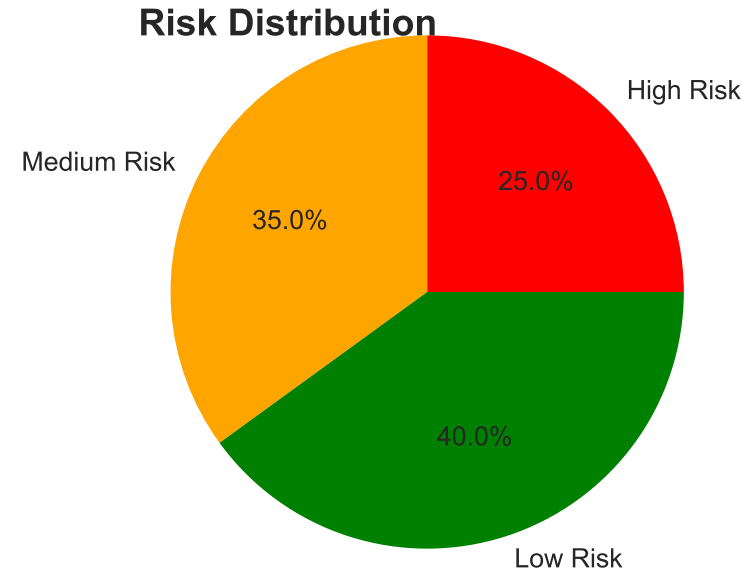
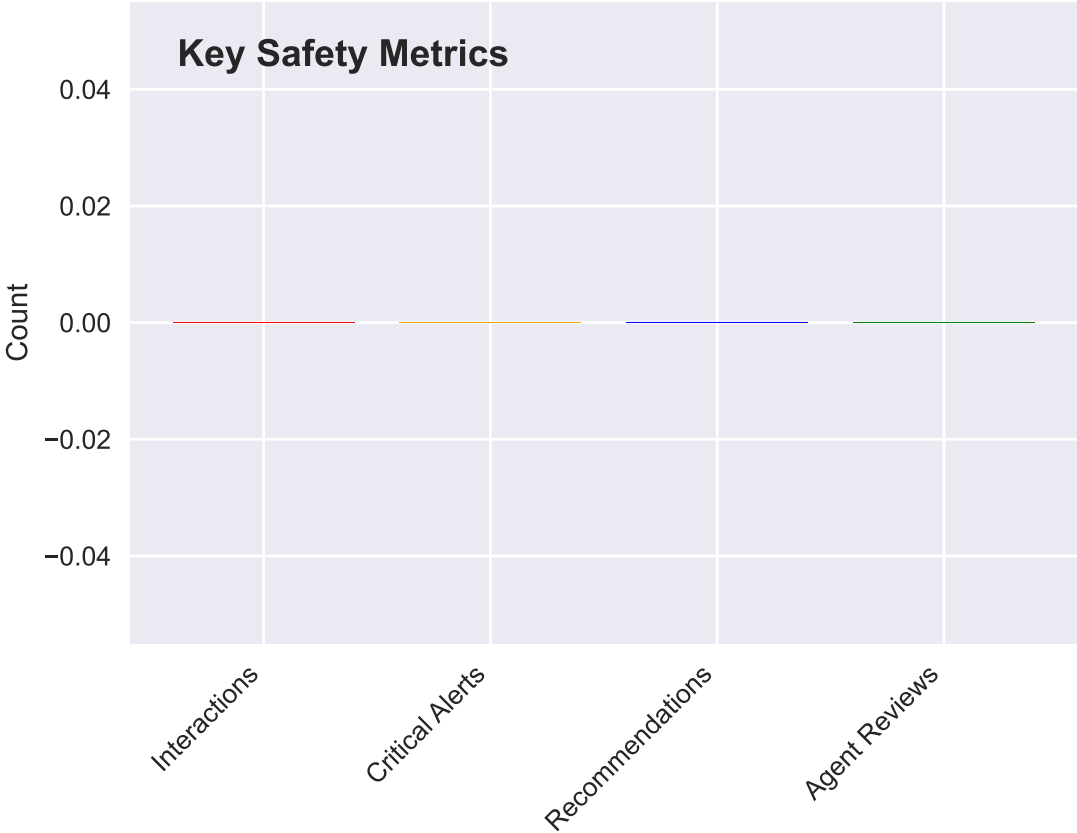


Drug Safety Analysis - Executive Summary

Patient Overview

Name: Sarah Johnson
Age: 72
Medications: 5
Conditions: 5
Risk Level: HIGH

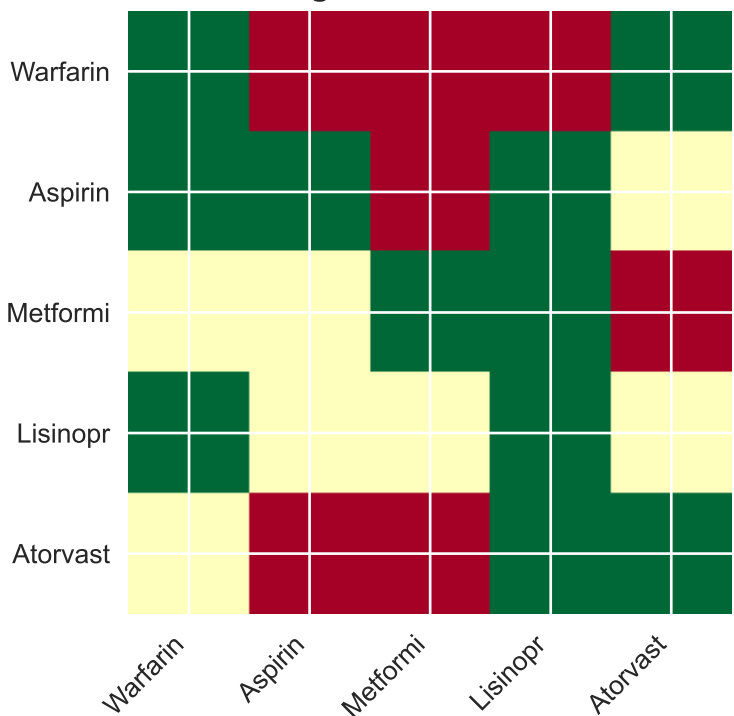


Immediate Actions Required

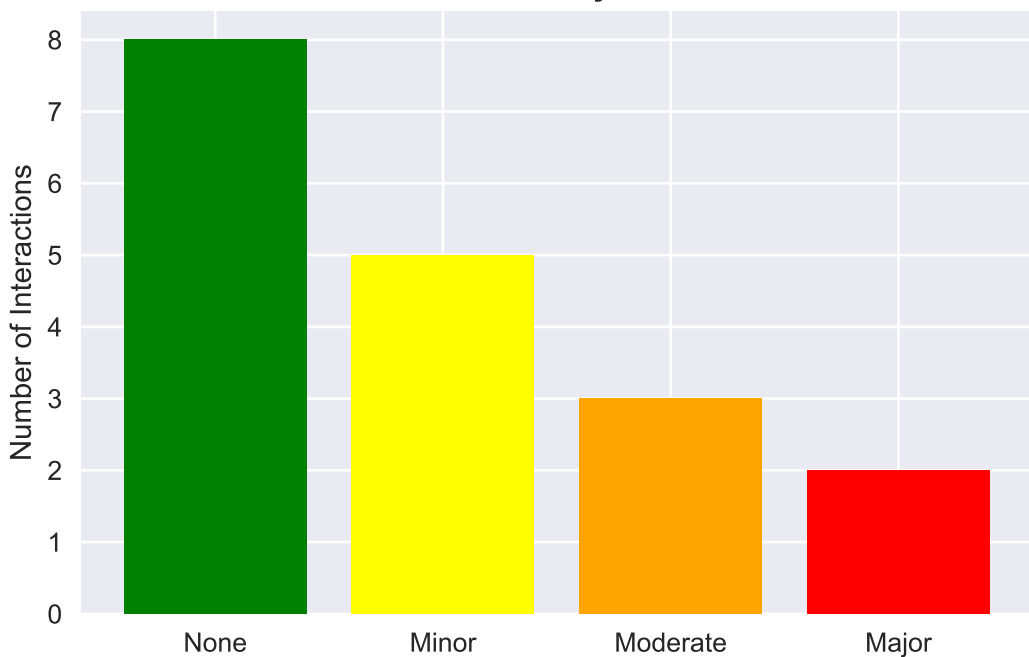
- Review Warfarin-Aspirin interaction
- Adjust Metformin dosing for renal function
- Schedule follow-up in 2 weeks
- Monitor INR levels closely
- Patient education on drug interactions

Drug Interaction Analysis

Drug Interaction Matrix



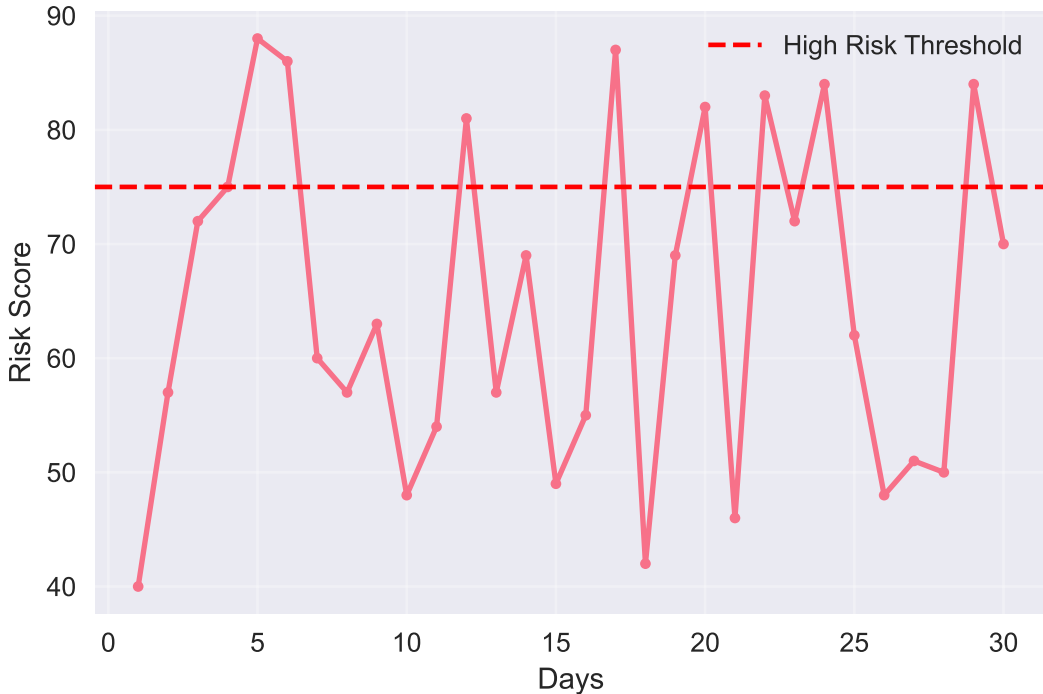
Interaction Severity Distribution



Critical Drug Interactions

1. Warfarin + Aspirin: Bleeding Risk
2. Metformin + Contrast: Lactic Acidosis
3. ACE Inhibitor + Potassium: Hyperkalemia
4. Statin + Grapefruit: Increased Levels
5. Beta Blocker + Insulin: Hypoglycemia

Interaction Risk Over Time

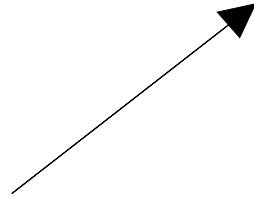


Risk Assessment Dashboard

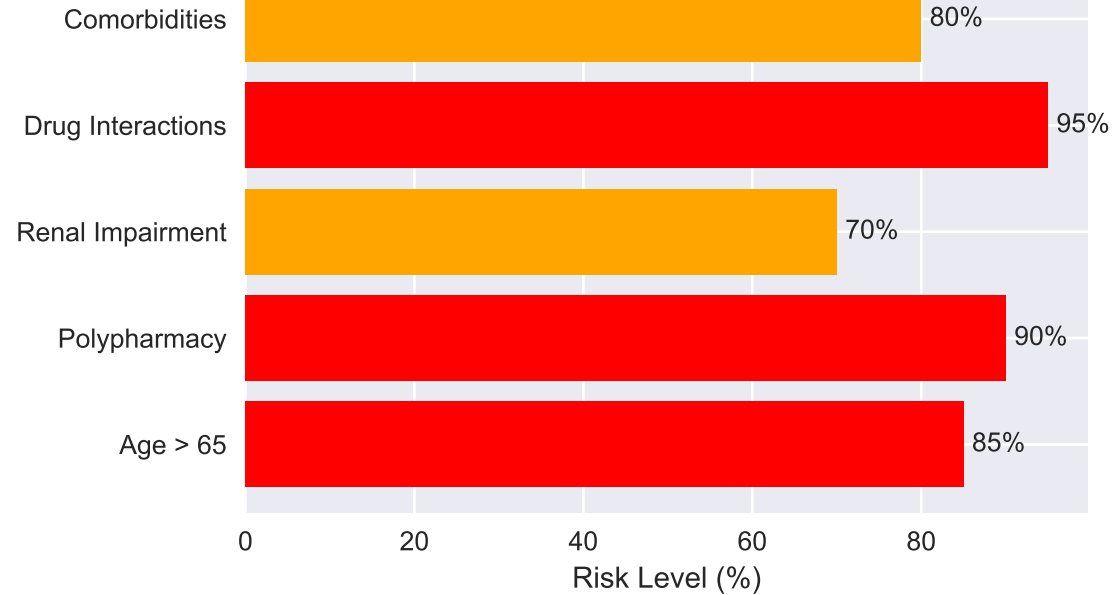
Overall Risk Score



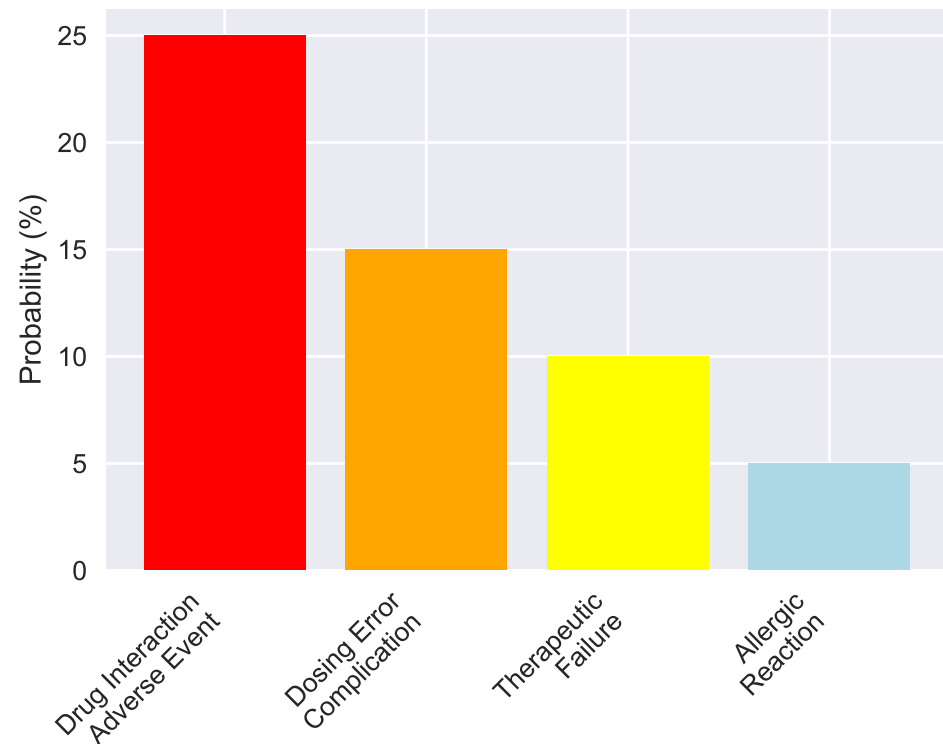
Risk Score: 78%



Risk Factor Analysis



Adverse Event Probability



Risk Mitigation Strategies

1. Implement drug interaction checking system
2. Regular medication reconciliation
3. Patient education on drug interactions
4. Dose adjustment based on renal function
5. Enhanced monitoring protocols
6. Pharmacist consultation integration

Multi-Agent Consultation Results

AI Agent Consultation Summary

Recommendations & Action Plan

Immediate Actions (Next 24-48 Hours)

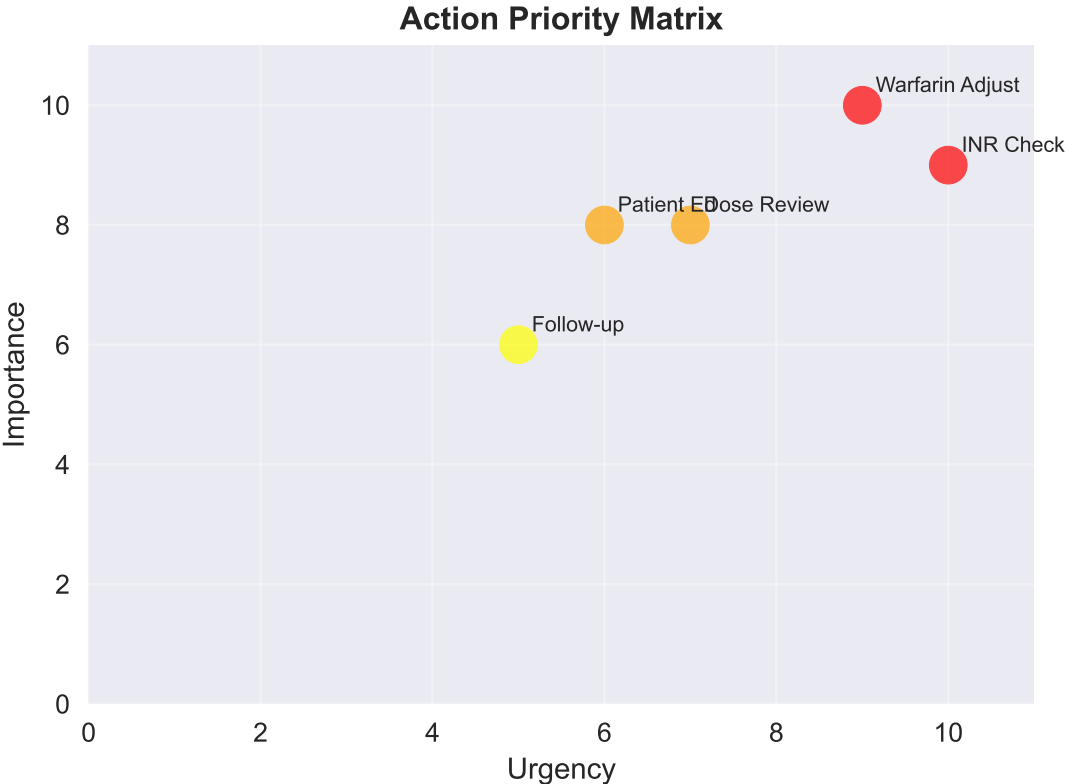
- Discontinue Aspirin immediately
- Reduce Warfarin dose by 25%
- Schedule urgent INR check
- Contact patient about bleeding risks
- Pharmacist consultation within 24h

Short-term Actions (Next 1-2 Weeks)

- Adjust Metformin dose for renal function
- Implement medication timing schedule
- Patient education session
- Follow-up appointment scheduling
- Lab work monitoring plan

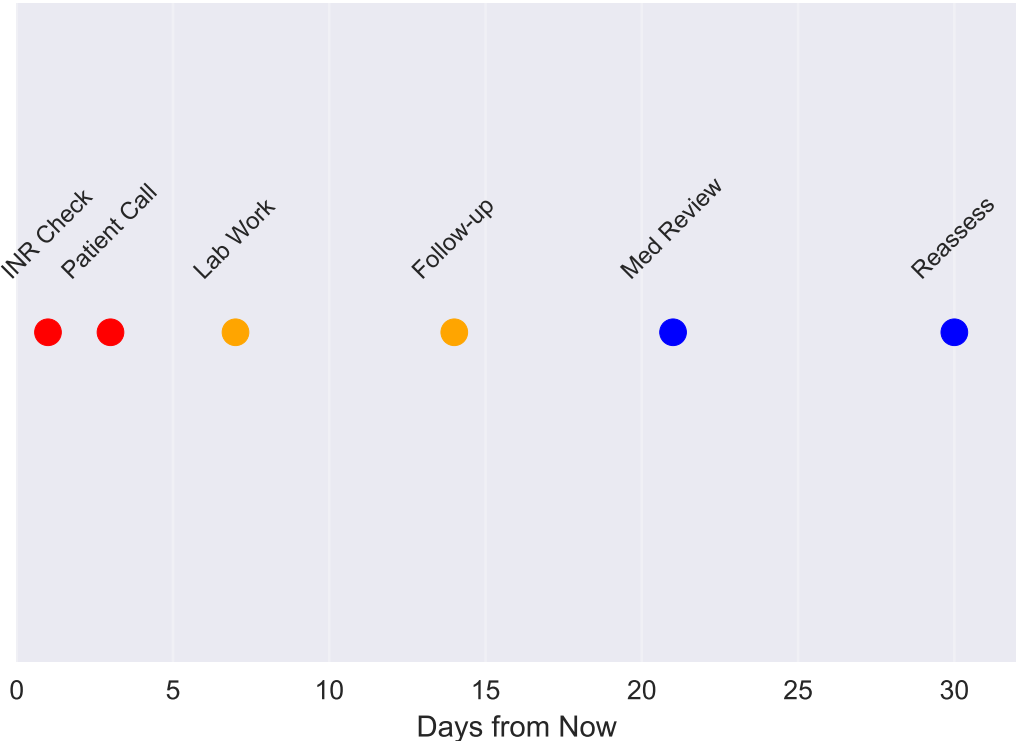
Long-term Plan (Next 1-3 Months)

- Complete medication review
- Establish monitoring protocols
- Patient self-management training
- Care team coordination
- Outcome assessment



Monitoring Schedule & Follow-up Plan

Monitoring Timeline (Next 30 Days)



Laboratory Monitoring Schedule

- INR: Daily x 3, then weekly
- Creatinine: Weekly x 4
- Liver Function: Monthly
- CBC: Baseline, then PRN
- Electrolytes: Weekly x 2

Patient Contact Schedule

Day 1: Immediate phone call - discuss changes

Day 3: Follow-up call - check for side effects

Week 1: Nurse check-in - medication adherence

Week 2: Provider visit - clinical assessment

Month 1: Comprehensive review - full evaluation

Emergency Contact Protocols

☐ BLEEDING SIGNS:

- Unusual bruising or bleeding
- Blood in urine/stool
- Severe headache
- Excessive fatigue

☐ EMERGENCY CONTACTS:

- Provider: (555) 123-4567
- Pharmacy: (555) 987-6543
- 24hr Nurse Line: (555) 246-8135