

BOSIGO WORK READINESS & INNOVATION HUB

Technical Profile

TruMD

Stream: Health, Life Sciences & Biotechnology | Sub-focus: South African HealthTech platforms

Analyst: Bosigo Technical Assessment | Framework: Bosigo Technical Profiling Framework (CLICK · TEST · RECORD) | Date: 13 August 2026

A. Basic Profile Configuration

Item	Details
Company / Product Name	TruMD
Sector	Digital Health / HealthTech / Telemedicine
Product Form	Telemedicine and telehealth service provider with a web-based service entry point
Target Users	Individuals seeking remote healthcare consultations with HPCSA-registered doctors
What it claims to do	Connects individuals with HPCSA-registered doctors through telemedicine and telehealth services. The service covers cardiovascular, musculoskeletal, respiratory, neurological, endocrine, infectious and mental-health conditions and aims to empower individuals to take control of their health through technology.

Verification treatment: Company claims are treated as hypotheses to be tested, not as findings. Where independent testing produced no observable evidence, the item is recorded as Could Not Verify; this denotes absence of evidence rather than evidence of absence.

B. Existence & Accessibility Check

Is it live?: Yes. The TruMD website was live and accessible.

Technical Notes: The website was easy to navigate, with good UX/UI and good performance. Registration for consultation requires a valid ID number. A consultation fee is required before the consultation can proceed, which prevented full end-to-end testing.

Accessibility Checkpoint	Result	Notes
Website access	Working	Website accessible.
Registration	Working / required	Valid ID number required for consultation.
Login	Could Not Verify	No separate login finding was supplied beyond the registration/consultation journey.
Consultation	Partially accessible	Consultation pathway is gated by a required fee.
Payment	Required	Consultation fee is required before continuing.
Core telemedicine workflow	Could Not Verify	End-to-end consultation could not be completed.
Overall accessibility	Partial	Public website accessible, but clinical workflow is payment-gated.

Homepage load and rendering faults: No material homepage/rendering faults; website performance was described as good.

Main call-to-action / entry point: Consultation/registration pathway.

Sign-in destinations: No separate public sign-in destination was independently verified in the supplied findings.

Dead links / navigational faults: No specific dead-link defect was supplied.

Documentation / compliance access: No specific compliance/privacy documentation was independently verified.

Mobile behaviour: No mobile application was independently verified in the supplied findings.

C. Onboarding Friction

Item	Finding
Friction Level	Medium
Can an account be created without contacting the company?	A valid ID number is required to register for consultation.
Demo request	Not applicable / not stated.
Payment or card required before testing?	Yes. A consultation fee is required before the consultation can proceed.
Time from landing page to first working action	Public website was immediately accessible; time to first clinical action could not be measured because payment was required.
Why Medium	The site is easy to navigate, but ID capture and mandatory consultation payment create moderate onboarding friction and prevented full core-function testing.

Functional Test (TEST)

Core Task	Testing Steps	Expected Outcome	Actual Outcome	Result
Access consultation	Open website; begin consultation registration	User should be able to enter the consultation journey	Consultation registration requires a valid ID number	Partial
Proceed to consultation	Continue through consultation pathway	User should reach a telemedicine consultation	Consultation fee was required before continuing; end-to-end consultation was not tested	Not verifiable
Assess UX/UI	Navigate public website	User should navigate clearly and easily	UX/UI was good and easy to navigate	Working
Assess website performance	Load and navigate website	Website should respond reliably	Website performance was good	Working

The intended journey was traced only as far as the supplied findings allow. Downstream steps blocked by payment, unavailable credentials, organisational eligibility, consultant response, referral or other prerequisites are recorded as unreachable/not verifiable rather than as technical failures.

Authentication & Access Control

Registration/access control was only partially assessable. The valid ID-number prerequisite was verified. Other roles, MFA, SSO and detailed credential controls were not supplied and remain unverified.

Operational Maturity

Dimension	Finding
Website availability	Verified functional
UX/UI	Good / easy to navigate
Performance	Good
ID requirement	Verified prerequisite
Consultation payment gate	Verified
Core telemedicine consultation	Not fully verifiable
Practitioner workflow	Not tested
Administrative roles	Not tested

Evidence (RECORD)

What worked: Live website; good UX/UI; good performance; consultation registration pathway; ID-number requirement and payment gate were observed.

What failed / remained inaccessible: End-to-end telemedicine consultation; practitioner-side workflow; post-consultation functions.

Errors found: No specific technical defect was reported. Primary blocker was the paid consultation requirement.

Access limitations: Paid consultation requirement; untested practitioner/administrative roles; no provider credentials supplied.

Technology stack: CMS: WordPress; Blogs: WordPress; Miscellaneous: HTTP/3; Web server: LiteSpeed; Programming language: PHP; Database: MySQL; Page builder: Elementor; WordPress theme: Hello Elementor 3.4.9; WordPress plugins: The Events Calendar and Elementor.

D. Tier Assignment

Assigned Tier	Tier 2
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Reason: The website is live, accessible, well-performing and easy to navigate. Registration has an observable ID requirement, but the core telemedicine consultation could not be fully tested because payment was required before continuing.

Why not one higher: Tier 3 would require successful end-to-end completion of a consultation or an equivalent supervised test of the core telemedicine service.

Why not one lower: Tier 1 would understate the evidence because a functional public service entry point and positive UX/performance were verified.

Interpretation note: The Tier 2 assignment reflects the depth of independent verification available and should not be read as evidence that the consultation service fails.

E. Strategic Alignment

Primary Target Audience: Individuals seeking telemedicine consultations with HPCSA-registered doctors.

SWOT Summary

Quadrant	Findings
Strengths	Live accessible website; good UX/UI; good performance; clear telemedicine proposition; consultation entry pathway present.
Weaknesses	Core consultation not fully tested; mandatory payment blocks end-to-end verification; valid ID required; practitioner-side workflow not tested.
Opportunities	Provide a supervised/sandbox consultation pathway; make pre-payment testing possible without financial commitment; clarify end-to-end patient journey.
Threats	Competing telemedicine providers with lower-friction pathways; user drop-off from payment gating; trust concerns if core service cannot be independently demonstrated.

Strengths and weaknesses are drawn directly from the verified findings. Opportunities and threats are assessment inferences from those findings, not claims made by the company.

What Bosigo can learn: TruMD demonstrates a sound public-facing experience, but evidence is concentrated in the website layer rather than the clinical consultation itself.

Recommended next step: Provide a controlled test consultation or sandbox environment allowing independent verification of the complete telemedicine workflow without requiring a paid clinical consultation.

Verification Boundary

This assessment is based on the independent technical verification findings supplied for this assessment and structured using the Bosigo Technical Profiling Framework. Company claims are separated from observed evidence. Items recorded as Could Not Verify indicate the absence of observable evidence during testing; they are not statements that a capability does not exist.

Analyst: Bosigo Technical Assessment | Reviewed against: Bosigo Technical Profiling Framework — CLICK · TEST · RECORD