

10-Day Evidence-Linked Workflow Evaluation

A fixed-scope, side-by-side evaluation for one medical document or coding QA bottleneck. The goal is a measurable go-or-no-go decision - not a production promise.

ONE WORKFLOW

- One repeated review task
- One principal input format
- One accountable output

SAFE STARTING POINT

- Synthetic or appropriately de-identified samples
- No patient data in website forms or introductory email
- Human approval remains required

THE TEN-DAY PATH

DAYS 1-2 Map Define the queue, baseline, safe sample, acceptance criteria and expensive failure modes.	DAYS 3-6 Build Create one working flow with normalization, evidence links, rules and review states.	DAYS 7-9 Evaluate Compare field quality, coverage, exceptions, disagreement and human review time.	DAY 10 Decide Review findings, operating constraints and a written production recommendation.
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BASELINE TO RECORD

- Documents and exceptions per month
- Current minutes per review
- Rework, disagreement and escalation paths
- Failure types with the highest operational cost

EVALUATION DELIVERABLES

- Field-level results linked to source passages
- Coverage, exceptions and failure examples
- Reviewer feedback and measured review time
- Deployment, retention and integration findings

DECISION GATE

Proceed only if the agreed evidence coverage, failure handling, reviewer control and operating fit justify the next step. Stop or redesign when the workflow does not beat the baseline or the data, integration or responsibility boundary is not acceptable.

Boundary: This plan is for workflow evaluation. It is not medical advice, autonomous coding, claim submission, a regulatory certification, or a guarantee of accuracy, savings or reimbursement outcomes.