DR.MAXHEALTH

PULSE Evaluation Brief

A governed retrospective evaluation of patient trajectory intelligence

BUILT FOR	US risk-bearing primary care organizations — including ACOs, MSOs, Medicare Advantage–oriented groups, and multisite networks.

Evaluation objective

Determine whether PULSE can reconstruct longitudinal patient records, surface trajectory-based findings with evidence and provenance, and fit a physician-led review workflow. The evaluation is designed to support a clear decision: stop, proceed to a controlled pilot, or expand the assessment.

A deliberately bounded package

ONE POPULATION	ONE CLINICAL QUESTION	ONE REVIEW WORKFLOW
A defined historical cohort agreed with the partner.	A specific trajectory or care-management question selected before analysis.	Named clinical reviewers, review criteria, and a decision gate.

How the evaluation runs

01 Scope and governance

Agree the cohort, question, reviewers, data boundaries, and success criteria.

02 Secure data preparation

Transfer agreed historical inputs and normalize relevant encounters, diagnoses, medications, labs, and notes.

03 Retrospective PULSE run

Generate trajectory-oriented outputs on the agreed historical cases.

04 Clinician adjudication

Qualified reviewers assess findings, omissions, uncertainty, traceability, and workflow fit.

05 Decision report

Document evidence, limitations, and the recommendation to stop, pilot, or expand.

What the partner receives

Five practical deliverables, tied to a pre-agreed decision rather than a generic technology demonstration.

01	**Evaluation plan**	Defined cohort, question, inputs, reviewers, success criteria, and decision gate.
02	**Structured PULSE outputs**	Trajectory-oriented findings produced for the agreed retrospective cases.
03	**Traceability review**	Evidence and provenance assessment for the information supporting each reviewed output.
04	**Findings analysis**	Documented findings, omissions, uncertainty, reviewer feedback, and workflow observations.
05	**Decision report**	A concise recommendation to stop, proceed to a controlled pilot, or expand evaluation.

Success criteria are selected before the work starts

- Traceability and provenance of information supporting reviewed outputs
- Material omissions and how uncertainty is represented
- Physician agreement with relevant trajectory-based findings
- Fit with the partner's intended review and decision workflow

Selection of a criterion does not imply a current performance result. Findings are measured and reported within the agreed evaluation.

Who should be involved

A clinical lead and physician reviewers; a data or integration owner; and appropriate security, privacy, and procurement stakeholders. Dr.MaxHealth's founding team leads scoping, evaluation execution, and the final decision review.

Current boundaries

- PULSE is being evaluated retrospectively; Dr.MaxHealth does not currently publish performance results.
- PULSE does not diagnose, prescribe, or act autonomously. Outputs require review by qualified healthcare professionals.
- This brief does not claim medical-device certification or production integration readiness.
- No patient or clinical data should be submitted through the public website or email.

DISCUSS AN EVALUATION

Bring one population, one clinical question, and the decision you need to make.

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