According to the Centers for Disease Control and Prevention, there are close to 130 million emergency-room visits in America every year. For many people, these visits are the only time they will see a physician.

As a medical student at Cornell, Benjamin Jack ’07SEAS became fascinated with the revolving door of emergency medicine, and specifically with what he perceived as the significant problem that ERs had following up with patients and ensuring that they took the next step in their care.

“When patients get discharged from the ER, they leave with a piece of paper that tells them what to do next,” he says. “Eighty percent of them don’t understand the instructions and don’t get the care that they need.”

He found that patients who didn’t take control of their post-discharge care became a strain on hospitals and insurance companies. The less vigilantly a patient continued his care after leaving the hospital, the more likely he was to quickly get sick and start the cycle again.

It seemed that only human intervention would help, but the caseloads of ER doctors are far too heavy for them to follow up individually with each of their patients. Jack wondered what would happen if a third party got involved.

Jack teamed up with Aditya Mukerjee ’12CC, who had a degree in computer science and a few years of startup experience under his belt. As Jack finished his last year of medical school (he graduated in May), he and Mukerjee developed the idea for BoardRounds, a cloud-based service that identifies and arranges post-discharge care for emergency-room patients. Doctors using BoardRounds will be able to enter a patient’s information and follow-up instructions into their system. From there, BoardRounds will contact the patient and handle the logistics of the next steps.

“Let’s say a patient is diagnosed with asthma and instructed to see a pulmonologist. BoardRounds would be able to make the appointment, arrange for transportation to the appointment, and send reminders about the appointment,” Jack says.

The service doesn’t stop with the actual medical care. BoardRounds also works with insurance companies to provide interventions for patients, and provides detailed analytics to hospitals and providers about patients’ post-discharge behaviors, such as appointment completion rates.

“We wanted to make sure that we were always looking at the bigger picture. The analytics piece helps our providers see that as well,” Jack says.

With their software mostly complete, Jack and Mukerjee are focused on raising money and forming partnerships with hospitals and medical providers. To date, they have raised more than $300,000 in seed capital, with backing coming from the Dorm Room Fund — a student-run venture firm that invests in student-run companies — among others. The system is already in place at a major New York City hospital and a dialysis-care center, with new partnerships imminent.

Jack didn’t start his medical training intending to go into business, but he is unusually qualified to do so; before starting at Cornell, he studied applied math at Columbia and worked for two years in finance. Though he hasn’t ruled out practicing medicine at some point, he says that this feels like the best use of his skills right now.

“I went to medical school to save lives. That’s our mission at BoardRounds, too, but on a bigger scale,” he says.