



**SaaS solution for
Hospitals to collect, store,
manage and transmit
patient's medical records.**



About us

ASKEP.net is a healthtech Cloud SaaS Hospital Information System (HIS) for public and private healthcare institutions in Ukraine. We've been working in Ukraine since 2017 and implemented the national program of digital transformation of the healthcare system. And we are a top-5 player of Ukrainian HIS market.

Our mission:

to ensure effective interaction between the doctor, the patient and the government.



500+

health care providers



12k+

everyday active
medical workers



4,7M+

patients

Product core features

for Ukrainian eHealth



- Registration of the healthcare provider in government eHealth system
- Registration of doctors in eHealth
- Signing of declarations of patients with doctor?
- Electronic prescription
- Contracting of institutions with National Health Service of Ukraine

for Medical facilities



- Electronic appointment scheduling.
- Patient database.
- Review and update patient medical history.
- Laboratory and Diagnostic results.
- Prescription and referral.
- Formation of statistics and reporting.

for Patients



- Online booking of the appointment with a doctor.
- Personal profile with an electronic patient card (history of examinations, diagnoses, prescribed treatment).
- Signing declarations.
- Vaccination.

Appointment Scheduling



Patient

- Access to the medical history
- Scheduling appointment with a doctor
- Appointment reminder



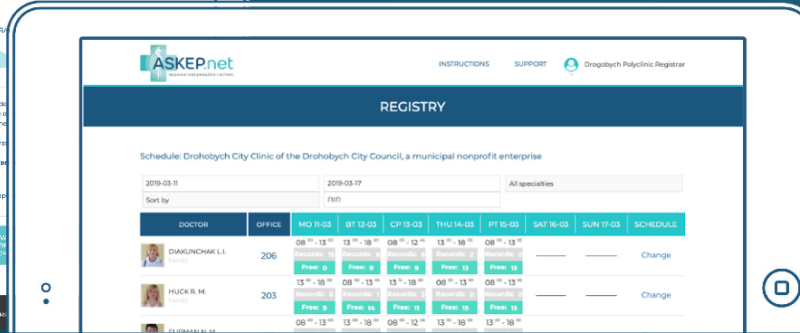
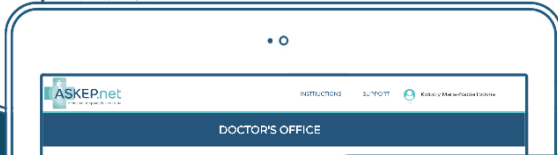
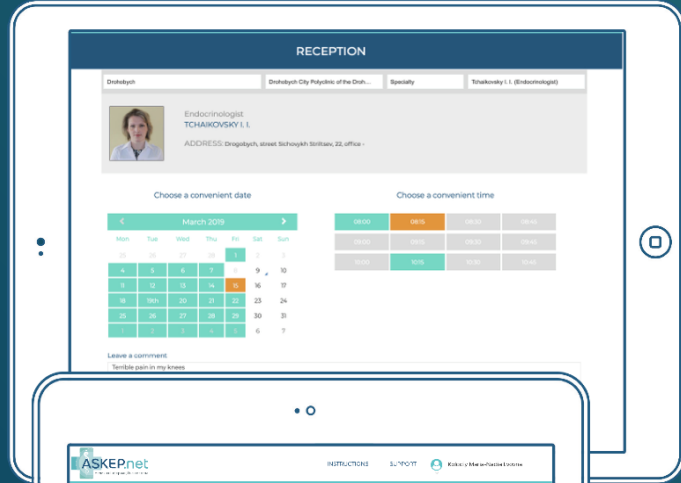
Doctor

- List of appointments
- Access to the patient medical history
- An extended list of templates for entering the results of a patient's appointment



Reception

- Doctor's schedule management
- Appointments management





- Personal health records access



- Fill in patient records in templates

SUPPORT SERVICE

Dr. Oleksandra Shevchenko

ULTRASOUND OF THE THYROID GLAND

SELECT FILE	NAME OF THE DOCUMENT	DOCUMENT DATE	THE INSTITUTION THAT ISSUED	WHAT THE DOCTOR ISSUED
<div> <div>Choose file</div> <div>No file chosen</div> </div> <div> SELECT FILE NO FILE SELECTED SUPPORTED FILE FORMATS: PNG, JPEG, PDF, DOC*ONLY JPEG AND PNG FORMAT DOCUMENTS ARE PRINTED </div>	<input type="text" value="Name"/>	<input type="text" value="11-03-2023"/>	<input type="text" value="1st Lviv Hospital"/>	<input type="text" value="Shevchenko O."/>
<input type="checkbox"/> RESEARCH RESULT WITH CONFIDENTIAL MEDICAL INFORMATION				
<div>CONCLUSION</div> <div> Conclusion: the maximum number is 500 characters <div></div> </div>				
<div>THE GLAND IS LOCATED IN A TYPICAL PLACE</div> <div></div>	<div>NOT OPERATED ON</div> <div></div>			
<div>THE LOBES ARE SYMMETRICAL</div> <div></div>	<div>RIGHT LOBE [CM 2]</div> <div></div>			
<div> <input type="checkbox"/> contains three-dimensional structures <input type="checkbox"/> does not contain bulky structures </div>				

Laboratory / Diagnostics



Laboratory / Diagnostics

- Fill in patient data in a template form
- Customise or create own form templates



Patient

- Records management (view, print, save, send etc.)



Doctor

- Access to the patient records from all medical facilities
- Attach ultrasound, ECG, X-ray, CT, MRI and add to them conclusion.
- Patient records management (print, save, send etc.)

ASKEPnet
LABORATORY ANALYSIS: BLOOD TEST RESULTS

INDEXES	RESULT	UNITS	NORM (IN UNITS OF SI)
HEMOGLOBIN		g/l	Men 130-160; women 120-150
GLUCOSE		mmol/l	3.9-5.5 in the morning, on an empty stomach; not more than 10.0 or two other readings 4.0-7.4 - the index of glycosylated hemoglobin (HbA1c) %.
RED BLOOD CELLS		7 / l	Men 4.0-5.0; women 3.9-4.7
COLOR INDICATOR			0.84-1.05
RETICULOCYTES		%	0.2-1.0
PLATELETS		G / L	180.0 - 320.0
LEUKOCYTES		G / L	4.0-9.0
ERYTHROCYTE SEDIMENTATION RATE (ESR)		mm / h	Men 1-10; women 2-15
Neutrophils		%	-
Metamyelocytes		%	-
NEUTROPHILS		%	10-60
SEGMENTED NUCLEAR		%	47-72
EOSINOPHILS		%	0.5-5.0
BAROPHILS		%	0-1.0
LYMPHOCYTES		%	19-37.0
MONOCYTES		%	3.0-8.0
PLASMA CELLS		%	-

ASKEPnet
MY OFFICE

LELECHKO KRISTINA OLEGOVNA
ID 100734

Date of birth: 22-05-1988
Address: LVIV, YEVHEN KONOVALETS STREET, 14
Phone: +380930000023

Weight: 53
Height: 165
Blood type: 0 (I) +
Allergies: CITRUS
Drug intolerance: MISSING

Medical card of the patient

DATE of creation / recording	DATE Last edited	TYPE	SPECIALTY	INSTITUTION	DOCTOR	ACTION
12/22/2018 10:00:00	12/19/2018 22:59:53	Advice	Family	Family Office No. 4, KNIP "DROHOBYTSK CITY POLYCLINIC" OMR	Kolodyi M. L.	DETAILS

In-patient Treatment



Doctor

- Mandatory medical documentation
- Data access from various devices



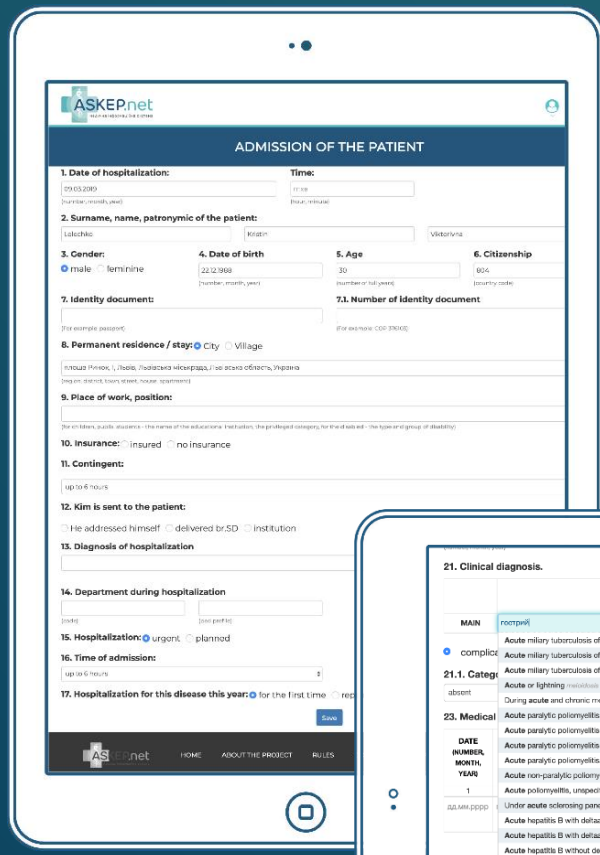
Patient

- Access to the all medical records on personal account



Head of Department

- Analytics on all work streams



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www.askep.net/2020

ADMISSION OF THE PATIENT

1. Date of hospitalization: **Time:**
(year, month, year) (hour, minute)

2. Surname, name, patronymic of the patient:

3. Gender: ☒ male ☐ feminine **4. Date of birth:**
(number, month, year) (number or full year) **5. Age:**
(number or full year) **6. Citizenship:**
(country code)

7. Identity document: **7.1. Number of identity document:**

8. Permanent residence / stay: ☒ City ☐ Village

(city or district, house, street, house, apartment)

9. Place of work, position:
(for children, public assistance - the name of the educational institution, the professional category for the adult - the type and group of disability)

10. Insurance: ☒ insured ☐ no insurance

11. Contingents:

12. Kim is sent to the patient: ☐ He addressed himself ☐ delivered by SD ☐ institution

13. Diagnosis of hospitalization

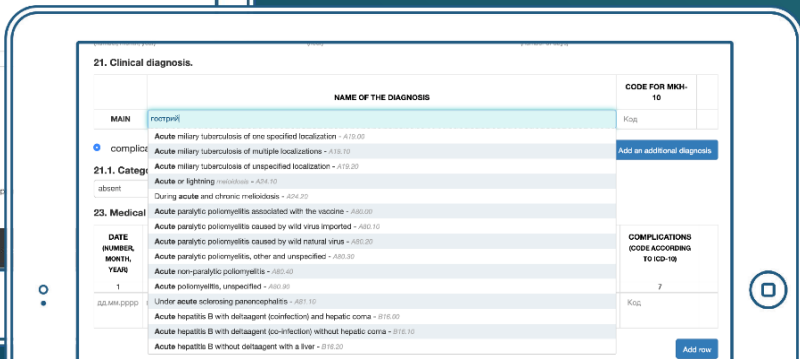
14. Department during hospitalization

15. Hospitalization: ☒ urgent ☐ planned

16. Time of admission:

17. Hospitalization for this disease this year: ☒ for the first time ☐ rec

ASKEP.net HOME ABOUT THE PROJECT RULES



21. Clinical diagnosis.

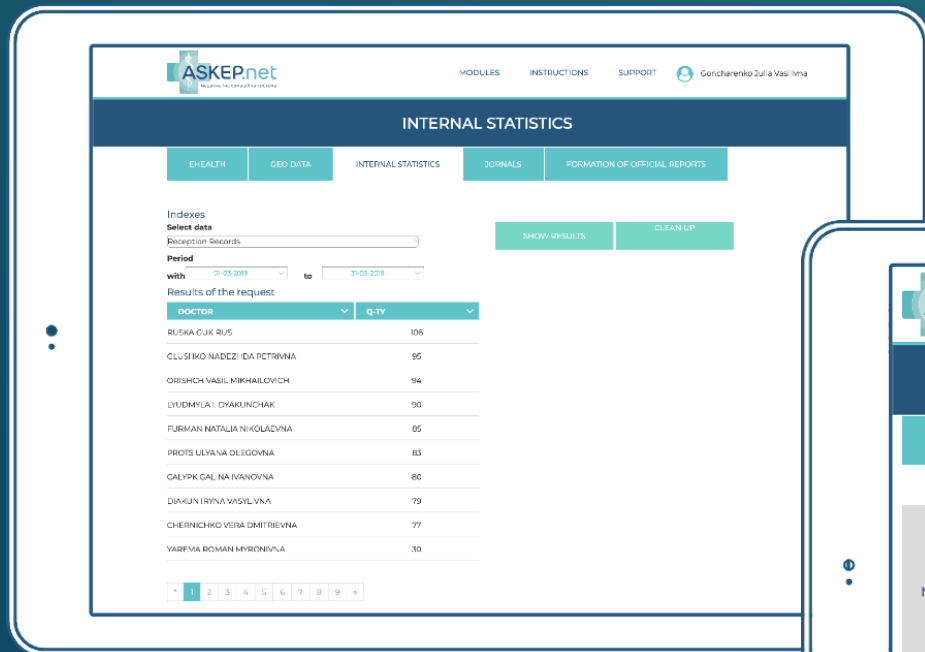
	NAME OF THE DIAGNOSIS	CODE FOR MKH-10
MAIN	<input type="text" value="tubercul"/>	<input type="text" value="K04"/>
	Acute military tuberculosis of one specified localization - A19.00	
complicat	Acute military tuberculosis of multiple localizations - A19.10	<input type="button" value="Add an additional diagnosis"/>
	Acute military tuberculosis of unspecified localization - A19.20	
21.1. Category	Acute or lightning (meningitis) - A20.00	
absent	During acute and chronic melioidosis - A24.20	
	Acute paratyphoid poliomylitis associated with the vaccine - A80.10	
	Acute paratyphoid poliomylitis caused by wild virus imported - A80.10	
	Acute paratyphoid poliomylitis caused by wild natural virus - A80.20	
	Acute paratyphoid poliomylitis, other and unspecified - A80.30	
	Acute non-paratyphoid poliomylitis - A80.40	
	Acute poliomylitis, unspecified - A80.90	
DATE	Under acute sclerosing pancreocephalitis - A87.10	
NUMBER	Acute hepatitis B with deltaagent (coinfection) and hepatic coma - B16.00	
MONTH	Acute hepatitis B with deltaagent (co-infection) without hepatic coma - B16.10	
YEAR	Acute hepatitis B without deltaagent with a liver - B16.20	
1		<input type="button" value="Add now"/>
DATE		
NUMBER		
MONTH		
YEAR		

COMPLICATIONS
(CODE ACCORDING TO ICD-10)

Statistics



Creating and customization of reports using large pool of data.



Coming soon – Artificial Intelligence

Recognition of diseases
from medical images



Askep.net compared
your history of blood tests

Your hemoglobin level is constantly decreasing.
I advise you to make an appointment
with an immunologist.

BOOK A VISIT

Proactive monitoring of
patients' health status
based on their medical
data

Evidence-Based
Medicine
Guidelines

Diagnostics

Choose a diagnosis

R61 Pneumonia

Check for the following symptoms to confirm the diagnosis:

Common signs and symptoms of acute lower respiratory infections
paths are covered

- cough
- purulent sputum
- fever (often higher than 38.0°C; may be absent in the elderly patients)
- shortness of breath
- wheezing
- chest pain.

Pneumonia should be suspected if in addition to the above symptoms

- the disease affected the general state of health of the patient
- symptoms appeared quickly
- symptoms of respiratory tract infection worsened again
- the patient has additional risk factors (age, basic disease).

Recommended treatment:

Means of antibacterial therapy for community-acquired pneumonia:

First-line drug

Amoxicycline 750 mg – 1 g × 3

Not effective against Chlamydia pneumoniae or Mycoplasma.

Combine with macrolide or doxycycline if indicated.

Diagnostics:

- X-ray of the chest
- Diagnosis is based on chest X-ray of the chest is prescribed pneumonia, provided that reasonable limits.
- The absence of infiltrates evidenced by the clinical p
- Laboratory tests
- The concentration of C-reactive protein (CRP) indicates pneumonia, if the plasma <20 mg/L and the studies indicating pneumo



NOTA
BENE

Our AI will be training
every day on +4 million
patients

Contact us

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