



Interactive ePill Reminder

Sepideh Ansari

Task #1: Pharmacy Sync, Refill, Snoozing, Taking





**You are in CVS and have dropped off your new prescription
You should prepare ePill Reminder for a USB sync with CVS system**





















You should insert the new pills in the compartments one by one

10:22 am



Medication

Pills to Refill 3/3



Name: Diltiazem ER

Dosage: 180 ml

Direction: Take 2 tab.
M, W & F

Skip

SUN		SAT
MON		FRI
TUE	WED	THR

ePill Reminder

10:22 am



Medication

Pills to Refill 3/3



Name: Diltiazem ER

Dosage: 180 ml

Direction: Take 2 tab.
M, W & F

Skip

SUN

SAT

MON

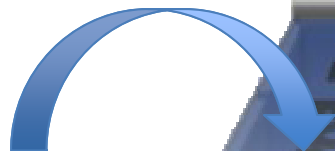
FRI

TUE

WED

THR

ePill Reminder



10:23 am



Medication

Pills to Refill 3/3




Name: Diltiazem ER

Dosage: 180 ml

Direction: Take 2 tab.
M, W & F

Skip

SUN		SAT
 MON		FRI
TUE	WED	THR

ePill Reminder

10:23 am



Medication

Pills to Refill 3/3




Name: Diltiazem ER

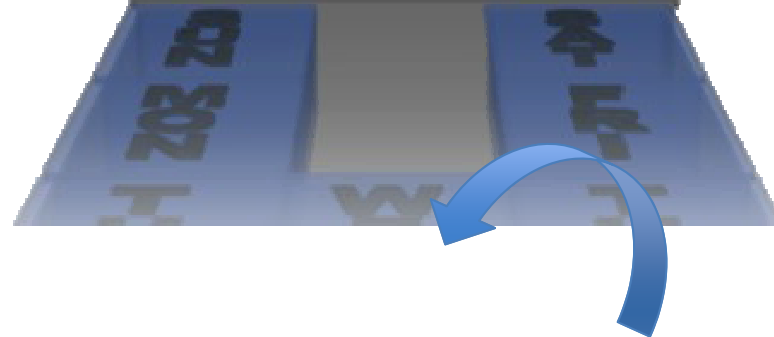
Dosage: 180 ml

Direction: Take 2 tab.
M, W & F

Skip

SUN		SAT
 MON		FRI
TUE	WED	THR

ePill Reminder



10:24 am



Medication

Pills to Refill 3/3





Name: Diltiazem ER

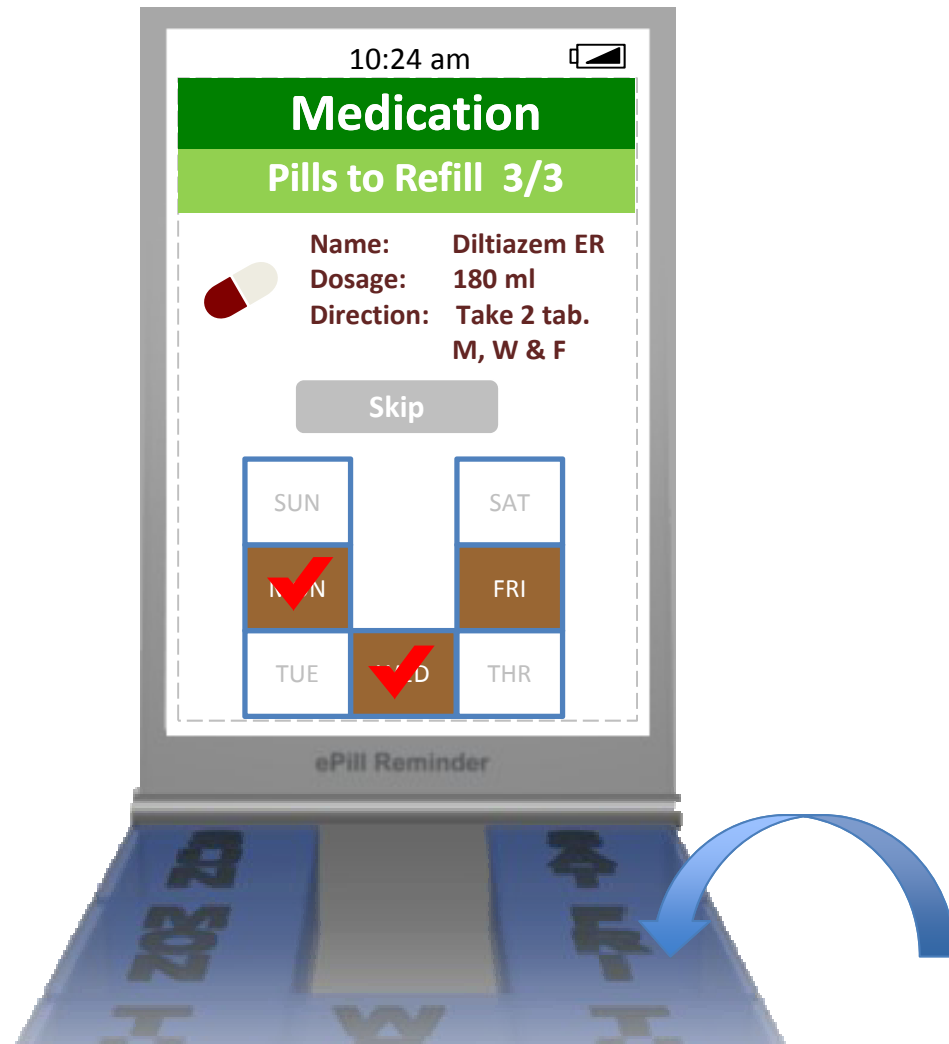
Dosage: 180 ml

Direction: Take 2 tab.
M, W & F

Skip

SUN		SAT
 MON		FRI
TUE	 WED	THR

ePill Reminder



10:25 am



Medication

Pills to Refill 3/3






Name: Diltiazem ER

Dosage: 180 ml

Direction: Take 2 tab.
M, W & F

Next

SUN		SAT
		
TUE		THR

ePill Reminder

10:25 am



Medication

Pills to Refill 3/3






Name: Diltiazem ER

Dosage: 180 ml

Direction: Take 2 tab.
M, W & F

Next

SUN		SAT
		
TUE		THR

ePill Reminder

10:25 am



Medication

Pills to Refill 2/3



Name: Tacrine

Dosage: 10 ml

Direction: Take 1 tab.
Mon, Sat

Skip

SUN		SAT
MON		FRI
TUE	WED	THR

ePill Reminder

10:25 am



Medication

Pills to Refill 2/3



Name: Tacrine

Dosage: 10 ml

Direction: Take 1 tab.
Mon, Sat

Skip

SUN		SAT
MON		FRI
TUE	WED	THR

ePill Reminder



10:25 am



Medication

Pills to Refill 2/3




Name: Tacrine

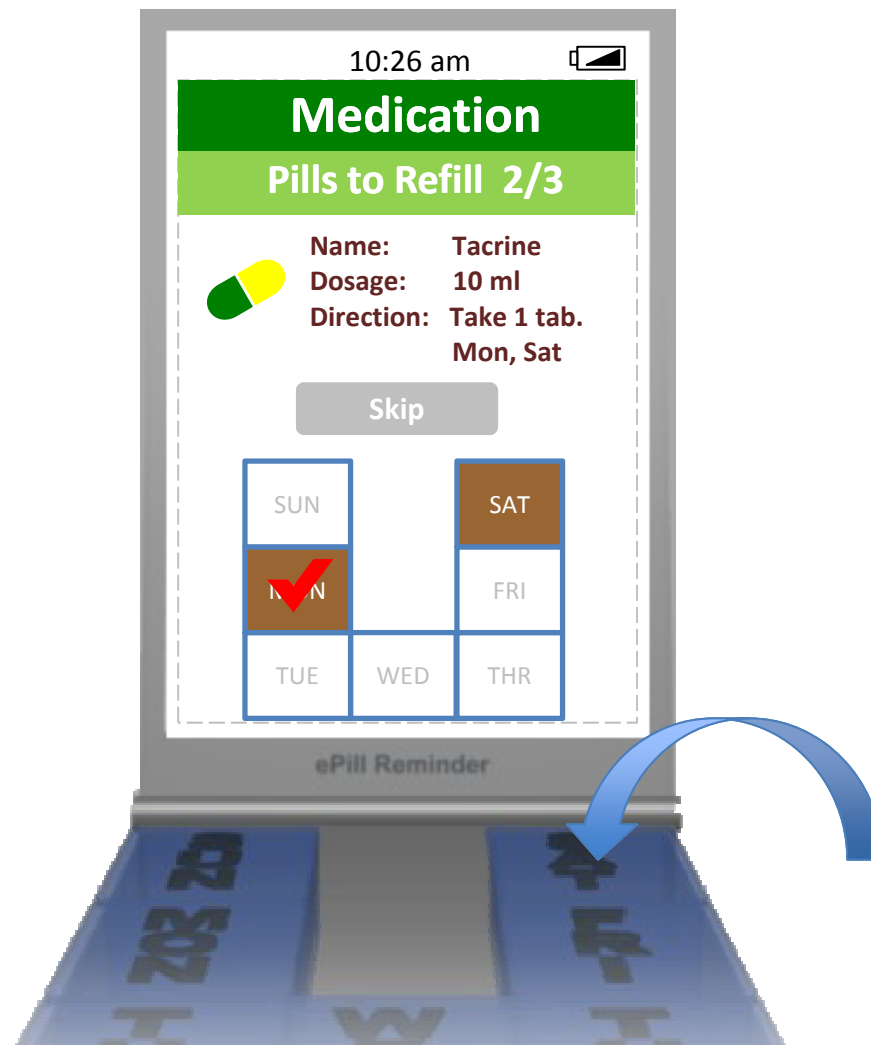
Dosage: 10 ml

Direction: Take 1 tab.
Mon, Sat

Skip

SUN		SAT
 MON		FRI
TUE	WED	THR

ePill Reminder



10:26 am



Medication

Pills to Refill 2/3



Name: Tacrine

Dosage: 10 ml

Direction: Take 1 tab.
Mon, Sat

Next

SUN		SAT ✓
MON ✓		FRI
TUE	WED	THR

ePill Reminder

10:26 am



Medication

Pills to Refill 2/3



Name: Tacrine

Dosage: 10 ml

Direction: Take 1 tab.
Mon, Sat

Next

SUN		SUN ✓
MON ✓		FRI
TUE	WED	THR

ePill Reminder

10:26 am



Medication

Pills to Refill 1/3



Name: Acetaminophen

Dosage: 15 ml

Direct.: Take 1 tab. daily

Skip

SUN

SAT

MON

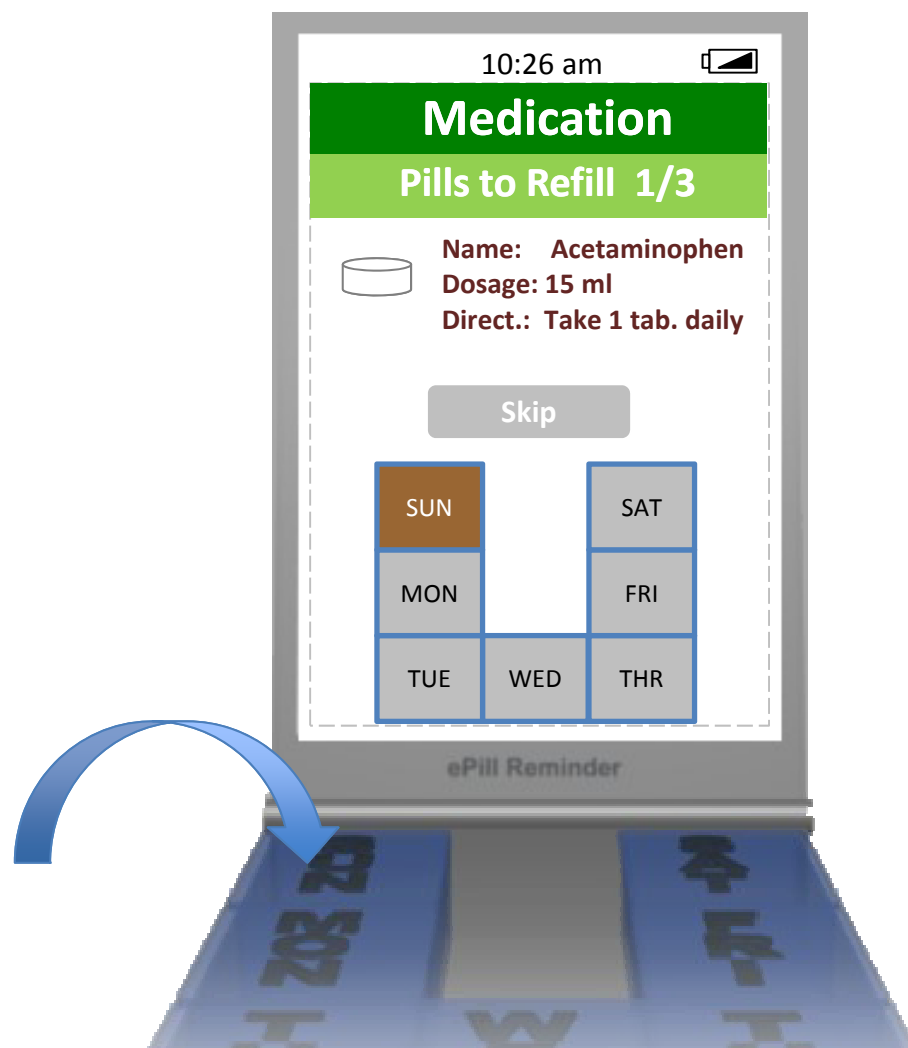
FRI

TUE

WED

THR

ePill Reminder



10:27 am



Medication

Pills to Refill 1/3



Name: Acetaminophen

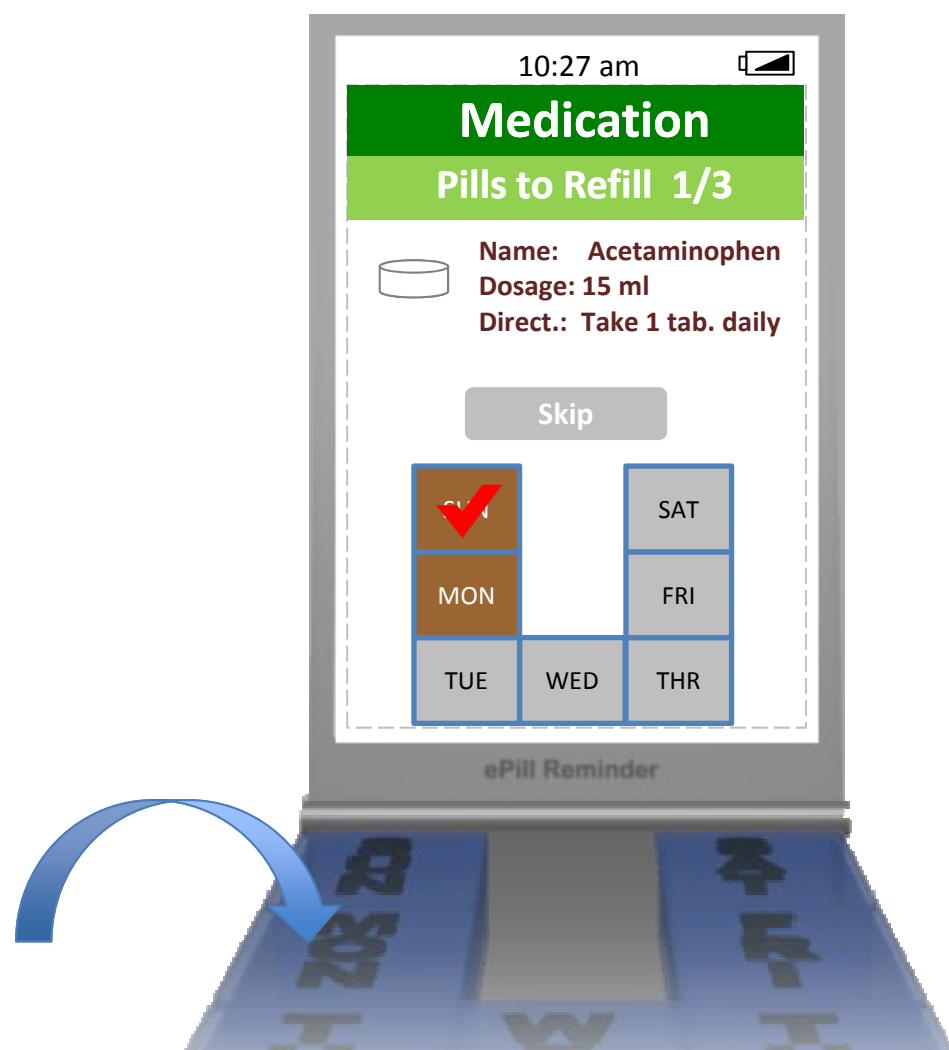
Dosage: 15 ml

Direct.: Take 1 tab. daily

Skip

SUN		SAT
MON		FRI
TUE	WED	THR

ePill Reminder



10:27 am



Medication

Pills to Refill 1/3



Name: Acetaminophen

Dosage: 15 ml

Direct.: Take 1 tab. daily

Skip

SUN		SAT
MON		FRI
TUE	WED	THR

ePill Reminder

10:28 am



Medication

Pills to Refill 1/3



Name: Acetaminophen

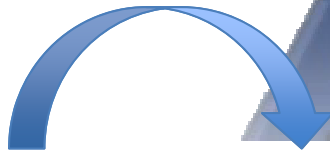
Dosage: 15 ml

Direct.: Take 1 tab. daily

Skip

<input checked="" type="checkbox"/>		SAT
<input checked="" type="checkbox"/>		FRI
TUE	WED	THR

ePill Reminder



10:28 am



Medication

Pills to Refill 1/3



Name: Acetaminophen

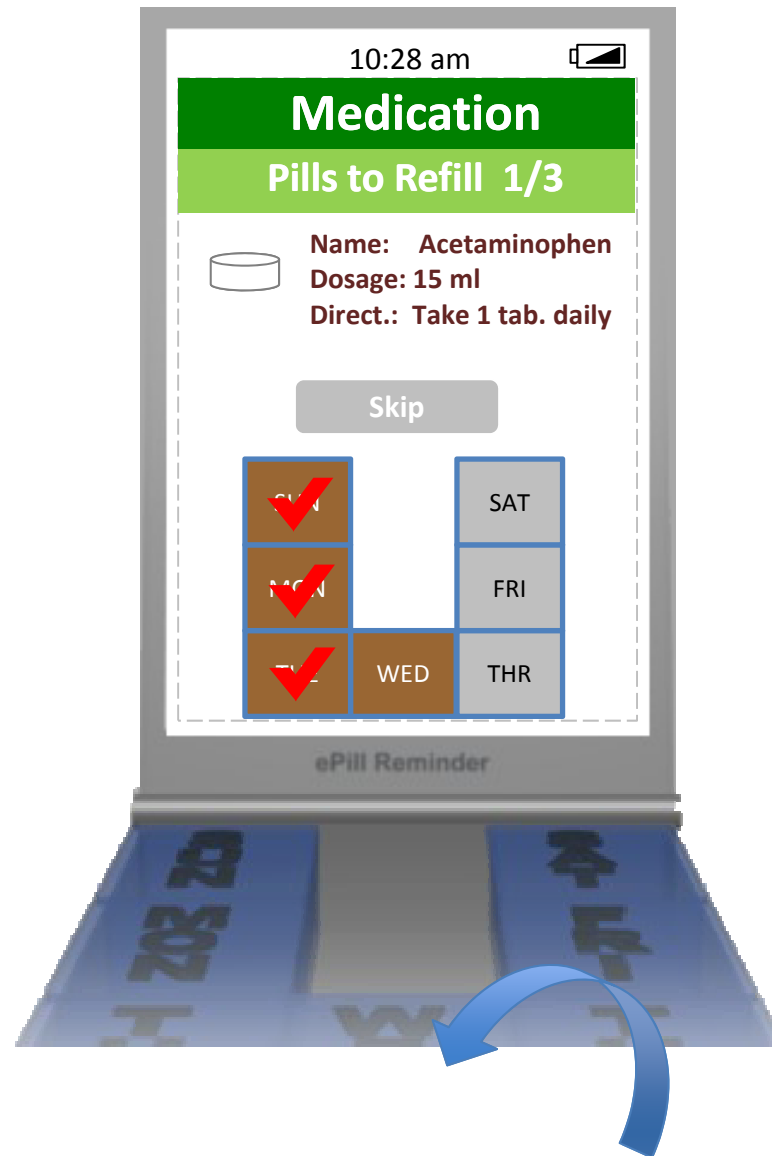
Dosage: 15 ml

Direct.: Take 1 tab. daily

Skip

<input checked="" type="checkbox"/>		SAT
<input checked="" type="checkbox"/>		FRI
<input checked="" type="checkbox"/>	WED	THR

ePill Reminder



10:28 am



Medication

Pills to Refill 1/3



Name: Acetaminophen

Dosage: 15 ml

Direct.: Take 1 tab. daily

Skip

<input checked="" type="checkbox"/>		SAT
<input checked="" type="checkbox"/>		FRI
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	THR

ePill Reminder



10:29 am



Medication

Pills to Refill 1/3








Name: Acetaminophen

Dosage: 15 ml

Direct.: Take 1 tab. daily

Skip

 SUN		SAT
 MON		FRI
 TUE	 WED	 THU

ePill Reminder



10:29 am



Medication

Pills to Refill 1/3



Name: Acetaminophen

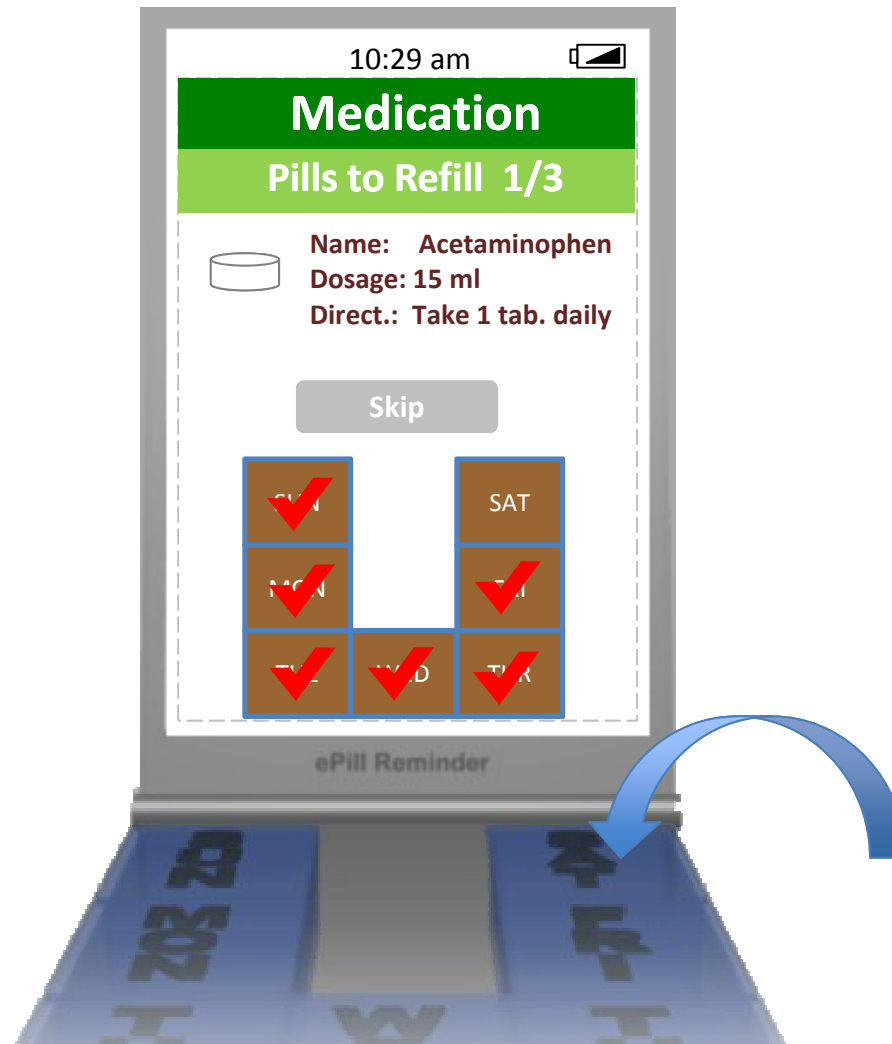
Dosage: 15 ml

Direct.: Take 1 tab. daily

Skip

<input checked="" type="checkbox"/>		SAT
<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

ePill Reminder



10:29 am



Medication

Pills to Refill 1/3



Name: Acetaminophen

Dosage: 15 ml

Direct.: Take 1 tab. daily

Next

<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

ePill Reminder

10:29 am



Medication

Pills to Refill 1/3



Name: Acetaminophen

Dosage: 15 ml

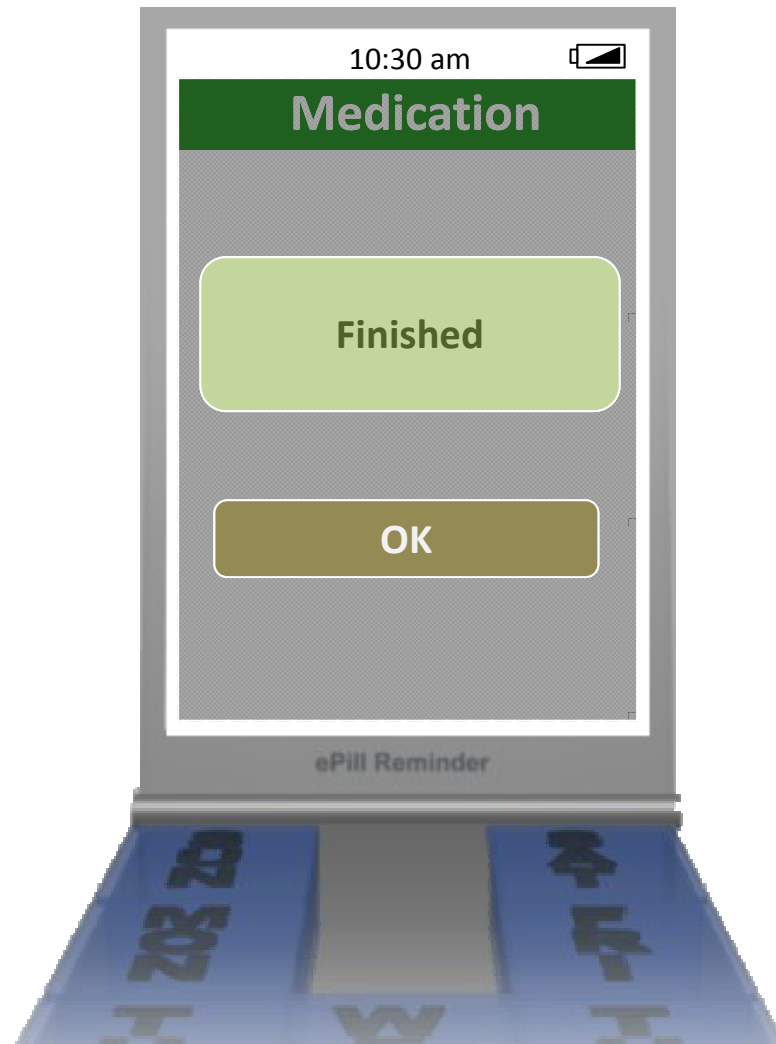
Direct.: Take 1 tab. daily

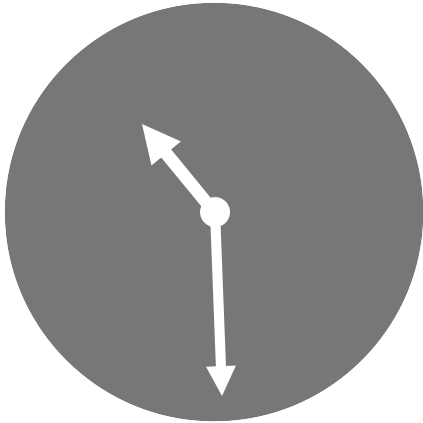
Next

<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

ePill Reminder







Your first reminder comes when you are driving. Snooze it for 30mins.



12:30 pm



Medication



Take one
Tacrine from
Monday

Snooze

Skip

SUN

SAT

MON

FRI

TUE

WED

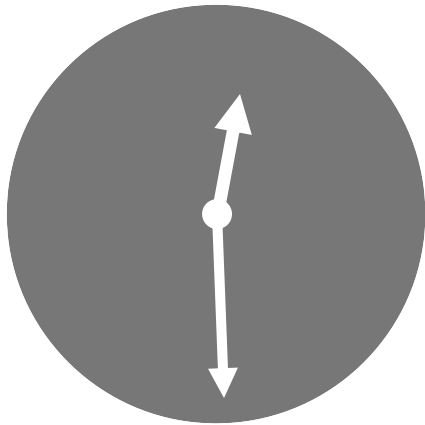
THR

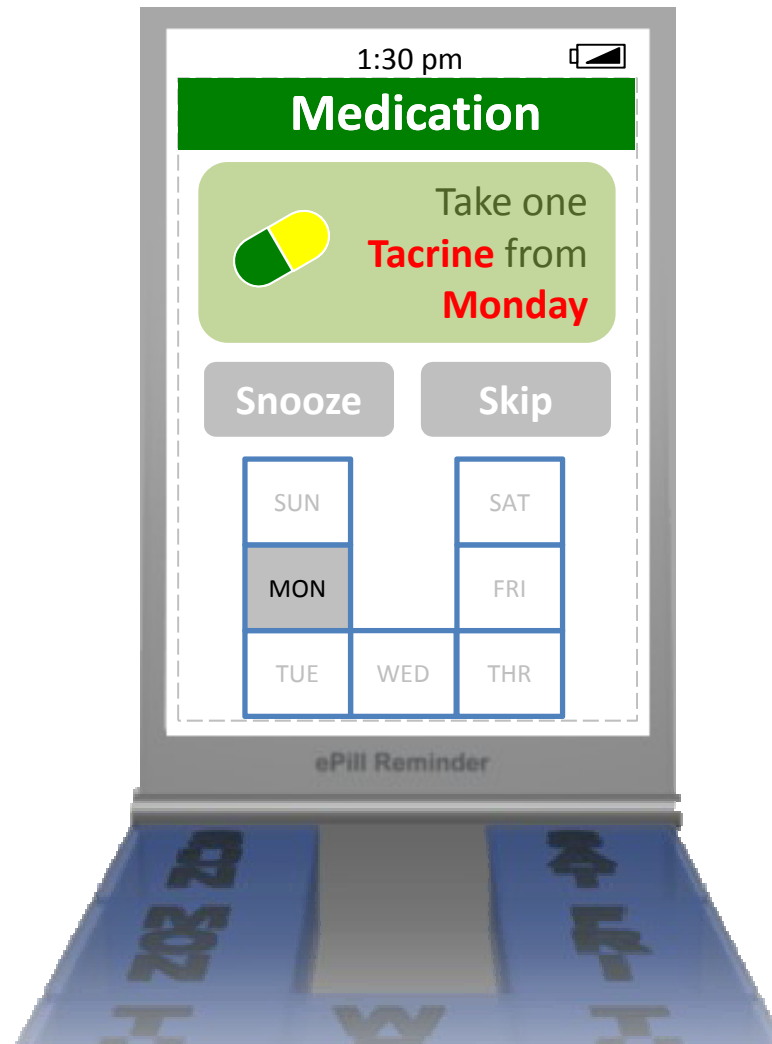
ePill Reminder



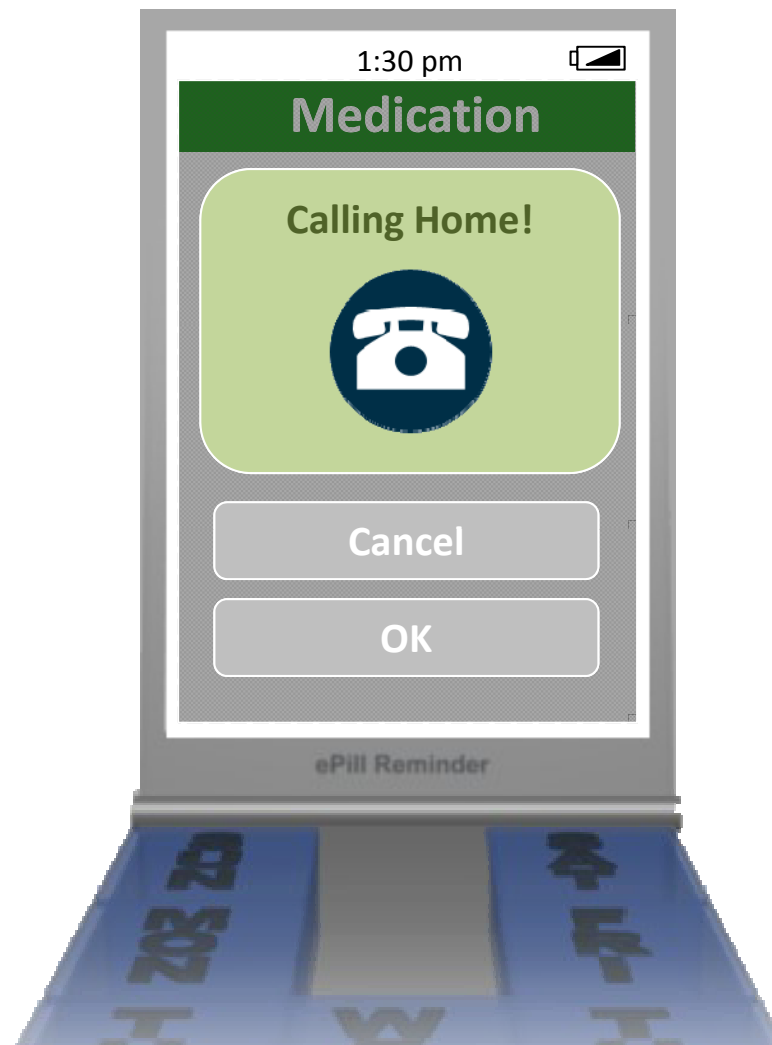


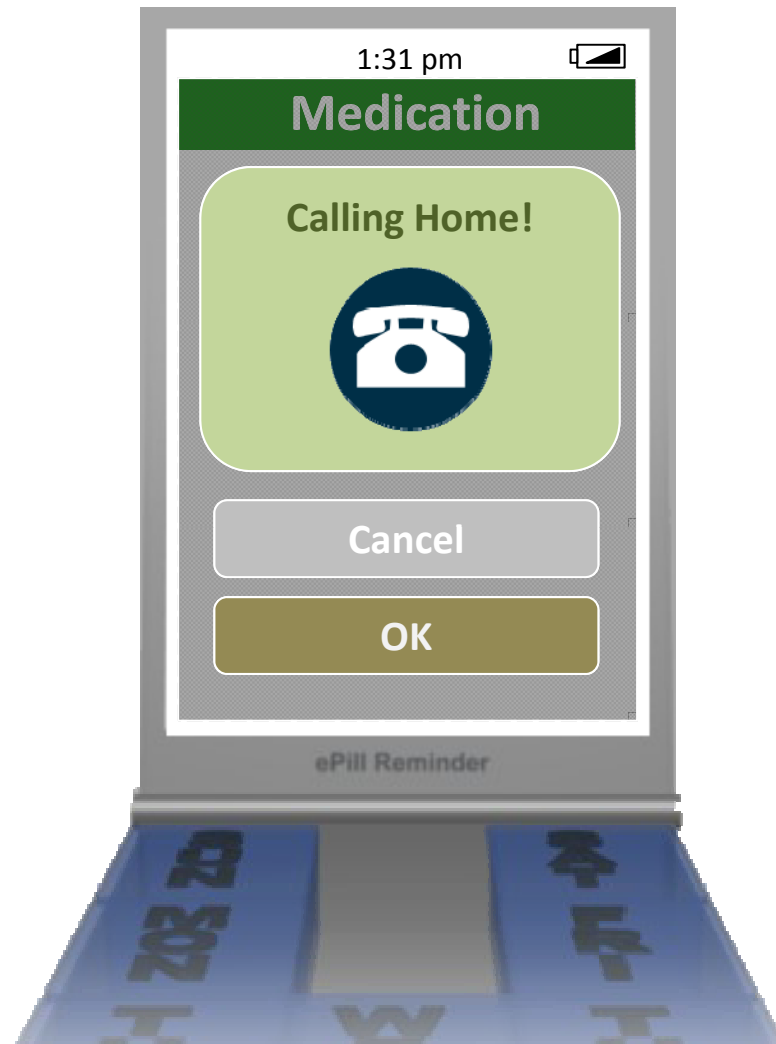


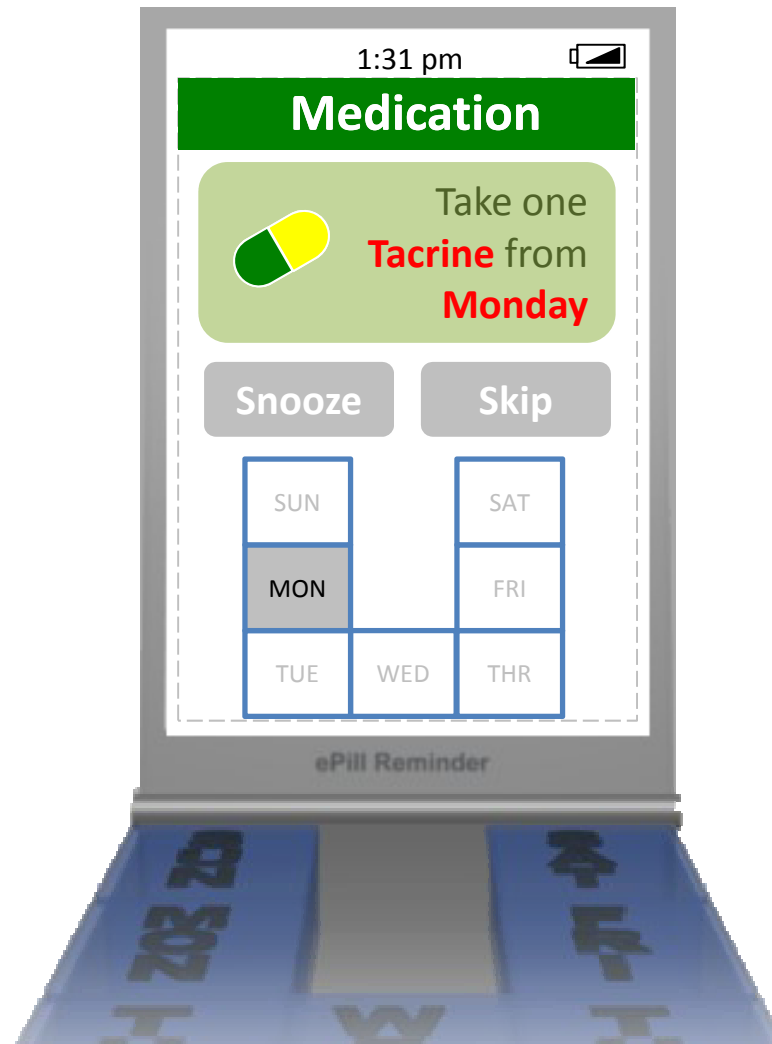




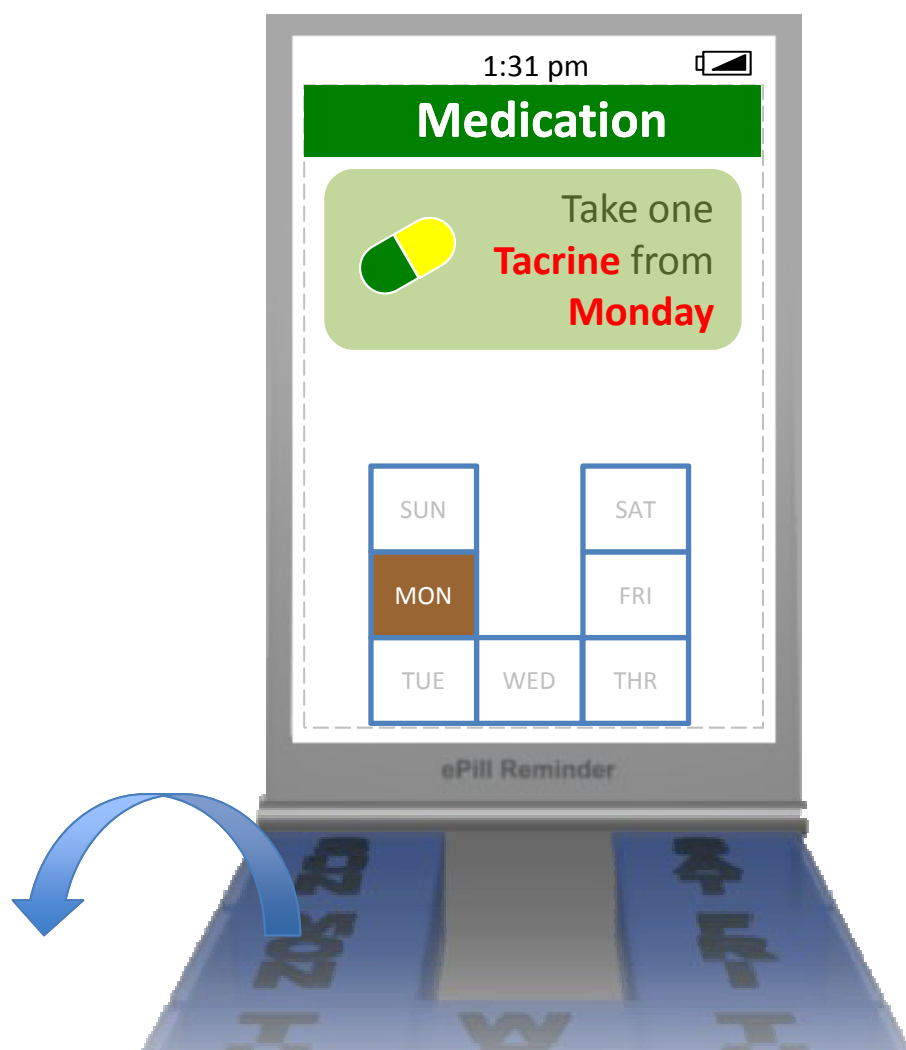
You forgot to take your medication – no interaction.







After receiving the call from ePill Reminder, you will take your pill







1:31 pm



Medication



Take one
Tacrine from
Monday

Next

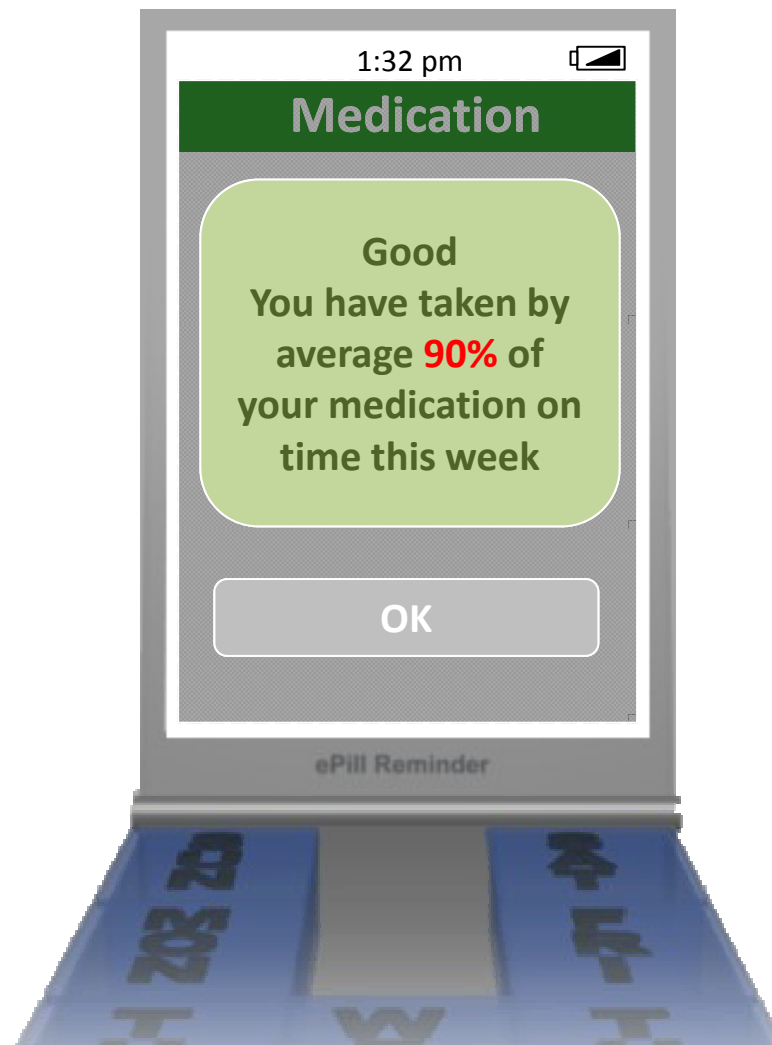
SUN		SAT
MON ✓		FRI
TUE	WED	THR

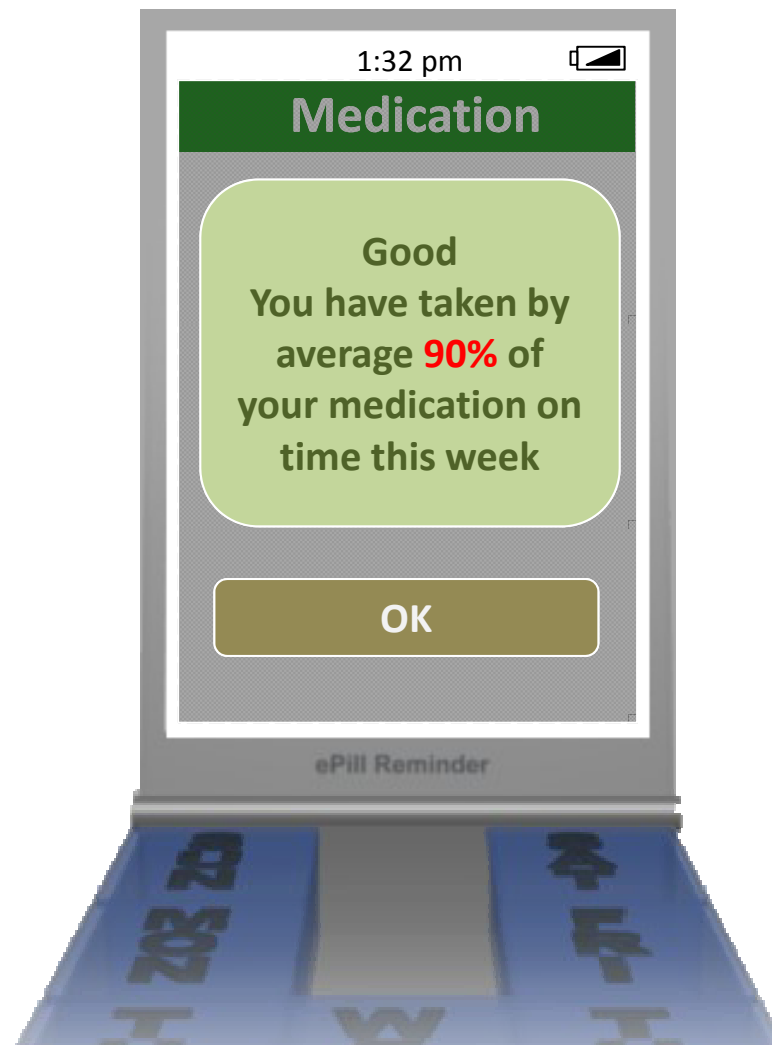
ePill Reminder

H 203 20

W

H 203 20







END OF TASK 1

Task #2: Over the Counter, Drug-Drug Interaction





You are in CVS and found Zocor (over the counter)
You want to add/sync it with ePill Reminder



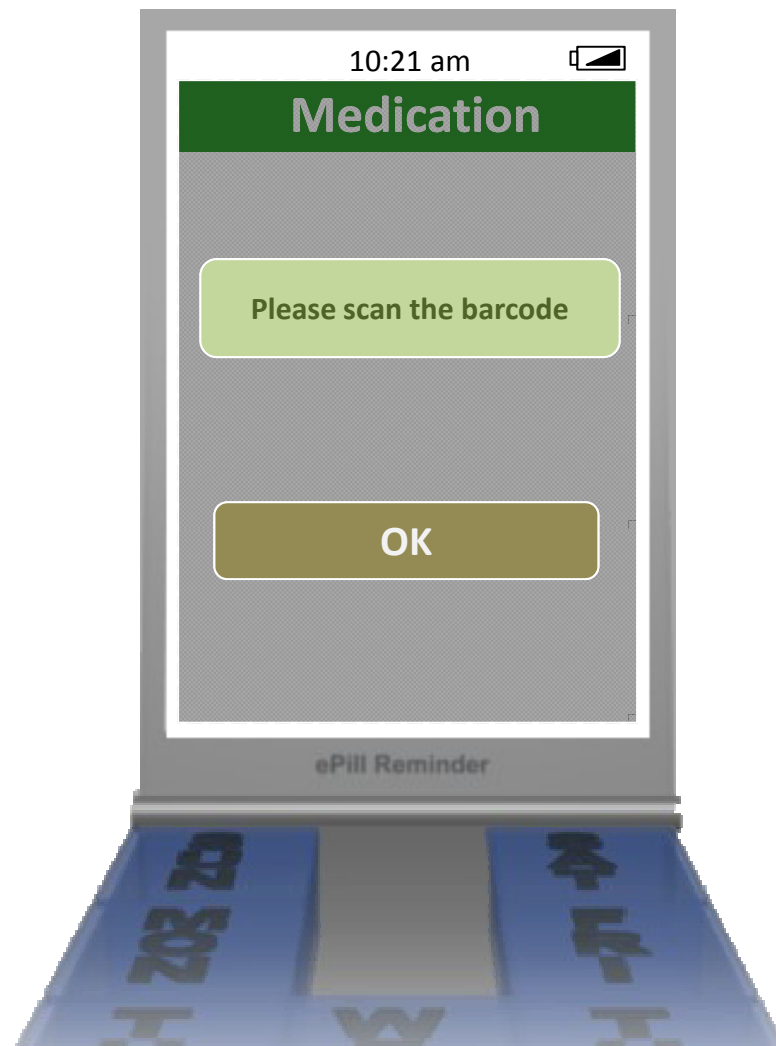


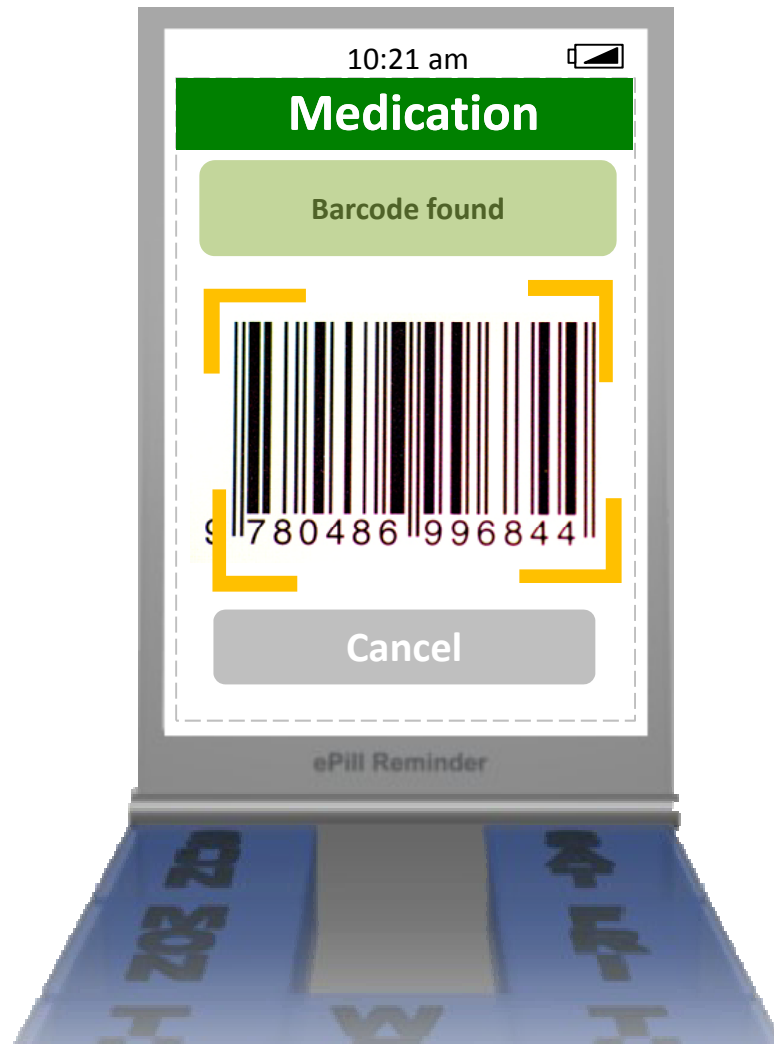


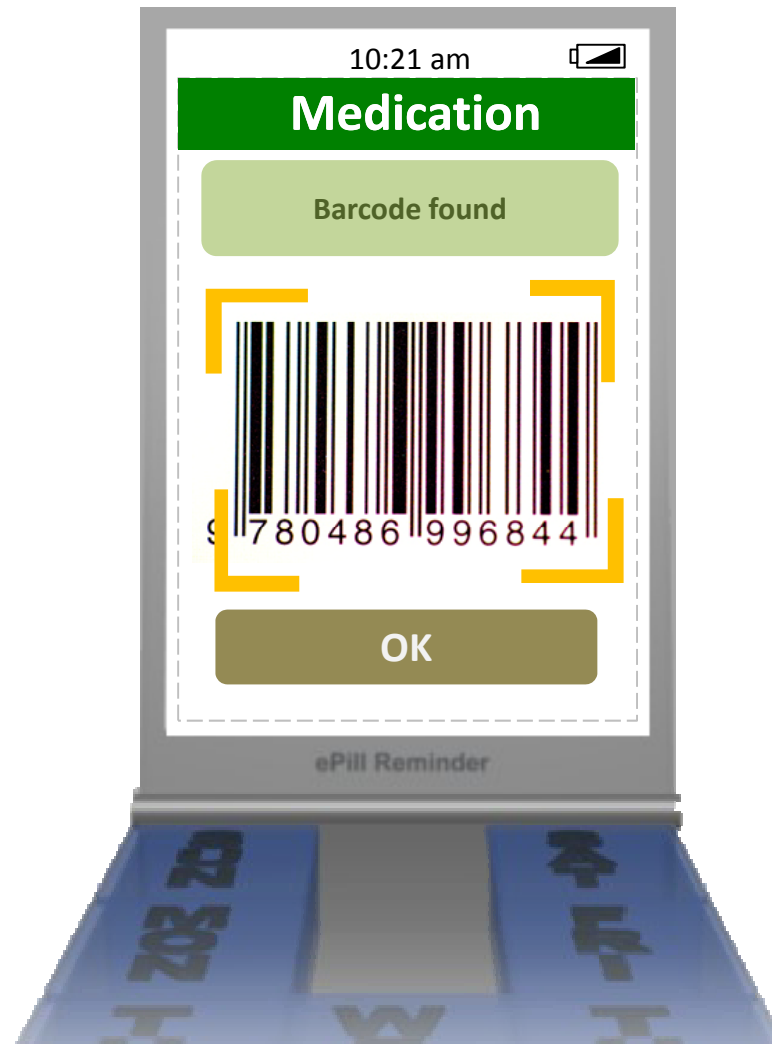












10:22 am



Medication

Zocor (Simvastatin)



Name: Zocor

Dosage: 20 mgr

Indication: High Choles.

Severe Drug Interaction Detected

Diltiazem may significantly
interact with Zocor – talk to
your doctor or pharmacist

Cancel

Ignore/Add

ePill Reminder

10:22 am



Medication

Zocor (Simvastatin)



Name: Zocor

Dosage: 20 mgr

Indication: High Choles.

Severe Drug Interaction Detected

Diltiazem may significantly
interact with Zocor – talk to
your doctor or pharmacist

Cancel

Ignore/Add

ePill Reminder



**Now you found Bufferin (over the counter)
You want to add/sync it with ePill Reminder**



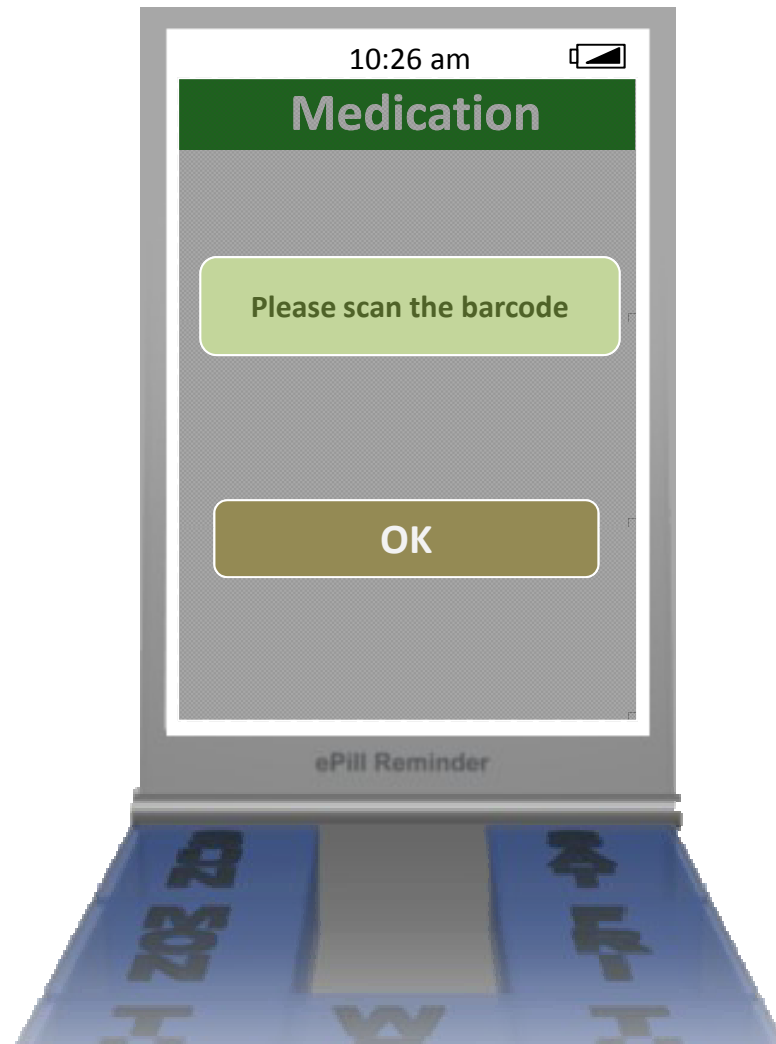




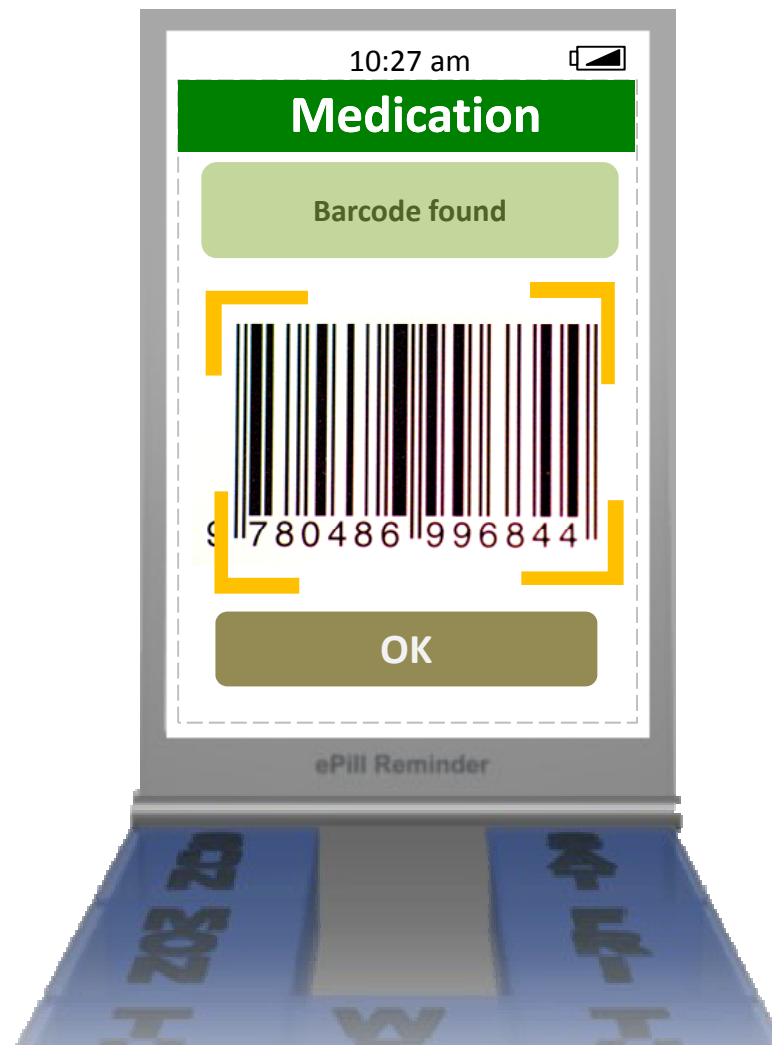












10:27 am



Medication

Bufferin (Asprin)



Name: Bufferin

Dosage: 80 mgr

Indication: Anti Inflamm.

Severe Drug Allergy Detected

Based on your profile you have
allergy to aspirin. It will induce
anaphylaxis shock in you.

Cancel

Ignore/Add

ePill Reminder

10:27 am



Medication

Bufferin (Asprin)



Name: Bufferin

Dosage: 80 mgr

Indication: Anti Inflamm.

Severe Drug Allergy Detected

Based on your profile you have
allergy to aspirin. It will induce
anaphylaxis shock in you.

Cancel

Ignore/Add

ePill Reminder



Now you found Advil (over the counter)
You want to add/sync it with ePill Reminder



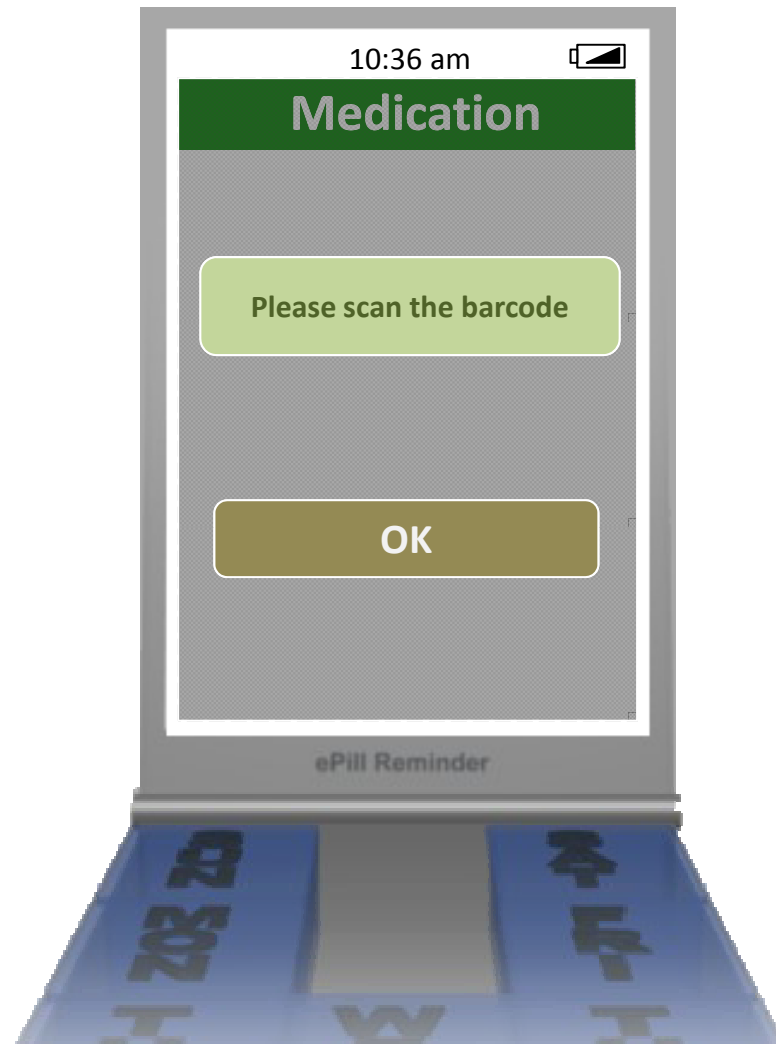




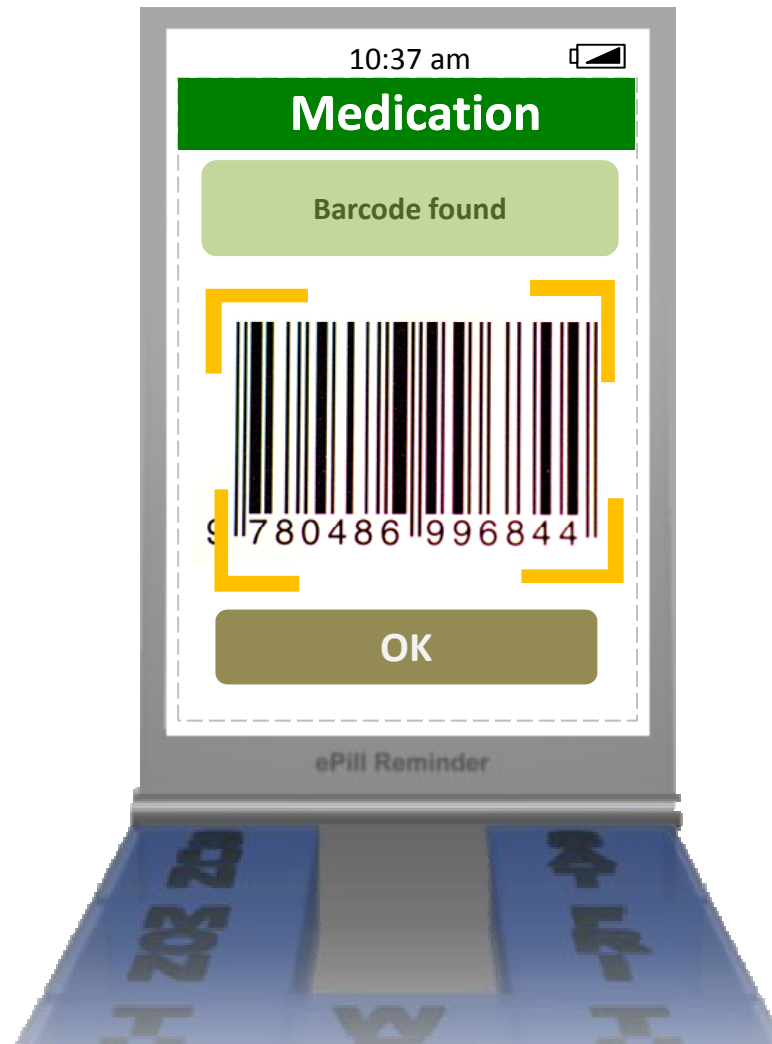












10:38 am



Medication

Advil (ibuprofen)



Name: Advil

Dosage: 800 mgr

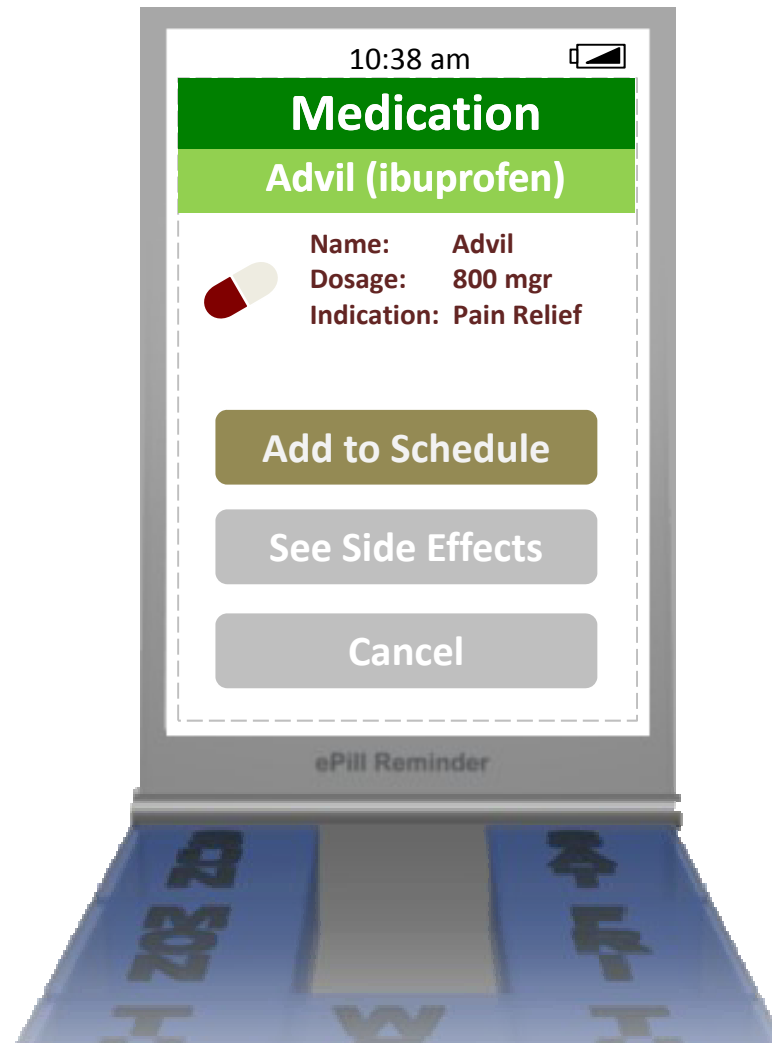
Indication: Pain Relief

Add to Schedule

See Side Effects

Cancel

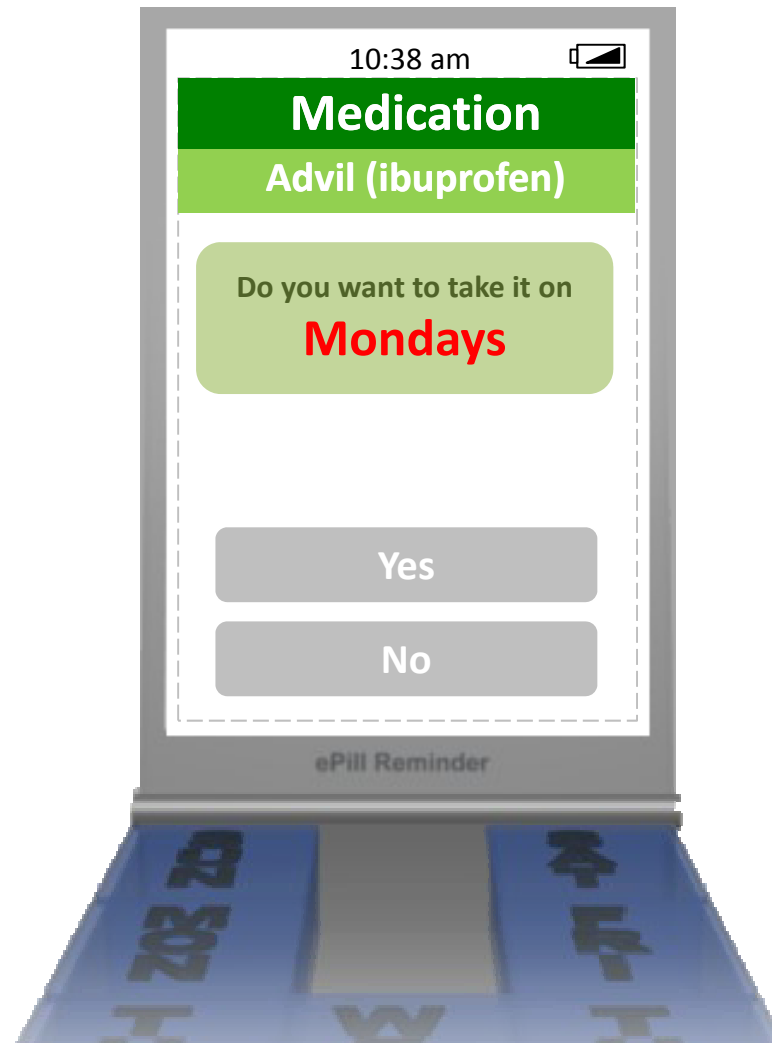
ePill Reminder

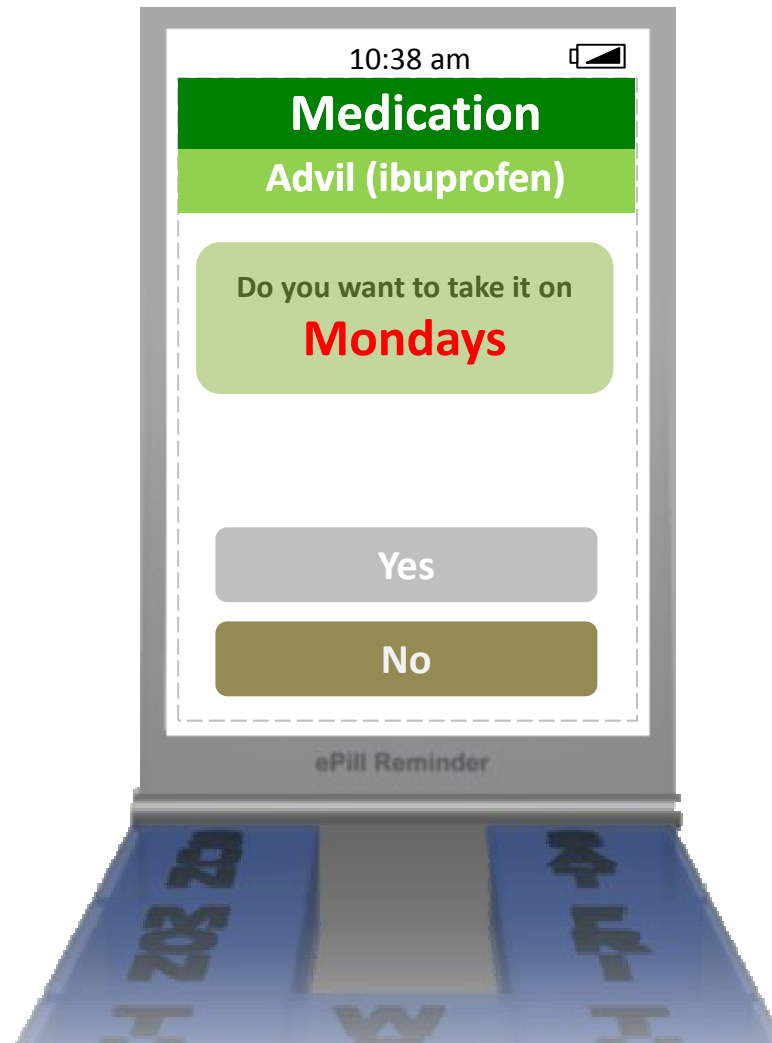


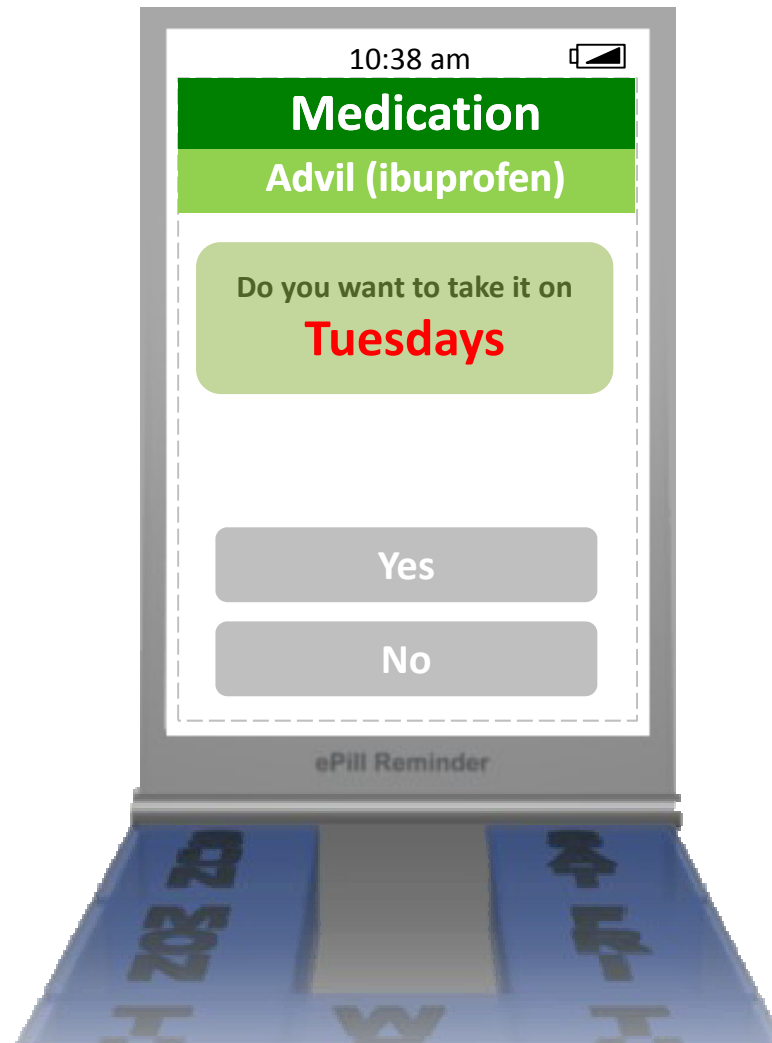
You are planning to take one Advil on Wednesdays at 11am

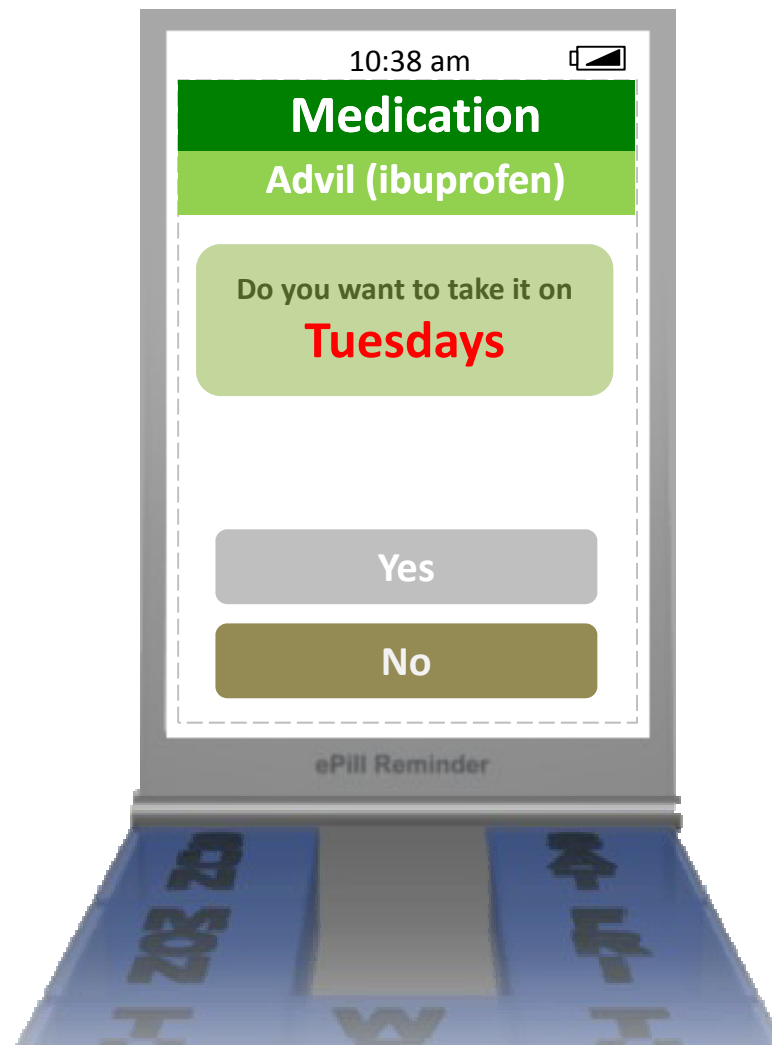


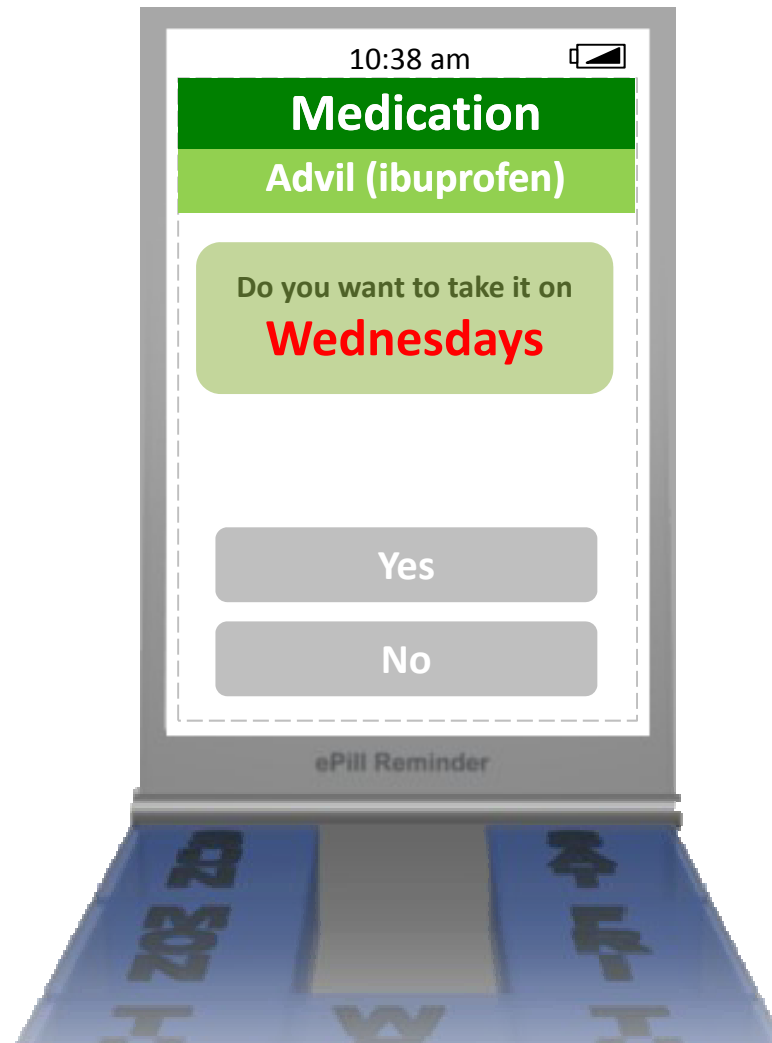


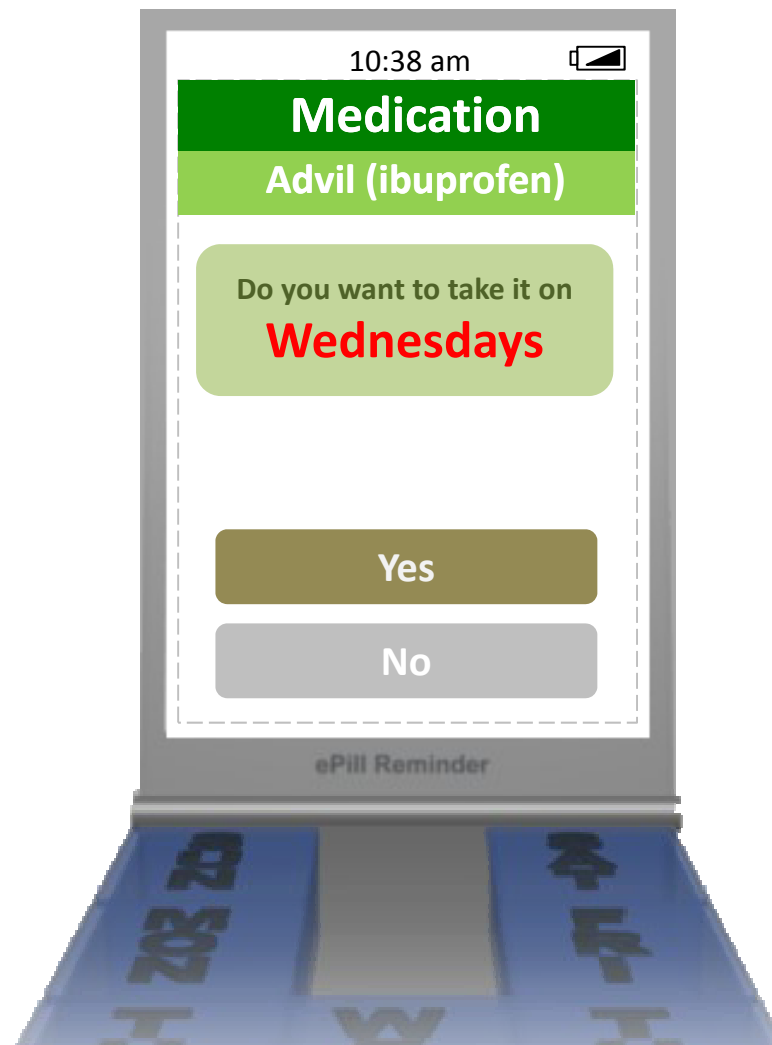




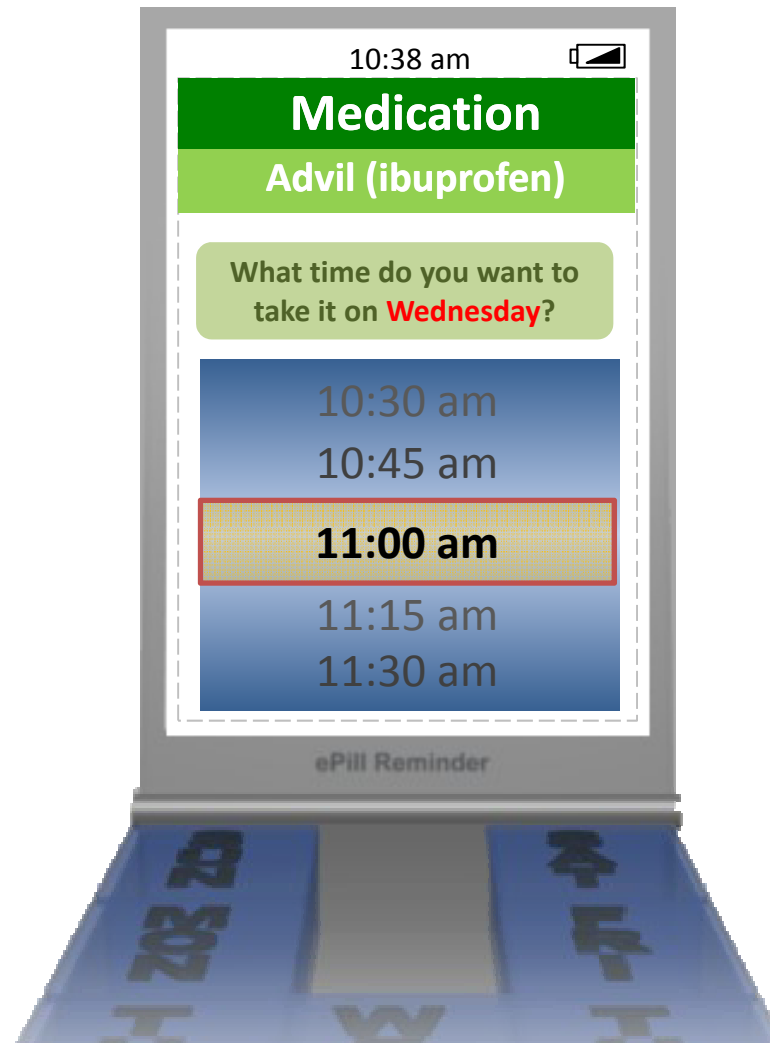












10:38 am



Medication

Advil (ibuprofen)

What time do you want to
take it on **Wednesday**?

10:30 am

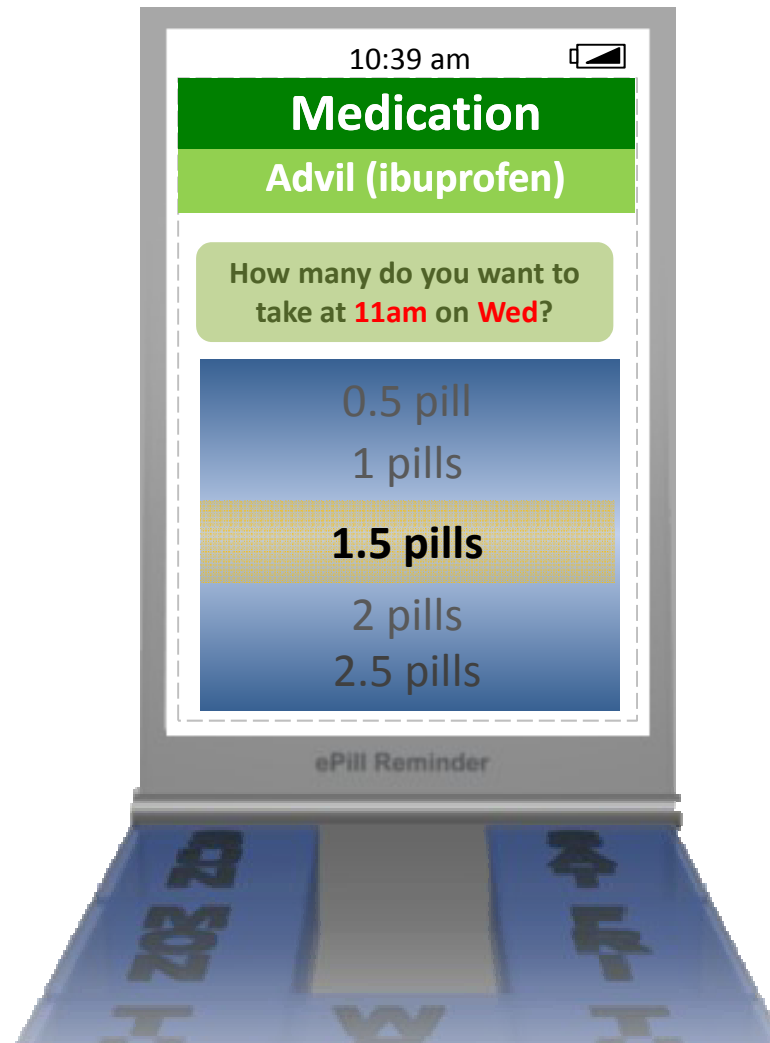
10:45 am

11:00 am

11:15 am

11:30 am

ePill Reminder



10:39 am



Medication

Advil (ibuprofen)

How many do you want to
take at **11am** on **Wed**?

0.5 pill

1 pills

1.5 pills

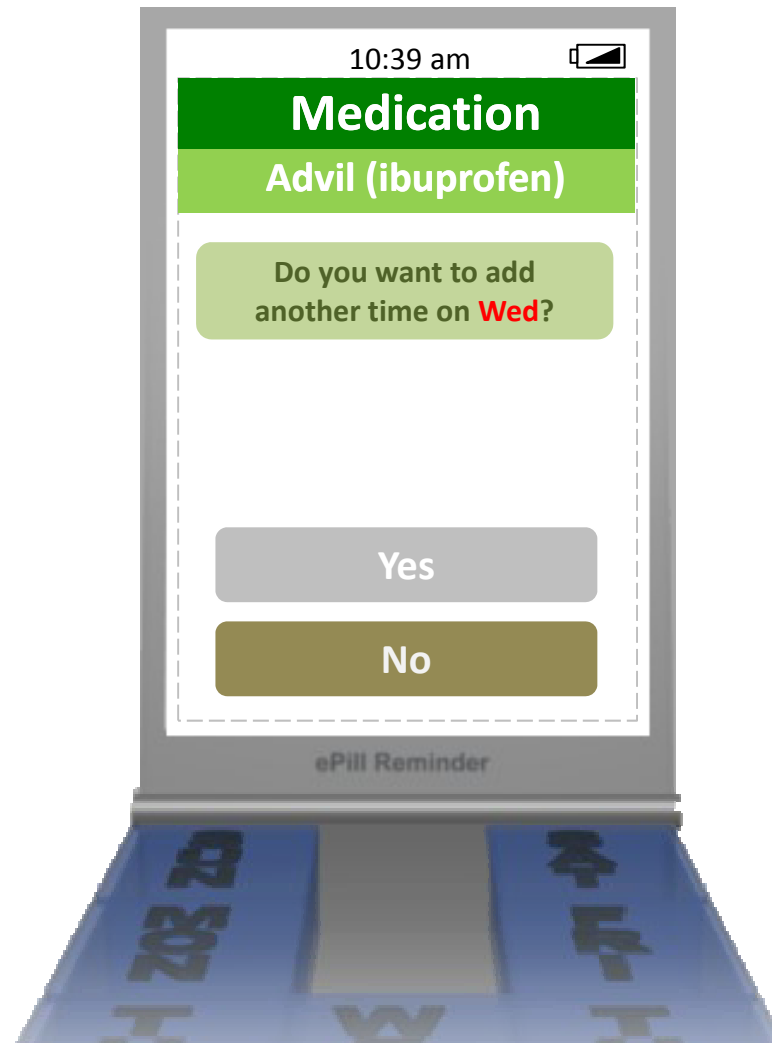
2 pills

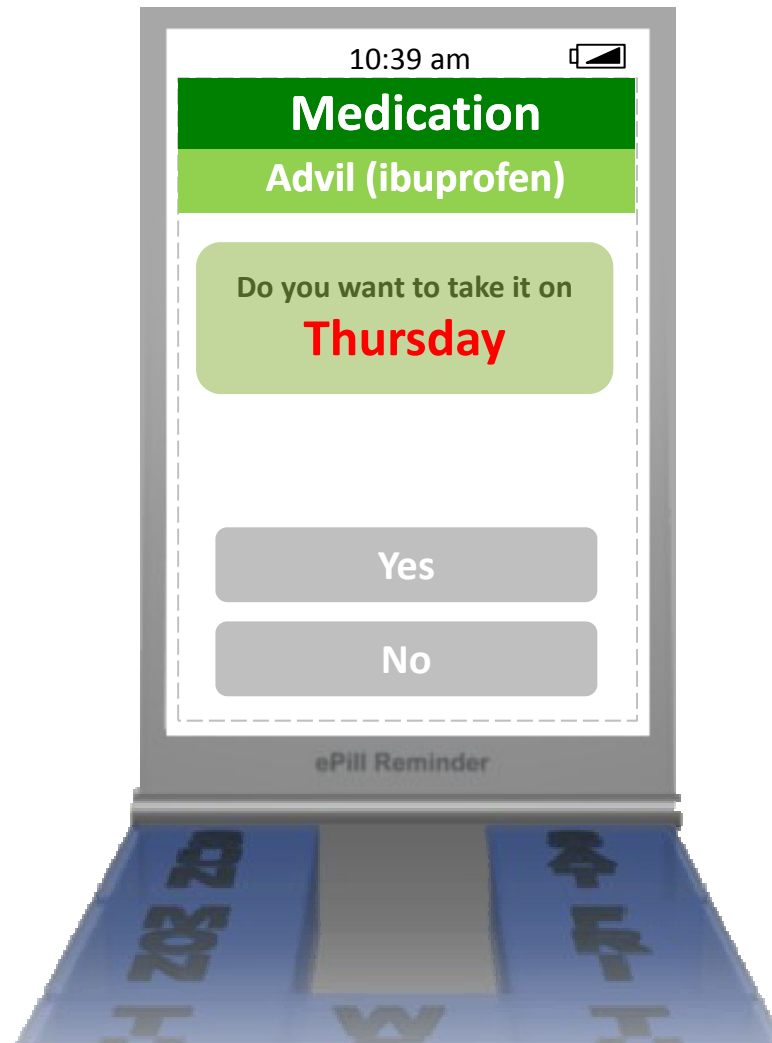
2.5 pills

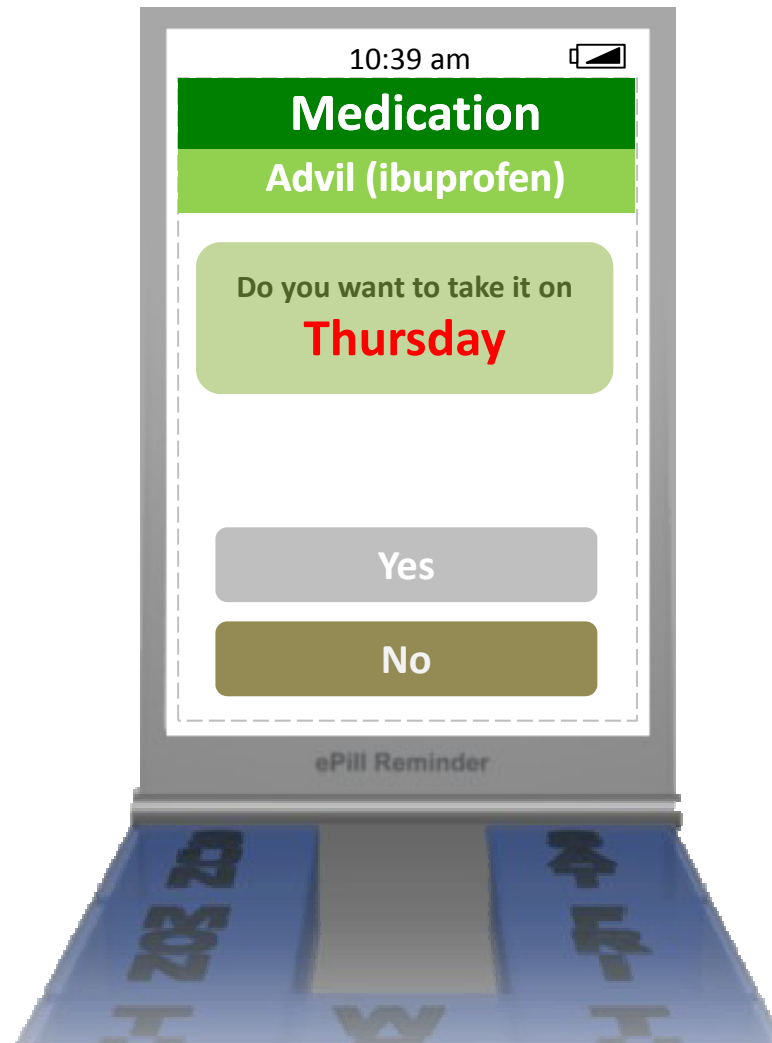
ePill Reminder

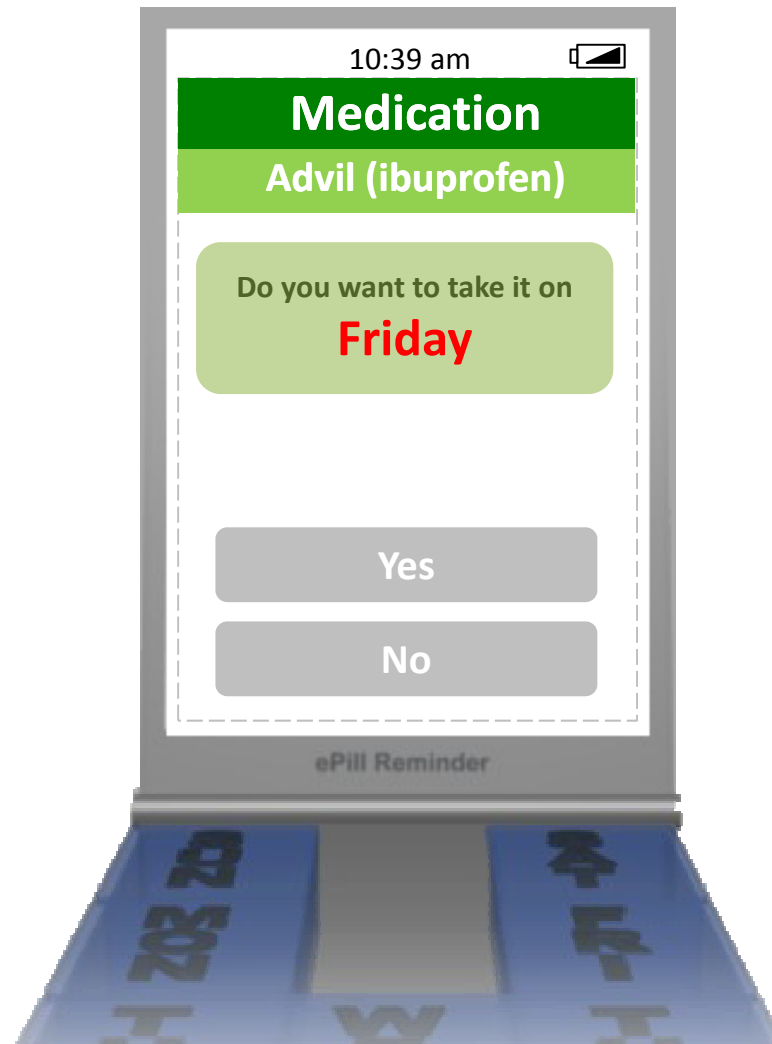


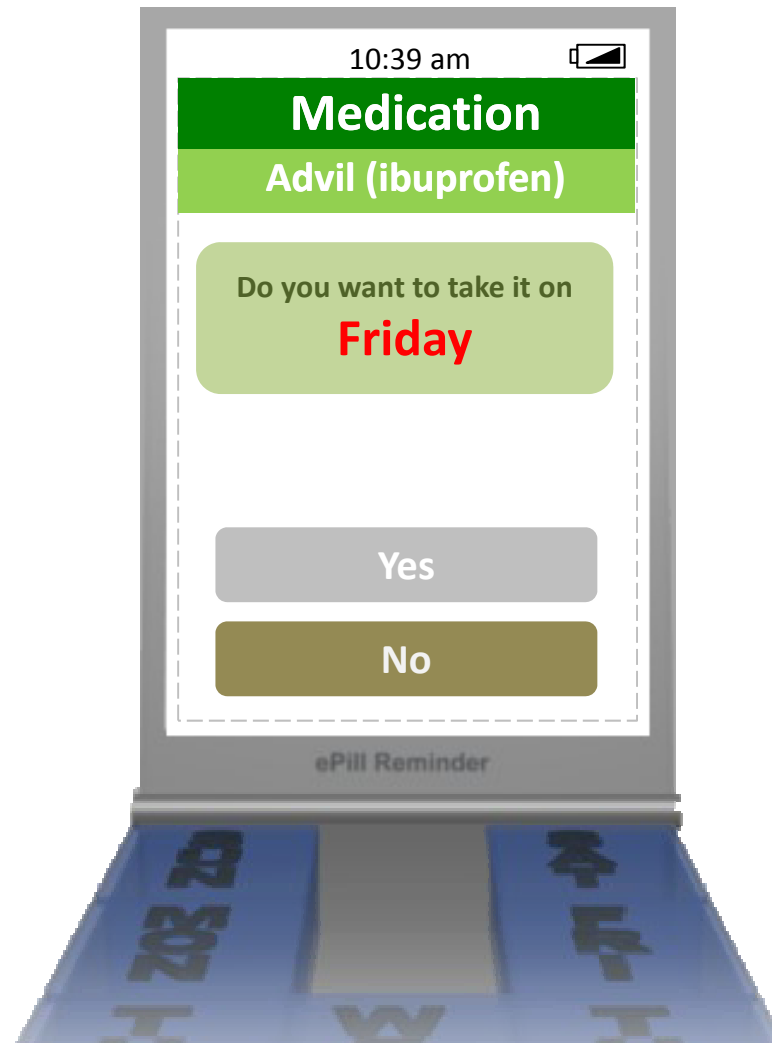








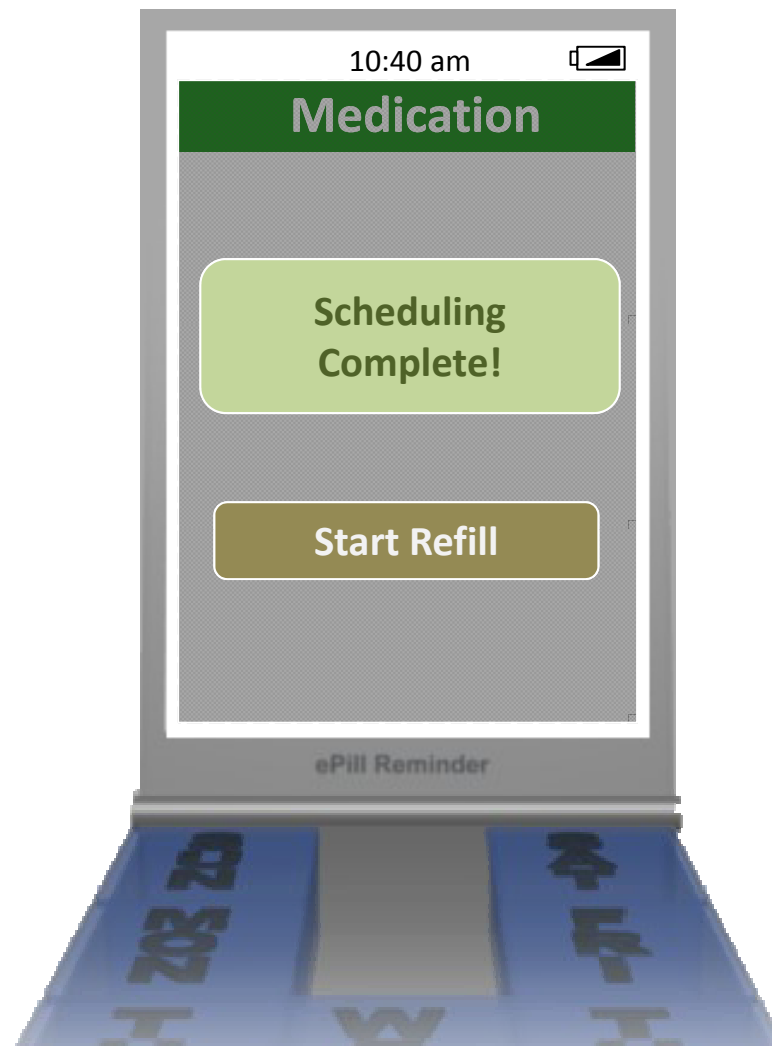












You should insert the new pills in the compartments one by one

10:40 am



Medication

Pills to Refill 1/1



Name: Advil

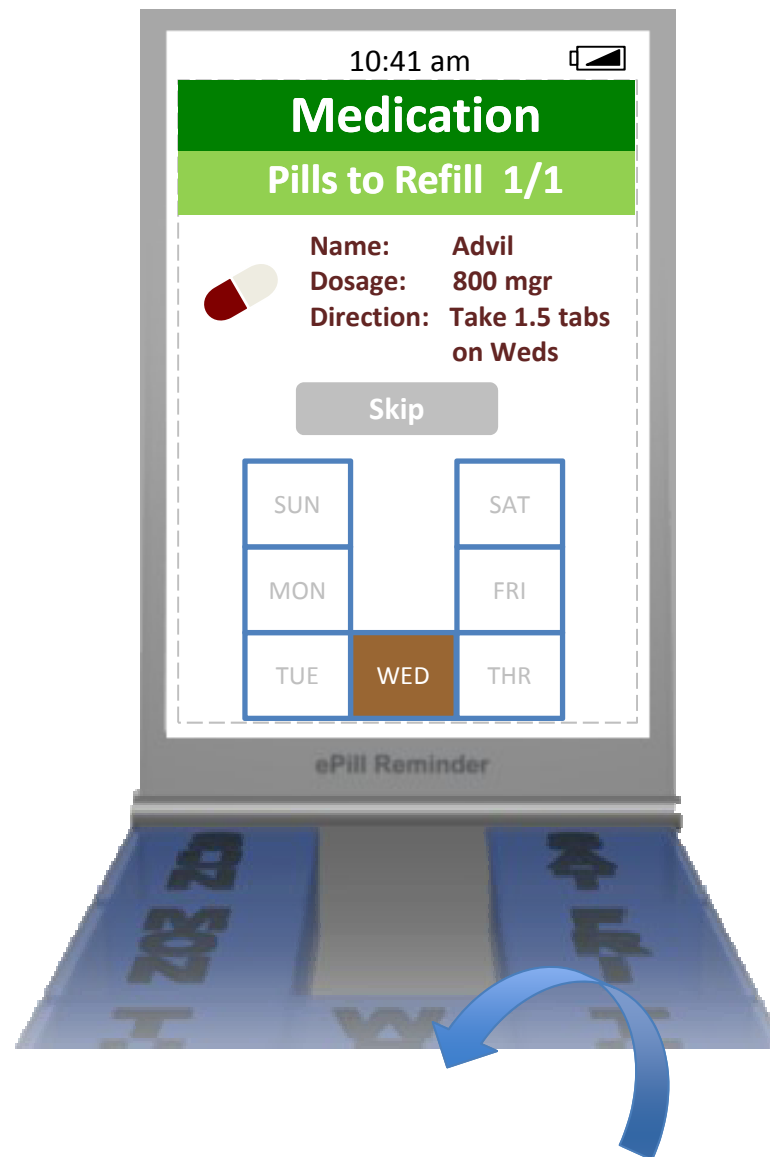
Dosage: 800 mgr

Direction: Take 1.5 tabs
on Weds

Skip

SUN		SAT
MON		FRI
TUE	WED	THR

ePill Reminder



10:41 am



Medication

Pills to Refill 1/1



Name: Advil

Dosage: 800 mgr

Direction: Take 1.5 tabs
on Weds

Next

SUN		SAT
MON		FRI
TUE	WED	THR

ePill Reminder

10:41 am



Medication

Pills to Refill 1/1



Name: Advil

Dosage: 800 mgr

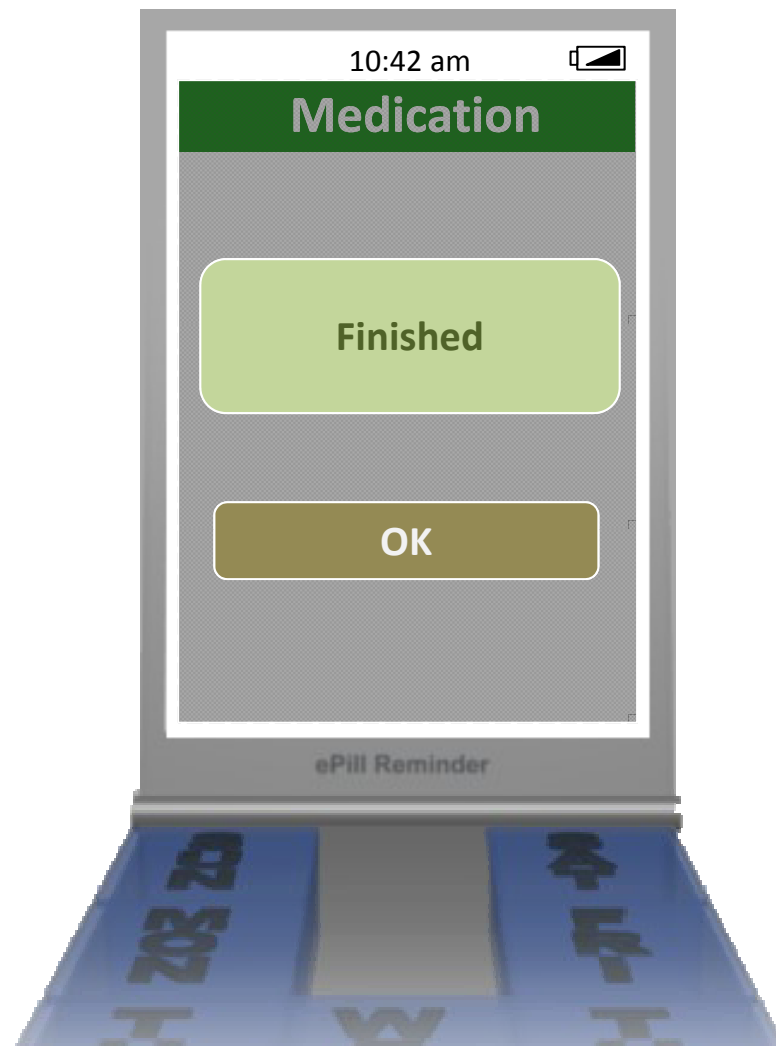
Direction: Take 1.5 tabs
on Weds

Next

SUN		SAT
MON		FRI
TUE	WED	THR

ePill Reminder







END OF TASK 2