	Initial Patient Assessment and Data Collection	Collaborative Care and Senior Doctor Consultation	Prescription and orders	Diagnostic Procedures	Discharge planning	Documentation
Actions	The PG medical student conducts the initial patient assessment, gathering vital signs, medical history, and preliminary diagnostics, recording them by hand.	The PG student collaborates with nursing staff and requests a senior doctor's consultation.	The PG student discusses the patient's condition with the senior doctor, records orders by hand, and plans to enter them into the EMR later.	The PG student administers prescribed medications, orders diagnostic tests, and continues handwritten documentation.	The PG student educates the patient and their family, prepares for discharge, and plans to document the interactions in the EMR later.	The PG student reviews the patient's care and plans to transcribe all handwritten notes into the EMR.
Touchpoints	Patient arrival and introduction Handwritten data on paper charts Interaction with nursing staff and patients	Communication with nursing staff for patient care updates Interaction with the senior doctor for consultation Use of devices to contact the senior doctor	Discussion with the senior doctor for orders Handwritten recording of orders on paper Preparing for medication administration and diagnostic procedures	Coordination with the nursing staff Ordering diagnostic tests Medication administration to the patient Continuing handwritten documentation on patient charts	Interaction with the patient and their family Providing education and preparing for discharge Planning and discussing the discharge process	Reviewing patient care with nursing staff Preparing for handover and shift change Transcribing handwritten notes into the EMR
Emotions						
Pain points	Handwritten notes need to be transcribed into the EMR later. Cognitive load increases due to dual documentation	Delayed access to patient information. Risk of missing critical data.	Risk of order transcription errors. Time lag in implementing orders.	Duplication of effort in recording. Increased cognitive load.	Delay in updating patient records. Increased cognitive load during discharge planning.	Hefty workload during handover. Risk of data inaccuracies during transcription.
Opportunities	Training on efficient data collection methods. Introduction to simplified EMR data entry methods	Real-time access to EMR for data sharing during consultations.	Training in real-time EMR order entry.	Introduction to mobile EMR data entry methods	Training in real-time patient education documentation in EMR	EMR integration for real-time handover documentation