

PulseGuard AI Clinical Performance Metrics

Pilot Measurement Framework for Emergency Department Result Follow-up

Core Performance Indicators

#	Metric	Definition	Target Ladder
1	Closed-Loop Rate (Overall)	Percentage of eligible results with documented follow-up plan AND verified outreach Numerator: Results with documented plan + (order/referral OR patient/PCP message) Denominator: All eligible results detected (imaging incidentals + actionable labs) Exclusions: Duplicates, items marked "No action required"	Baseline: Measure Day 30: +5-10 pts Day 60: +10-15 pts Day 90: ≥95%
2a	Culture Closure Within Threshold	Positive cultures addressed within site-defined time windows Numerator: Positive cultures with plan + outreach within threshold Denominator: All positive culture results Note: Site sets organism-specific thresholds (typically 48-72 hours)	Baseline: Measure Day 30: ≥90% Day 60: ≥93% Day 90: ≥95%
2b	Incidental Closure Within Guideline	Imaging incidental findings with documented follow-up within recommended timeframes Numerator: Incidentals with plan within guideline window Denominator: All eligible incidentals SLA Examples: Urgent = 24h, Routine = 7-14d	Urgent (24h): D30: 90% → D60: 93% → D90: 95% Routine (7-14d): D30: 75% → D60: 85% → D90: 90%
3	Documented Disclosure Rate	Results with explicit disclosure to patient or primary care provider Numerator: Results with disclosure in note or message Denominator: All eligible results detected Note: ICD-10 codes alone without narrative do not qualify	Baseline: Measure Day 30: ≥93% Day 60: ≥96% Day 90: ≥98% Yellow: 95-97%
4	Unreviewed In-Visit Rate	Critical results posted before discharge without acknowledgment Numerator: Pre-discharge results with no acknowledgment Denominator: All results posted	Baseline: Measure Day 30: ≤2% Day 60: ≤1.5% Day 90: ≤1% Trend ↓ required

#	Metric	Definition	Target Ladder
		before discharge Target: Minimize to near-zero	
5	Time to Antibiotic Adjustment	Speed of clinical response to culture sensitivities Calculation: Median hours from sensitivity final to antibiotic change Reporting: Median with interquartile range (IQR) Applies only when adjustment is clinically indicated	Baseline: Measure Day 30: ≤18 hrs Day 60: ≤15 hrs Day 90: ≤12 hrs

Measurement Framework

Performance Bands & Reporting

● **GREEN:** Meets target
 ● **YELLOW:** Within 5 points
 ● **RED:** >5 points off
 ↑↓ Trend arrows
Rolling 7-day medians

Measurement Windows

- **Baseline Period:** 30-60 days pre-pilot (retrospective)
- **Pilot Duration:** 60-90 days continuous monitoring
- **Reporting Cadence:** Weekly KPI snapshots
- **Analysis Unit:** Result-level for KPIs 1-5

Data Sources (FHIR/HL7)

- **Imaging:** DiagnosticReport text + structured recommendations
- **Laboratory:** Observation & microbiology results
- **Clinical Notes:** Encounter documentation
- **Referrals:** ServiceRequest orders to specialty clinics
- **Task States:** PulseGuard rules engine status log
- **Actions:** PulseGuard audit log entries

Pilot Success Criteria

1. **Net improvement vs baseline by Day 90** on closed-loop rate and guideline adherence
2. **Documented safety:** Unreviewed rate down, disclosure trending to 98%
3. **System quality:** Coverage $\geq 85\%$, suppression accuracy $\geq 90\%$
4. **Variance reporting:** Cause codes for gaps (capture issues, staffing, referral delays)

Product KPIs: Pipeline Coverage, Suppression Accuracy

Clinical Ops KPIs: All others (reflect site operations + our assist)

Imaging Incidentals Performance Metrics

#	Metric	Definition & Target	Target Ladder
7	Imaging Pipeline Coverage PRODUCT KPI	Percentage of imaging studies successfully parsed for eligible incidental findings Formula: <code>eligible_incidental_reports / total_imaging_reports</code> Purpose: Validates system capture rate	Day 30: ≥80% Day 60: ≥83% Day 90: ≥85%
8	Incidental Detection Yield	Rate of incidental findings detected per imaging studies Formula: <code>incidentals_detected / total_imaging_reports</code> Benchmark: Site-specific (typically 20-40%) Purpose: Sanity check vs. literature prevalence	Compare to literature 20-40% typical No specific target
9	Guideline Adherence by Urgency	Tiered performance based on clinical urgency Urgent (24h): <code>plans_within_24h / urgent_incidentals</code> Routine (7-14d): <code>plans_within_window / routine_incidentals</code>	Urgent: D30: 90% → D90: 95% Routine: D30: 75% → D90: 90%
10	Task State Distribution	Current status of all incidental finding tasks States: NEW KNOWN_STABLE INTERVAL_CHANGE DUE/OVERDUE REFERRED Formula: <code>count(state) / total_incidental_tasks</code>	Goals: KNOWN_STABLE ↑ DUE/OVERDUE ↓ Week-over-week trend
11	Suppression Accuracy PRODUCT KPI	False positive control for automated suppression rules Formula: <code>true_suppressions_confirmed / total_suppressed</code> Includes: Known stable, duplicates, "no action required"	Month 1: ≥85% Month 2: ≥90% Month 3: ≥90% Show audit n=
12	Referral Handoff Success	Specialty referrals scheduled within SLA (e.g., Nodule Clinic) Formula: <code>referrals_scheduled_within_SLA / total_referrals_created</code> SLA Example: 7-14 days for non-	

#	Metric	Definition & Target	Target Ladder
		urgent Target: $\geq 90\%$	
13	Incidental Disclosure Rate	Imaging incidentals with documented patient/PCP communication Formula: <code>incidentals_with_disclosure / total_incidentals</code> Target: $\geq 98\%$ Evidence: Note narrative or message confirmation	
14	Overdue Recontact Latency	Speed to address overdue incidentals Calculation: Median hours from guideline breach to first outreach Target: ≤ 24 hours and trending down Focus: Recovery velocity for missed windows	

Backlog Recovery Metrics (First 60 Days)

- **Backlog Found:** Historical incidentals identified
- **Backlog Actioned:** % with documented plan (Target $\geq 75\%$)
- **Backlog Scheduled:** % with appointments booked
- **Days to Closure:** Median time to resolve (trend ↓)

Important Note:

PulseGuard tracks and closes loops on documented findings only. We do not discover new radiological findings or make clinical recommendations. All guideline timing displays the site's chosen windows with documentation/evidence standards (plan + order/referral or message). Metrics focus on operational excellence in managing existing, documented results. Targets shown are examples; actual targets are defined by each facility based on their protocols and patient population.