TOPIC	#	POSTER TITLE	PRESENTING AUTHOR	ORGANIZATION	EMAIL
Ambient AI in Workflows	1	Design and implementation of LLM-powered realtime middleware for EHR enhancement	Duncan McElfresh	Stanford Health	DMcelfresh@stanfordhealthcare.org
	3	Development and seamless integration of an on-premise AI agent for clinical drafting: Insights from the Y-KNOT Project	Hanjae Kim	Yonsei University	oneash082498@gmail.com
	5	Evaluation of ambient artificial intelligence scribe technology in ambulatory care: A pilot study at a large urban academic medical center	Caroline Canning	Rush University	caroline_r_canning@rush.edu
	7	Identifying Goals of Care discussions with large language models	Azadeh Mobasher	Providence	azadeh.mobasher@providence.org
Closing the Loop: Deployment, Drift, and Continual Learning	9	Bridging the deployment gap: Continual learning improves medical AI performance across 22 global institutions	Emma Chen	Harvard Medical School	yingchen@g.harvard.edu
	11	External validation and real-world deployment of an automated machine learning decision support tool that predicts neurosurgical intervention for patients with traumatic brain injury	Armaan Malhotra	University of Toronto	ak.malhotra@mail.utoronto.ca
	13	Safety AI Reporting (SAfeR) – improving hospital incident response with AI	Zachariah Miller	Northwestern Medicine	zachariah.miller@nm.org
	15	Change in machine learning model performance upon retraining after deployment into clinical practice: The real-world effect of model predictions on clinician actions, outcome labels, and the potential for contamination bias	Michael Colacci	University of Toronto	michaelfcolacci@gmail.com
Equity and Access	17	Leveraging AI for equitable healthcare: Predictive modeling to address HIV self-testing disparities in Sub-Saharan Africa	Felix Emeka Anyiam	Durban University of Technology	felixemekaanyiam@gmail.com
	19	Debiased noise editing on foundation models for fair medical image classification	Xiaoxiao Li	The University of British Columbia	xiaoxiao.li@ece.ubc.ca
	21	Leveraging machine learning to establish reference intervals for Hispanic populations	Abiel Roche-Lima	University of Puerto Rico	abiel.roche@upr.edu
	23	Missing diagnoses: Using machine learning to assess racial bias in electronic health records	Divya Shanmugam	Massachusetts Institute of Technology	divyas@mit.edu
From Signal to Insight	25	A deep learning phenome wide association study of the electrocardiogram	Weston Hughes	Columbia University	weh7014@nyp.org
	27	Use of artificial intelligence to improve detection of transthyretin cardiac amyloidosis: A single-arm multicenter trial	Sneha Jain	Stanford University	snehashahjain@stanford.edu
	29	Eyes as windows to health: Integrating an efficient, generalizable AI model into a simple mobile AI retina tracker (SMART) to revolutionize ocular and systemic healthcare	Ramya Elangovan	Carnegie Vanguard High School	airamya@outlook.com
Personalized Treatment and Management	31	Predictive analytics to improve heart failure care using MLOps and a lightweight agile approach	Faraz Ahmad	Northwestern Medicine	faraz.ahmad@nm.org
	33	BactoRisk: Blood culture utilization optimization through a data-driven approach to guide stewardship during critical supply shortages	Ethan Goh	Stanford University	ethangoh@stanford.edu
	35	ALMo: Interactive Aim-Limit-Defined, Multi-objective system for personalized high-dose-rate brachytherapy treatment planning and visualization for cervical cancer	Edward Chen	Stanford University	edjchen@stanford.edu
	37	Enhancing antimicrobial treatment protocols with a retrieval augmented generation large language model: Aiding diagnosis and management of infectious diseases	Hugo Morales	Munai Brazil	hugo@munai.com.br
	39	Application of MATEC (Multi-AI Agent Team Care) framework in sepsis care	Jonathan Woo	Princeton University	jonathan.woo@pennmedicine.upenn.edu
When AI Helps—and When it Hurts	41	Large language model as clinical decision support system augments medication safety in 16 clinical specialties	Jasmine Ong	Singapore General Hospital	jasmine.ong.c.l@sgh.com.sg
	43	Retrieval-augmented models are dangerous medical communicators	Monica Agrawal	Duke University	monica.agrawal@duke.edu
	45	Evaluating LLM reasoning in a real-world clinical oncology practice: A framework to decode errors	Matthew Kenaston	Mayo Clinic College of Medicine	kenaston.matthew@mayo.edu
	47	Protecting patients from problematic predictions: The hidden risks of predictive clinical decision support tools	Joseph Alderman	University of Birmingham	j.e.alderman@bham.ac.uk

Poster Session

SAIL Day 2
May 7, 2025

Group 1
3:00–4:00pm

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TOPIC	#	POSTER TITLE	PRESENTING AUTHOR	ORGANIZATION	EMAIL
Complex Diagnostic Reasoning	**2**	Dual-site external validation of a prospectively validated machine learning model to identify and prevent acute care events during cancer radiotherapy	Marianna Elia	University of California San Francisco	marianna.elia@ucsf.edu
	4	Beyond traditional scoring systems: Developing an AI-powered tool for trauma prognosis	Sally Hong	TraumaCare AI	sally@traumacare.ai
	6	PARK: Harnessing AI for accessible and reliable early screening of Parkinson's disease	Pai Liu	University of Rochester	pliu29@ur.rochester.edu
	8	Development and validation of molecular classifiers for kidney allograft rejection diagnostics using generative synthetic data: A multicenter prospective international study	Alexandre Loupy	Université Paris Cité	alexandreloupy@gmail.com
	10	INTERLACE: Advancing diagnostic excellence for older adults through collective intelligence and imitation learning	Christopher Streiffer	University of Pennsylvania	christopher.streiffer@pennmedicine.upenn.edu
	12	Deep learning algorithms derived from wearable device metrics predict future inflammatory bowel disease flares	Kyung Won Lee	Mount Sinai School of Medicine	kyungwon.lee@mssm.edu
Designing Patient-Centered AI	**14**	Implementation and localization of OpenEMR in Nigerian hospitals: Integrating AI for data mapping and development of the first Hausa language clinical voice chatbot	Hamisu Salihu	Kano Independent Research Center Trust	hamisu.salihu@gmail.com
	16	Translating radiology into patient-friendly video reports with an integrated AI system	Luyang Luo	Harvard Medical School	luyang_luo@hms.harvard.edu
	18	AI simplification of health information needs more than just grade-level reduction	Vishala Mishra	Duke University	vishala.mishra@duke.edu
	20	Provaria Writer: Writing a new pathway for responses to patient messages	Guilford Parsons	Providence	guilford.parsons@swedish.org
	22	Harnessing AI for patient engagement in a study on large language models and Open Notes	Dana Lewis	OpenAPS	Dana@OpenAPS.org
Multimodal and Generalist Foundation Models	**24**	Unified clinical vocabulary embeddings for advancing precision medicine	Ruth Johnson	Harvard Medical School	Ruth_Johnson@hms.harvard.edu
	26	EndoGeneralist: Clinically aligned generalist foundation model for endoscopy	Shreya Johri	Harvard Medical School	sjohri@g.harvard.edu
	28	MedCertAIn: Uncertainty-aware multimodal AI for trustworthy clinical decision support	Leopoldo Julián Lechuga López	New York University	ljl5178@nyu.edu
	30	Clinical decision support using pseudo-notes from multiple streams of EHR data	Simon Lee	University of California Los Angeles	simonlee711@g.ucla.edu
	32	Interpretable bilingual multimodal large language model for diverse biomedical tasks	Xiaomeng Li	The Hong Kong University of Science and Technology	eexmli@ust.hk
Redesigning Evaluation	**34**	Clinic reasoning in medical AI: Evaluating, enhancing, and automating assessment	Liam McCoy, Thomas Buckley, and Ethan Goh	University of Alberta, Harvard Medical School, Stanford University	lmccoy@ualberta.ca thomas_buckley@hms.harvard.edu ethangoh@stanford.edu
	36	Can we assess OSCEs through transcripts alone? A zero-shot AI approach to medical student evaluation	Ameer Hamza Shakur	University of Texas Southwestern	AmeerHamza.Shakur@UTSouthwestern.edu
	38	Governing healthcare's AI transformation: Leadership insights from U.S. health system executives	Ajeet Singh	Rush University	ajeet_singh@rush.edu
	40	Evidence is all you need: Ordering imaging studies via language model alignment with the ACR appropriateness criteria	Michael Yao	University of Pennsylvania	michael.yao@pennmedicine.upenn.edu
When AI Changes Clinical Judgement	**42**	In the absence of gold standards: Defining best practices from collective physician behavior	William Yuan	Boston Children's Hospital & Harvard Medical School	wyuan@fl84inc.com
	44	The AI agent in the room: Informing objective decision making at the transplant selection committee	Mamatha Bhat	University of Toronto	mamatha.bhat@uhn.ca
	46	AICare: An AI–clinician interaction system for transparent and actionable clinical decision support	Junyi Gao	University of Edinburgh	junyi.gao@ed.ac.uk
	48	Human-AI teams to improve accuracy and efficiency of oncology trial prescreening	Likhitha Kolla	University of Pennsylvania	likhitha.kolla@pennmedicine.upenn.edu

Poster Session

SAIL Day 2
May 7, 2025

Group 2
4:00–5:00pm

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