

Key Strengths of This Prompt:

Medical Safety Focus: Includes essential disclaimers emphasizing this is for healthcare professionals only and requires clinical judgment.

Clinical Complexity Recognition: Goes beyond simple "bacteria → antibiotic" matching by requiring essential clinical context like infection site, severity, patient factors, and local resistance patterns.

Sanford Guide Integration: References the current Sanford Guide (2024-2025 editions) as the primary evidence base, which is the leading clinical treatment guide for infectious diseases used by physicians, pharmacists, and other clinicians (Sanfordguide) (Sanford Guide).

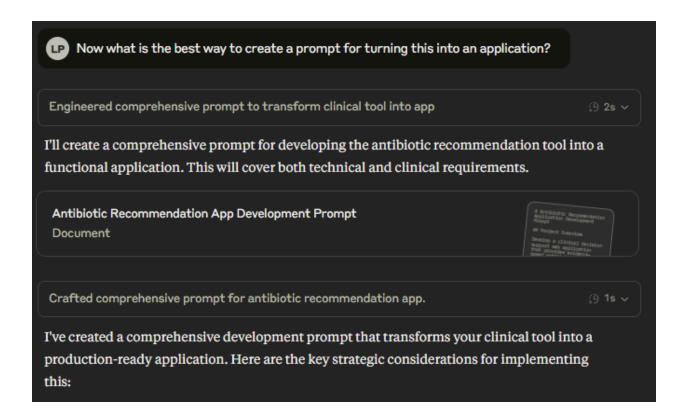
Structured Approach: Provides a systematic framework for gathering information and delivering recommendations with primary/alternative options, special considerations, and clinical pearls.

Quality Assurance: Built-in checks to ensure appropriate recommendations and prevent errors.

Important Considerations:

- Legal/Ethical Compliance: The prompt emphasizes this is clinical decision support, not medical diagnosis, and requires healthcare provider interpretation.
- Clinical Reality: Antibiotic selection involves many factors beyond pathogen identification - infection site, severity, patient allergies, renal function, local resistance patterns, and more.
- 3. **Current Guidelines**: References updated treatment recommendations for highly resistant bacteria and evolving guidelines (2025 Pocket Edition | Sanf...) that are constantly being updated.
- Antimicrobial Stewardship: Incorporates principles of responsible antibiotic use, culture-guided therapy, and de-escalation strategies.

Would you like me to modify any aspect of this prompt or add specific features for your intended use case?



Development Approach Options

Option 1: Custom Development

Best for: Full control, unique features, long-term scalability

- Use the full prompt above with a development team
- · Timeline: 12-18 months for complete implementation
- Cost: \$500K-\$2M depending on features and team

Option 2: Low-Code Platform

Best for: Faster deployment, lower initial cost

- · Platforms like Mendix, OutSystems, or Microsoft Power Platform
- · Adapt the prompt for low-code constraints
- Timeline: 3-6 months for MVP
- · Cost: \$50K-\$200K initial development

Option 3: AI-Assisted Development

Best for: Rapid prototyping, modern tech stack

- · Use Claude or other coding assistants with this prompt
- · Build incrementally with continuous feedback
- Timeline: 2-4 months for MVP
- Cost: \$20K-\$100K with internal team

Critical Implementation Priorities

1. Start with Safety Features

- · Implement disclaimers and user verification first
- · Build in multiple validation checkpoints
- · Create comprehensive error handling

2. Begin with Core Pathogen Database

- · Focus on most common 50-100 pathogens initially
- · Ensure data accuracy before expanding
- · Plan for regular content updates

3. Design for Scalability

- · Use microservices architecture
- · Plan for EMR integration from day one
- · Build API-first approach

Key Technical Decisions

Database Choice: PostgreSQL for complex relational data with JSON support for flexible clinical data

Frontend Framework: React with TypeScript for type safety in medical applications

Cloud Platform: AWS or Azure for HIPAA compliance and healthcare industry trust

Authentication: Integration with professional credentialing systems (NPI database verification)

Regulatory Considerations

- FDA Guidance: May need to comply with Software as Medical Device (SaMD) regulations
- Clinical Validation: Requires clinical advisory board and validation studies
- Professional Liability: Consider insurance and liability implications
- State Licensing: May need to verify users' licensing in their practice state

Would you like me to create a more specific prompt for any particular development approach (custom, low-code, or AI-assisted), or would you prefer guidance on getting started with a specific aspect like the database design or user interface mockups?



P Yes. I would like a prompt for a low-code, AI-assisted application. If possible, I would like for this to be created using a cellphone for quick prototyping.

Engineered mobile-friendly, Al-assisted antibiotic recommendation app prototype.



I'll create a prompt specifically for mobile-first, low-code development with AI assistance. This will focus on rapid prototyping while maintaining essential safety features.

Mobile Low-Code Antibiotic App Prompt Document



Perfect! I've created a mobile-focused, low-code development prompt that you can literally start implementing today on your phone. Here are the key advantages of this approach:

Quick Start Options (Pick One to Begin Today):

Option 1: Glide Apps (Recommended for Beginners)

- · Download Glide app on your phone
- · Start with a Google Sheet of common bacteria
- · Build and test directly on mobile
- **Timeline**: Working prototype in 2-3 hours

Option 2: Bubble.io (Most Powerful)

- · Has mobile editor for development
- · More advanced features possible
- Timeline: Basic version in 1-2 days

Option 3: Adalo (Best Mobile Feel)

- · Native mobile app experience
- · Intuitive drag-and-drop interface
- Timeline: Working app in 4-6 hours

Immediate Action Plan:

Next 30 Minutes:

- 1. Use Claude to generate your initial bacteria dataset
- 2. Choose your platform and create account
- 3. Set up basic data structure

Next 2 Hours:

- 1. Build pathogen search screen
- 2. Test basic functionality on your phone
- 3. Get feedback from one colleague

This Week:

- 1. Add clinical context form
- 2. Implement basic recommendation logic
- 3. Test with real scenarios

AI Assistance Throughout:

The prompt includes specific AI prompts for:

- Data Generation: "Create CSV of 50 common pathogens..."
- UI Design: "Generate mobile wireframes..."
- Logic Building: "Write conditional logic for recommendations..."
- · Content Creation: "Generate medical disclaimers..."

Key Mobile Advantages:

Immediate Testing: Test usability in real clinical environments right away TouchOptimized: Designed for one-handed operation during patient care Offline Capable: Core
recommendations available without internet Fast Deployment: Share with colleagues via
simple web link

Safety Features Maintained:

Even in this rapid prototype approach, the prompt ensures:

- · Prominent medical disclaimers
- · Healthcare professional verification
- · Essential clinical context gathering
- · Clear limitations and warnings

Would you like me to help you get started with any specific platform, or would you prefer me to generate the initial bacteria dataset using AI to kick off your development process right now?