

Decision Agent - Risk Fusion & Alert Generation

Overview

The Decision Agent is the final layer of the multi-agent system. It fuses outputs from all three upstream agents (Sensor, Patient, Clinical) to calculate a global risk score and make intelligent alert decisions.

Core Responsibility

"Should we bother a human?"

The Decision Agent answers this by:

1. Combining all risk signals
2. Requiring persistence (no single-spike alerts)
3. Managing alert cooldowns (prevent fatigue)
4. Generating explainable decisions

Fusion Formula

$$\begin{aligned} \text{global_risk} = & \alpha \times \text{physio_risk} \times \text{sensor_confidence} \\ & + \beta \times \text{normalized_sensitivity} \times \text{patient_confidence} \\ & + \gamma \times \text{clinical_risk} \times \text{clinical_confidence} \end{aligned}$$

Where:

$\alpha = 0.5$ (50% weight on real-time physiology)

$\beta = 0.3$ (30% weight on personal context)

$\gamma = 0.2$ (20% weight on static medical history)

Component Breakdown

Sensor Component (50%):

- `physio_risk`: Arrhythmia + HRV irregularity score (0-1)
- `sensor_confidence`: ECG signal quality (0-1)
- Real-time, changes every 2 seconds

Patient Component (30%):

- `sensitivity_factor`: 0.8-1.3 mapped to 0-1
- `patient_confidence`: Days tracked / 30 (0-1)
- Personal context, adapts daily

Clinical Component (20%):

- `clinical_risk`: Logistic regression output (0-1)
- `clinical_confidence`: Always 1.0 (static data)
- Baseline vulnerability, changes manually

Decision Logic

Three Decision Levels

1. NO_ALERT (Green)

- Global risk < 0.5
- Everything within normal range
- Continue monitoring

2. MONITOR (Orange)

- Global risk ≥ 0.5 for 3+ consecutive readings
- Elevated but not critical
- Watch for escalation

3. ALERT (Red)

- Global risk ≥ 0.7 for 5+ consecutive readings
- Critical risk sustained over time
- Action required

Persistence Requirements

Why? Prevent false alarms from single-spike measurements.

- **Monitor:** Requires 3 consecutive readings above 0.5
- **Alert:** Requires 5 consecutive readings above 0.7

Reading: 0.6 0.7 0.6 0.8 0.75 0.78 0.72 0.74

Counter: 1 2 0 1 2 3 4 5

Decision: NO NO NO NO NO MONITOR MONITOR ALERT

Alert Cooldown

Why? Prevent alert fatigue and spam.

- **Duration:** 30 minutes after each alert
- **Behavior:** System continues monitoring but won't trigger new alerts
- **Display:** Shows countdown timer in UI

Time: 12:00 12:10 12:20 12:30 12:35

Risk: 0.8 0.85 0.82 0.78 0.76

Alert: ✓ ✗ ✗ ✗ Ready

ALERT COOLDOWN COOLDOWN COOLDOWN Can alert again

Explanation Generation

Every decision must be explainable. The system answers:

1. What changed?

- Risk level: CRITICAL (>85%) or HIGH (70-85%)
- Global risk percentage

2. Compared to what baseline?

- Patient's personal norms
- Clinical risk factors

3. For how long?

- Number of consecutive high-risk readings
- Minimum required for alert

4. Why now?

- Specific contributors (arrhythmia, behavioral state, clinical factors)
- Protective factors if any

Example Alert Explanation

 HIGH RISK DETECTED (78%)

Contributors:

- Physiological: arrhythmia probability 65%, irregular rhythm detected
- Behavioral: Patient state is DEGRADED (sensitivity 1.15x normal)
- Clinical: High baseline risk (60%) from medical history

Sustained for 5 consecutive readings (minimum 5 required)

 Patient has shown concerning behavioral patterns over recent days

 RECOMMENDATION: Contact healthcare provider or seek immediate evaluation

API Endpoints

GET /api/decision/current

Current decision status:

```
json

{
  "consecutive_monitor": 2,
  "consecutive_alert": 0,
  "in_coldown": false,
  "time_until_ready_minutes": null,
  "total_alerts": 3,
  "total_monitors": 15,
  "last_decision": {
    "global_risk": 0.52,
    "decision": "MONITOR",
    "explanation": "...",
    "components": { ... }
  },
  "alert_history_count": 3
}
```

GET /api/decision/alerts?limit=10

Alert history:

```
json
```

```
{  
  "alerts": [  
    {  
      "alert_id": 1,  
      "timestamp": "2025-12-27T10:30:00",  
      "global_risk": 0.78,  
      "decision": "ALERT",  
      "explanation": "...",  
      "components": {  
        "sensor_risk": 0.65,  
        "patient_sensitivity": 1.15,  
        "clinical_risk": 0.60  
      },  
      "acknowledged": false  
    }  
  ]  
}
```

POST /api/decision/acknowledge/{alert_id}

Mark alert as acknowledged:

```
json
```

```
{  
  "success": true  
}
```

GET /api/decision/trend

Recent risk trend for visualization:

```
json
```

```
{  
  "trend": [  
    { "timestamp": "2025-12-27T10:25:00", "risk": 0.45 },  
    { "timestamp": "2025-12-27T10:27:00", "risk": 0.52 },  
    { "timestamp": "2025-12-27T10:29:00", "risk": 0.58 }  
  ]  
}
```

Integration Flow

Every 2 seconds:

```
Sensor Agent outputs → physio_risk, confidence
↓
Patient Agent state → sensitivity_factor, confidence
↓
Clinical Agent state → clinical_risk, confidence
↓
Decision Agent fuses inputs
↓
Calculates global_risk
↓
Checks persistence counters
↓
Checks cooldown status
↓
Makes decision (NO_ALERT / MONITOR / ALERT)
↓
Generates explanation
↓
Updates UI + logs if ALERT
```

Alert Management

Alert History

- Stores last 100 alerts
- Tracks acknowledgment status
- Provides full context for each alert

Alert Acknowledgment

Users can acknowledge alerts to:

- Indicate they've reviewed the alert
- Clear visual indicators
- Track response patterns

Acknowledged alerts:

- Remain in history
- Display with reduced opacity
- Show acknowledgment timestamp

Persistent State

Stored in `(data/decision_state.json)`:

```
json

{
  "patient_id": "patient_001",
  "created_date": "2025-12-01T00:00:00",
  "last_decision": { ... },
  "alert_history": [ ... ],
  "recent_risks": [ ... ],
  "consecutive_monitor": 2,
  "consecutive_alert": 0,
  "last_alert_time": "2025-12-27T10:30:00",
  "total_alerts": 3,
  "total_monitors": 15
}
```

Design Principles

1. Conservative by Default

- High thresholds (0.7 for alerts)
- Requires sustained elevation (5 readings)
- 30-minute cooldown between alerts

2. Explainability First

- Every decision has clear reasoning
- Specific contributors identified
- Recommendations provided

3. No Single-Spike Alerts

- Persistence requirements prevent false alarms
- Tracks consecutive readings
- Resets counter when risk drops

4. Alert Fatigue Prevention

- Cooldown period enforced
- Visual countdown in UI
- Balances vigilance with usability

5. Actionable Intelligence

- Alerts include recommendations
- Clear severity levels
- Context from all agents

Tuning Parameters

Can be adjusted based on patient population:

```
python

# Fusion weights
alpha = 0.5 # Sensor weight
beta = 0.3 # Patient weight
gamma = 0.2 # Clinical weight

# Thresholds
MONITOR_THRESHOLD = 0.5 # 50%
ALERT_THRESHOLD = 0.7 # 70%

# Persistence
MONITOR_PERSISTENCE = 3 # readings
ALERT_PERSISTENCE = 5 # readings

# Cooldown
ALERT_COOLDOWN_MINUTES = 30
```

Example Scenarios

Scenario 1: Sudden Arrhythmia

Time: 10:00 - Patient at rest, sudden arrhythmia detected

Reading 1: physio_risk=0.65, global_risk=0.58 → NO_ALERT (needs persistence)

Reading 2: physio_risk=0.68, global_risk=0.61 → NO_ALERT (count=2)

Reading 3: physio_risk=0.72, global_risk=0.65 → MONITOR (count=3, threshold met)

Reading 4: physio_risk=0.75, global_risk=0.68 → MONITOR (count=4)

Reading 5: physio_risk=0.78, global_risk=0.72 → ALERT (count=5, alert triggered)

Result: Alert after 10 seconds of sustained elevation

Scenario 2: Patient in DEGRADED State

Patient Agent: DEGRADED state (sensitivity=1.15)

Lower sensor risk triggers alert faster:

- Normal patient needs physio_risk=0.8 for alert
- DEGRADED patient needs physio_risk=0.6 for alert

Personalization in action!

Scenario 3: False Alarm Prevention

Reading 1: global_risk=0.75 → count=1

Reading 2: global_risk=0.72 → count=2

Reading 3: global_risk=0.48 → count=0 (RESET, single spike filtered out)

No alert triggered - transient elevation ignored

Success Metrics

The Decision Agent is successful if:

- Detects sustained abnormalities (not transient)
- Reduces false alarm rate
- Provides clear, actionable explanations
- Adapts to individual patient context
- Prevents alert fatigue

Accuracy alone is NOT the goal - the goal is **useful, trustworthy alerts** that help patients without overwhelming them.