue and who escalates.

3. **Partner insurers**
   The two or three with the most members at the clinic, to prepare Phase 2 from day one.

4. **Partner hotels**
   Hotels that already host the clinic's patients: the starting point for Phase 3.

5. **Baseline**
   Starting measurement of lines, wait times, missed appointments and ratings.

6. **Technical demo**
   Full live walkthrough with leadership, admissions, pharmacy and an invited insurer.

Phygital Clinic

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