



Prashanth Rao

AI Engineer
Kùzu Inc.



Dennis Irorere

Data Engineer
Tripadvisor

Agentic Workflows for Graph RAG: Building Production-Ready Knowledge Graphs

Virtual | **July** 16-31

3 Trainings: Agentic Workflows for Graph RAG

- July 17: Designing for Production
 - Need for Agentic Workflows
 - Agentic for Graph Schemas
 - Intro to BAML
- **Today: Building Production-Ready Knowledge Graphs**
 - Hands-on implementation
 - Full Graph RAG loop
 - Intro to G.V(), Kuzu, LanceDB
- July 30: Evaluating & Benchmarking Results
 - How to measure success
 - Monitoring and improvement
 - Intro to Opik and ADK



Tools Used

- BAML: Structured Output
- Kuzu: Graph database
- LanceDB: Vector Database
- G.V(): Graph Visualization



kùzu



G.V()

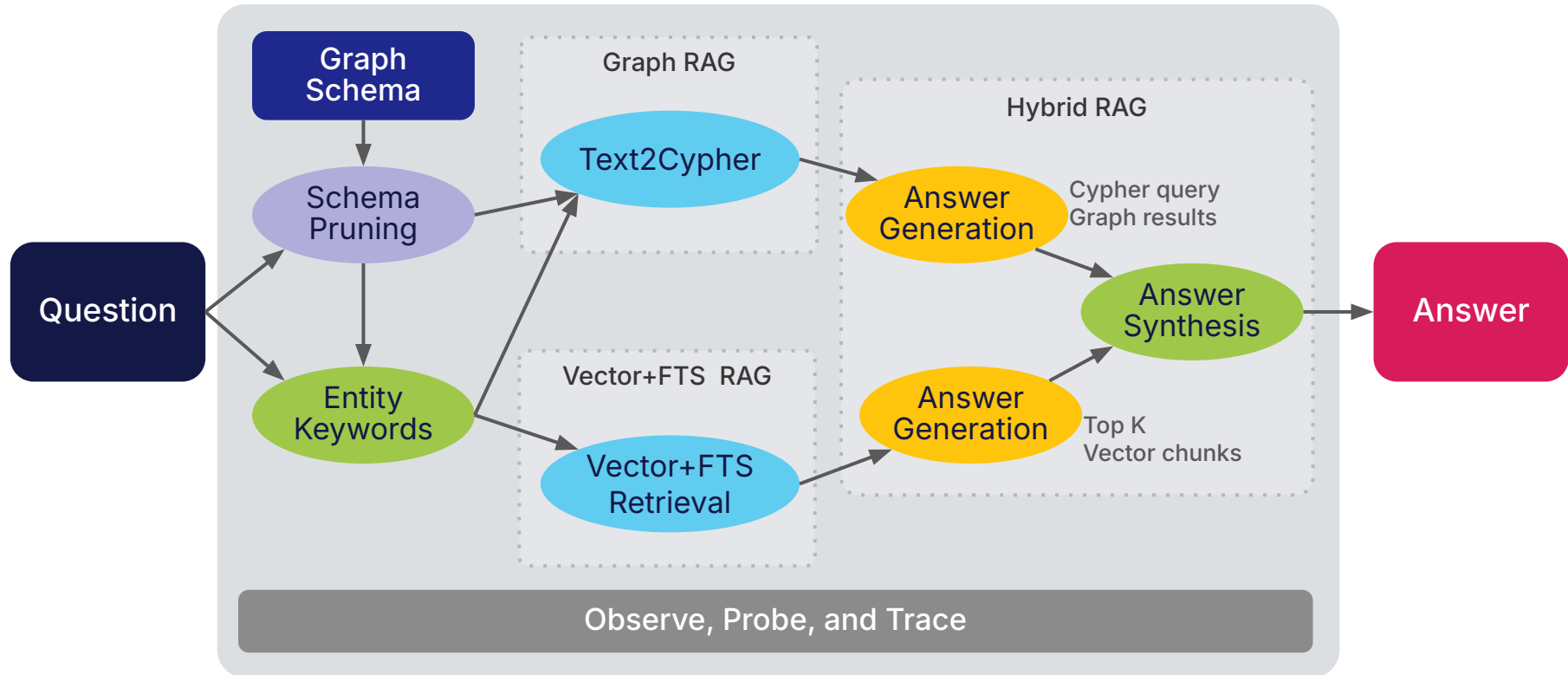


LanceDB

Agentic Graph RAG

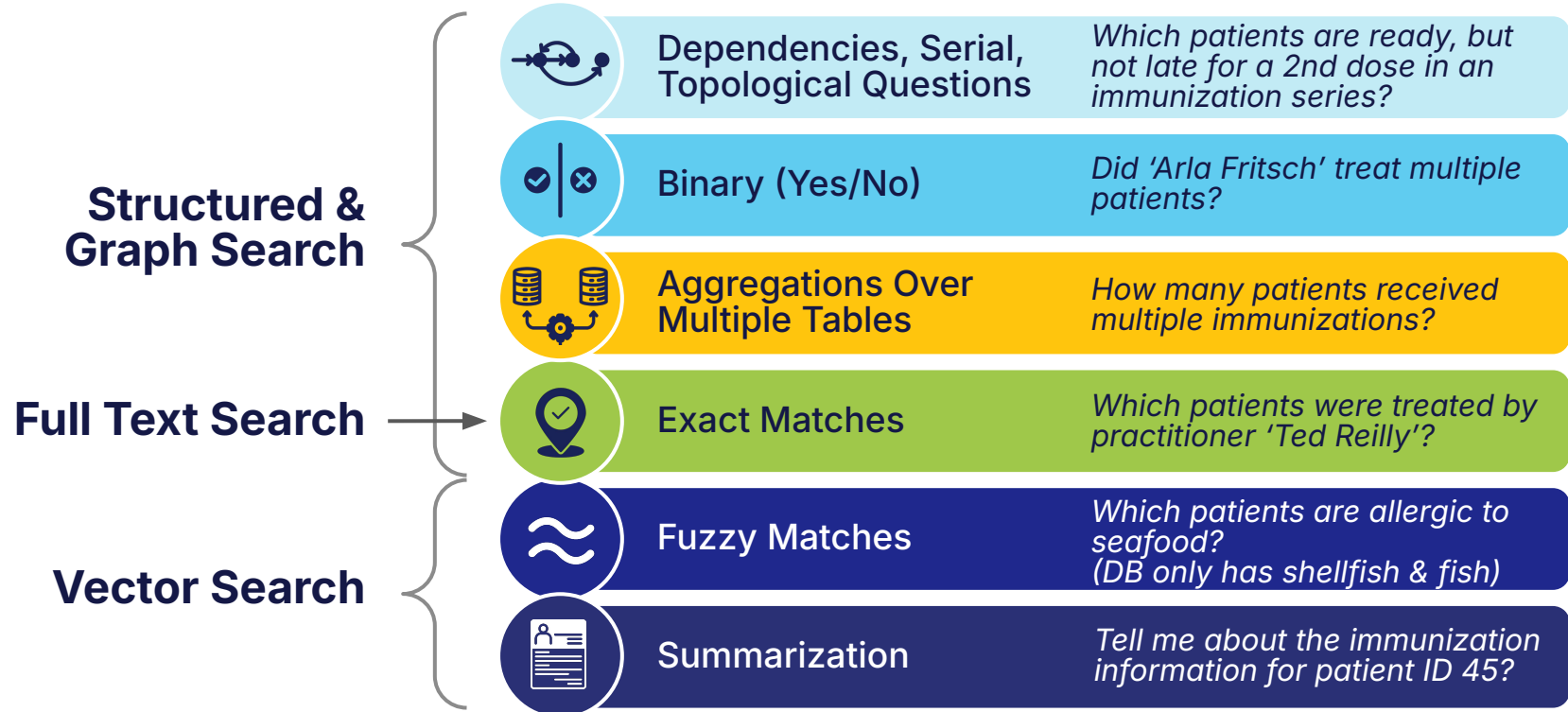


Our Graph & Hybrid RAG Workflow



Good RAG Has Multiple Components

Best tools for the job also happen to be better together



Why Graph for Specialized Knowledge

Context is clear

Paths & Relationship,
not paragraphs

Domain Specificity

Schema Enforces
Domain semantics

Explainability

Cypher and Graph is
auditable

Reasoning Control

Agent choose paths
fallback on structure
and schema transversal



Graph RAG for Specialized Knowledge



Use Case: FHIR Health Care Data



Business Questions

**Which practitioners treat the most patients with
seafood allergy in Massachusetts**



What is FHIR

Unstructured Data → Graphs → RAG

Fast Healthcare Interoperability Resources (FHIR)
Standard defines how healthcare information can
be exchanged between system

<https://hl7.org/fhir>

Challenges FHIR Solves?

- Reduces healthcare data complexity
- Remove barriers to healthcare data exchange.

Fast Healthcare Interoperability Resources (FHIR)



[Home](#) [Getting Started](#) [Documentation](#) [Data Types](#) **[Resource Types](#)** [Terminologies](#) [Artifacts](#) [Implementation Guides](#)

Home

This page is part of the FHIR Specification (v5.0.0: R5 - STU). This is the current published version. For a full list of available versions, see the [Directory of published versions](#).
Page versions: **R5** [R4B](#) [R4](#) [R3](#) [R2](#)


0 Welcome to FHIR®

FHIR is a standard for health care data exchange, published by HL7®.

First time here?

See the [executive summary](#), the [developer's introduction](#), [clinical introduction](#), [patient introduction](#), or [architect's introduction](#), and then the [FHIR overview & how FHIR versions work](#). See also the [open license \(CC0\)](#) (and don't miss the full [Table of Contents](#) and the [Community Credits](#) or you can [search this specification](#)).

Fast Healthcare Interoperability Resources (FHIR)



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Page versions: **R5** R4B R4 R3 R2


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Level 1 Basic framework on which the specification is built

 Foundation	Base Documentation, XML, JSON, RDF, Datatypes, Extensions
---	---






Level 2 Supporting implementation and binding to external specifications

 Implementer Support	 Security & Privacy	 Conformance	 Terminology	 Exchange
Downloads, Version Mgmt, Use Cases, Testing	Security, Consent, Provenance, AuditEvent	StructureDefinition, CapabilityStatement, ImplementationGuide, Profiling	CodeSystem, ValueSet, ConceptMap, Terminology Svc	REST API + Search Documents Messaging Services Databases Subscriptions

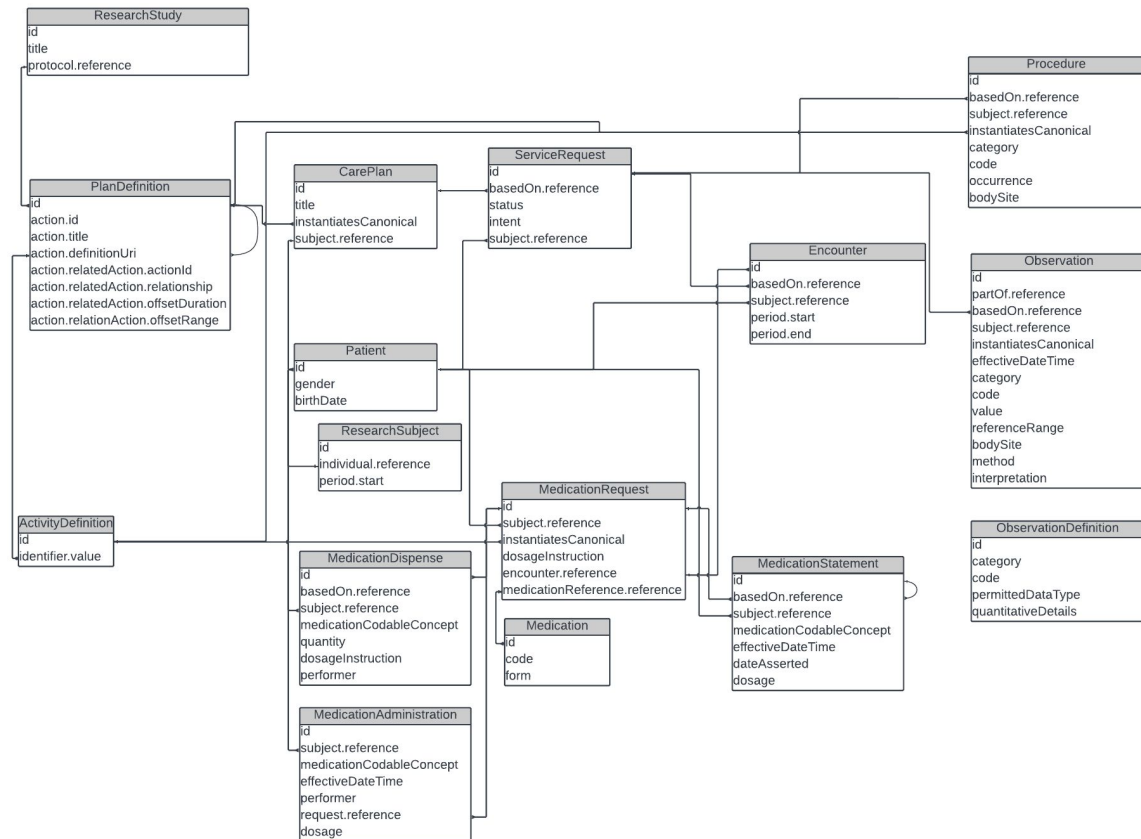
Level 3 Linking to real-world concepts in the healthcare system

 Administration	Patient, Practitioner, CareTeam, Device, Organization, Location, Healthcare Service
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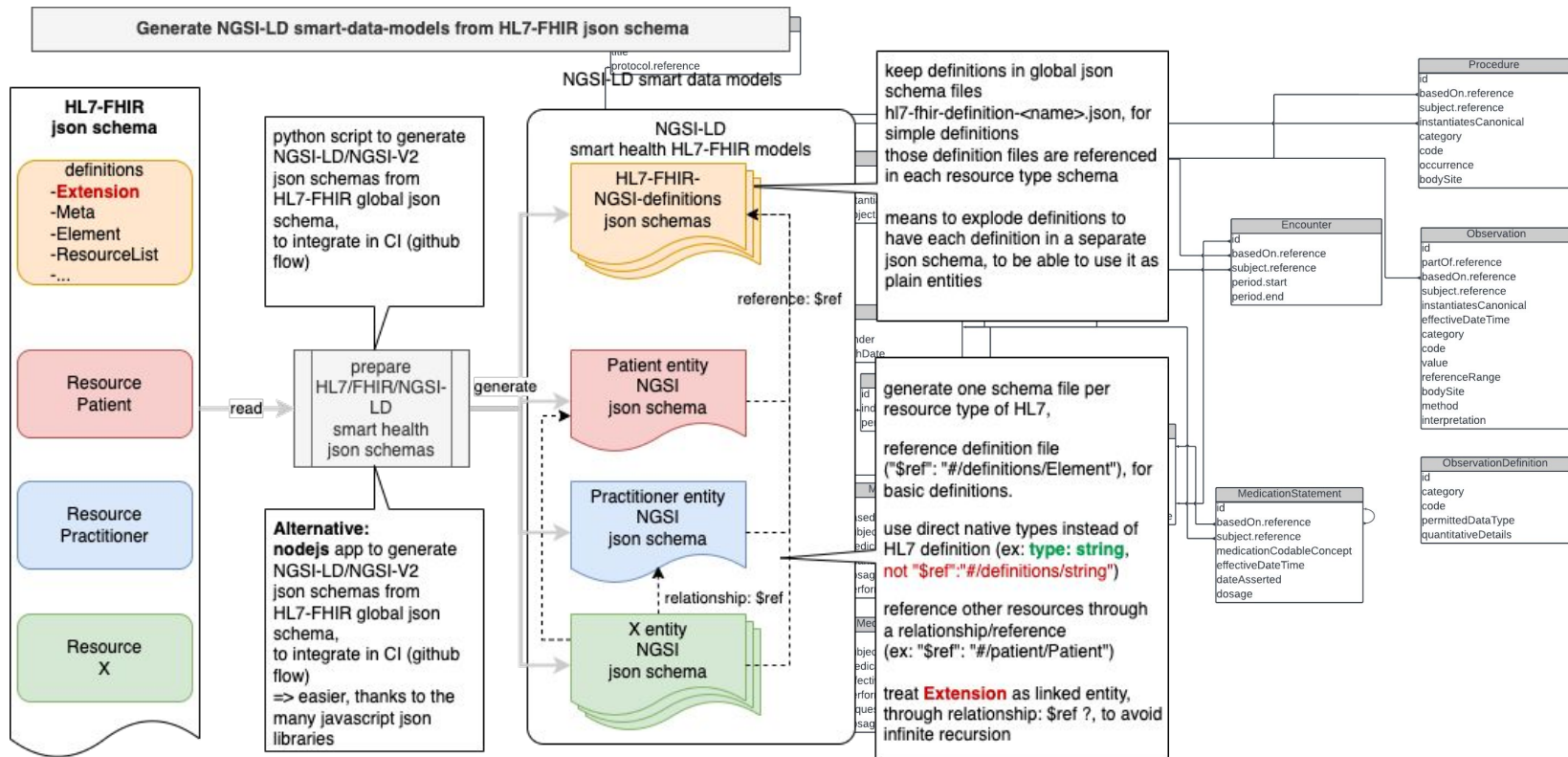
Level 4 Record-keeping and Data Exchange for the healthcare process

 Clinical	 Diagnostics	 Medications	 Workflow	 Financial
Allergy, Problem, Procedure, CarePlan/Goal, Family History, RiskAssessment, etc.	Observation, Report, Specimen, ImagingStudy, Genomics, etc.	Medication, Request, Dispense, Administration, Statement, Immunization, etc.	Introduction + Task, Appointment, Schedule, Referral, PlanDefinition, etc.	Claim, Account, Invoice, ChargeItem, Coverage + Eligibility Request & Response, ExplanationOfBenefit, etc.

FHIR Schema



FHIR Schema (as JSON)



Sample Template

SOAP Note Sample

NUR 4050: Critical Care
Clinical Experience Form
Date:

Student's Name:
Patient's Initials: S.M.

Patient Demographics	Reason for this Visit	Assessment and Interventions Done Today
Include age, gender, ethnicity, occupation and other demographics, PMH/PSH, medications, allergies pertinent to the health status.	Identify why the patient is at the site today. When possible use the patient's words/chief complaint.	Use SOAP format for the assessment data. Identify interventions done today, and anticipated before or @ next visit (e.g., procedures employed, medications prescribed, pt ed., referrals or support systems enacted). Interventions should relate to the reason for the visit as well as the health risk, health alteration and demographics of the patient. Include medical and nursing dx.
<p>S.M. an 88 yo male Caucasian, is retired and lives with his wife in their one-story home.</p> <p>PMHx: hx of falls; unruptured cerebral aneurysm; legally blind; cellulitis; peripheral vascular disease</p> <p>PSHx: none noted in medical record</p> <p>Meds: aspirin 325 mg PO; Avelox 400 mg PO; Lasix 20 mg PO; Theragra PO</p> <p>Allergies: penicillin, erythromycin, clindamycin</p>	To check status of three stasis ulcers and perform dry dressing change	<p>S: Pt reported intense itching at wound site rated 10/10, with pain rated at 3/10 in the past week but 0/10 at time of assessment. Itching is more intense at night, and pt rubs area on top of wound dressing to relieve it. Pt and pt's wife requested info about protecting dressing during showers. Itching is more intense at night.</p> <p>O: BP 160/80 L arm sitting, T 96.4 O; RR 20, even, unlabored; HR: 84 regular, 2+, L radial --4" L x 3" W wound on left medial LE 4" above ankle; 2" L x 1" W wound on left lateral LE 1" above ankle; 2" L x 2" W wound on left medial heel 1" below ankle; all wounds red, beefy, moist with epithelialization across all sites, minimal drainage --2+ pitting on left LE from knee to proximal wound site --Shuffling gait, uses cane; pt is familiar with environment and receives assistance from wife for ambulation --lungs clear b/t, apical S1 and S2 heard, regular</p> <p>A: med dx: peripheral vascular disease, stasis ulcers Nursing dx: risk for falls r/t legal blindness; impaired skin integrity r/t stasis ulcers a/e/o red, beefy, moist, draining skin on left LE; edema r/t venous stasis a/e/o pitting edema 2+ on left LE from knee to proximal wound site</p> <p>P: Today--dry dressing change with PolyMem, 4x4 gauze pad, Stofam gauze, ACE bandage, verbal and written education on dressing changes and dressing protection during showering, verbal education on relieving edema; checked medication compliance for elevated BP Next visit--assess wounds, assess edema change dressing, check VS and med compliance for BP</p>

Thinking about Graph



Sample Unstructured Note

SOAP Note Sample

NUR 4050: Critical Care
Clinical Experience Form
Date:

Student's Name:
Patient's Initials: S.M.

Patient
Include age, occupation, PMH/PSH, pertinent to
S.M. an 88 y retired and li their one-sto
PMHx: hx o cerebral ane cellulitis, pe disease
PSHx: none
Meds: aspirin 400 mg PO, Theragran P
Allergies: pc clindamycin

This is about Mr. Fernando Amos Breitenberg. He's married. Now let's talk about his medical encounters.\n\nThe main one is a well child visit. This happened at the clinic. The visit started on December 23, 1992, at 01:08:42 and ended on the same day at 01:23:42, with timezone being +01:00. Mr. Breitenberg was looked after by Dr. Trent Krajcik. He was the one who did the whole procedure.\n\nMoving on, Mr. Breitenberg has an allergy. It's active and confirmed. He's allergic to shellfish. We've known this since April 2, 1994, at 12:08:42, with timezone as +02:00.\n\nFinally, all this happened at our healthcare provider in Quincy. It's located at 300 CONGRESS ST STE 203, Quincy, MA, 021690907, US.

Extracting Entities

This is about Mr. Fernando Amos Breitenberg. He's married. Now let's talk about his medical encounters. The main one is a well child visit. This happened at the clinic. The visit started on December 23, 1992, at 01:08:42 and ended on the same day at 01:23:42, with timezone being +01:00. Mr. Breitenberg was looked after by Dr. Trent Krajcik. He was the one who did the whole procedure. Moving on, Mr. Breitenberg has an allergy. It's active and confirmed. He's allergic to shellfish. We've known this since

```
class PersonNameAndTitle {  
    family string? @alias("surname") @description("Surname of the patient")  
    given string[]? @alias("givenName") @description("Given name(s) of the patient")  
    prefix string? @alias("title") @description("Title of the patient")  
}
```

Extracting Entities

This is about Mr. Fernando Amos Breitenberg. He's married. Now let's talk about his medical encounters. The main one is a well child visit that happened at the clinic. The visit started on December 23, 1992, at 01:23:42, and ended on the same day at 01:23:42, with timezone being +01:00. Breitenberg was looked after by Dr. Trent Krajcik. He was the one who performed the whole procedure. Moving on, Mr. Breitenberg has an allergy for shellfish. He's active and confirmed. He's allergic to shellfish. We've known this since 1992.

```
{
  "name": {
    "family": "Breitenberg",
    "given": [
      "Fernando",
      "Amos"
    ],
    "prefix": "Mr."
  },
  "age": null,
  "gender": null,
  "birthDate": null,
  "address": null,
  "phone": null,
  "email": null,
  "maritalStatus": "Married",
```

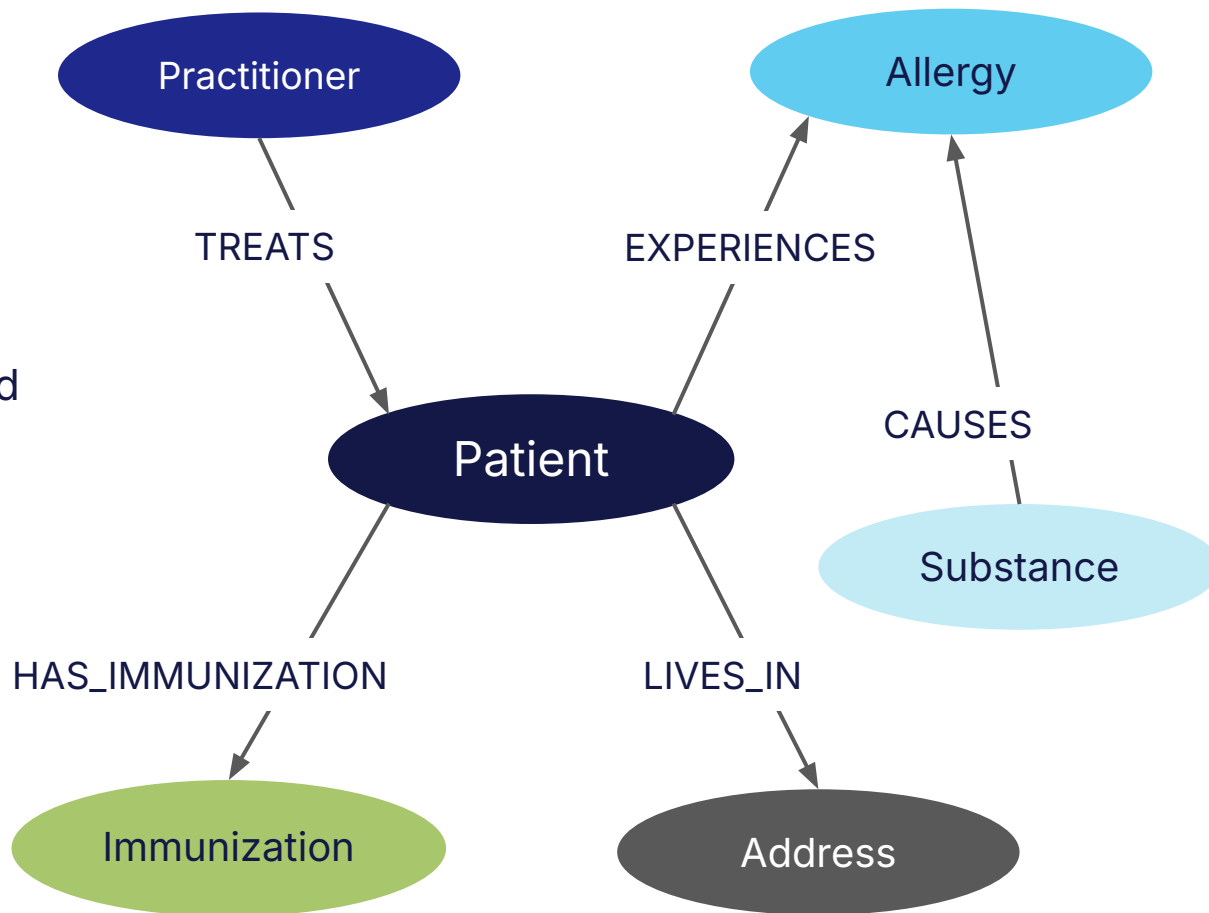
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}
```

The Graph Schema

AGENTIC AI
SUMMIT

Domain Specificity

Enforcing schema and domain semantics.



How the Data Looks using G.V()



Recap: Why Graph for Specialized Knowledge

Context is clear

Paths & Relationship,
not paragraphs

Domain Specificity

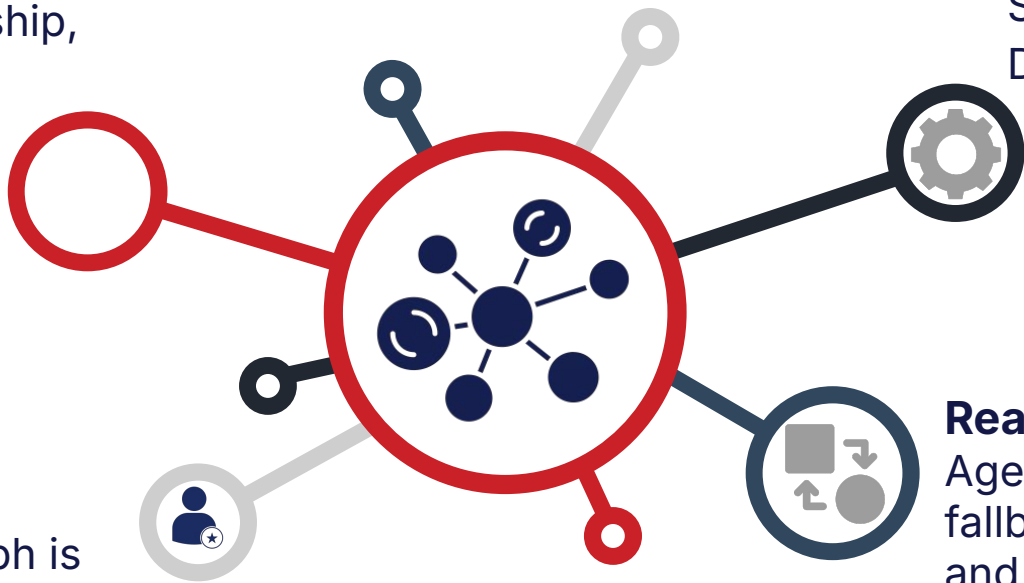
Schema Enforces
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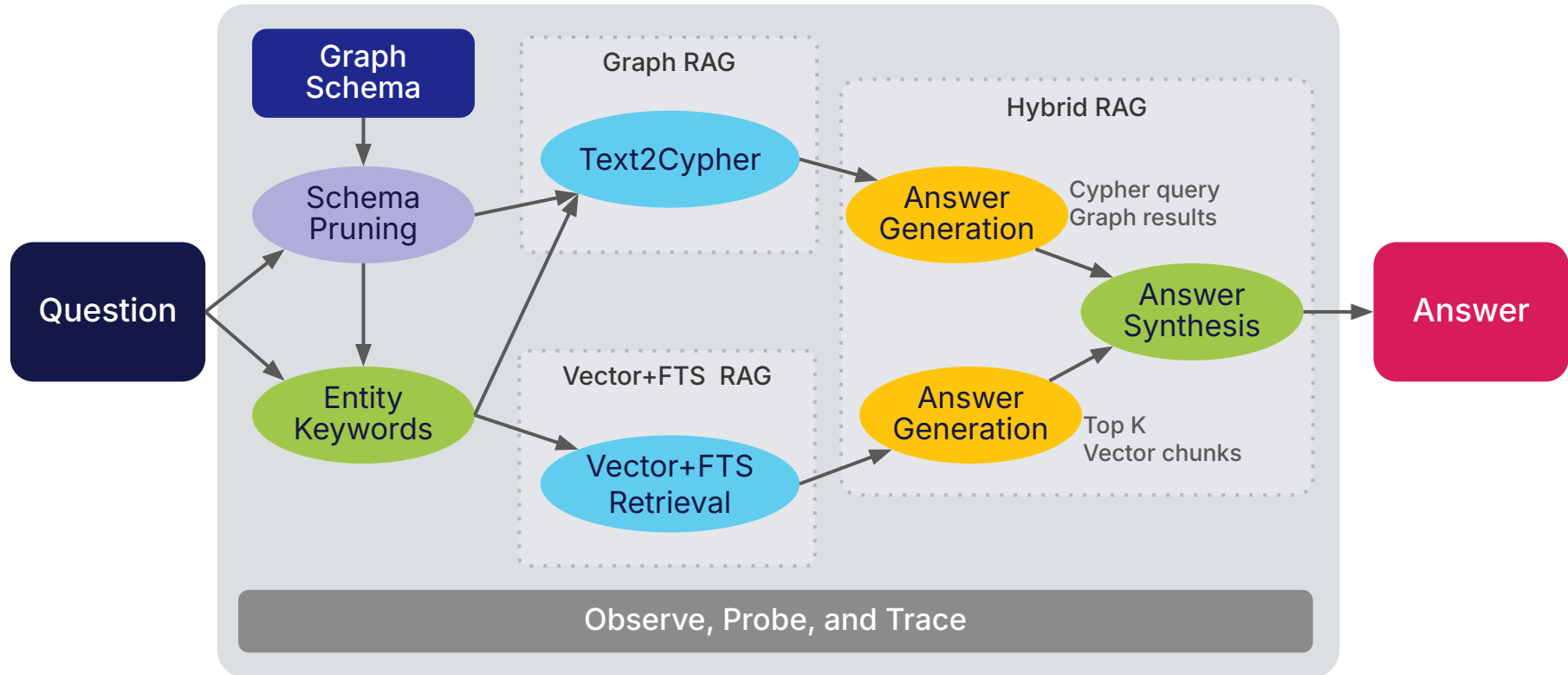
Cypher and Graph is
auditable

Reasoning Control

Agent choose paths
fallback on structure
and schema transversal



Our Graph & Hybrid RAG Workflow



Hand on: Building Graph & Hybrid RAG



Agentic Workflows for Graph RAG

Design-Build-Evaluate-Expand

Design

Robust graph schemas are the bedrock

Agent workflows provide higher quality results

Use a sliding scale for agentic systems and tailor for needs

Build

Enforce structure

Build composable workflows

Test full pipeline and iterate

Plug into observability tools

Evaluate

Deterministic evaluations (factual answers)

LLM evaluation (qualitative)

Probe and test intermediate stages

Monitor for failure mechanisms

Expand

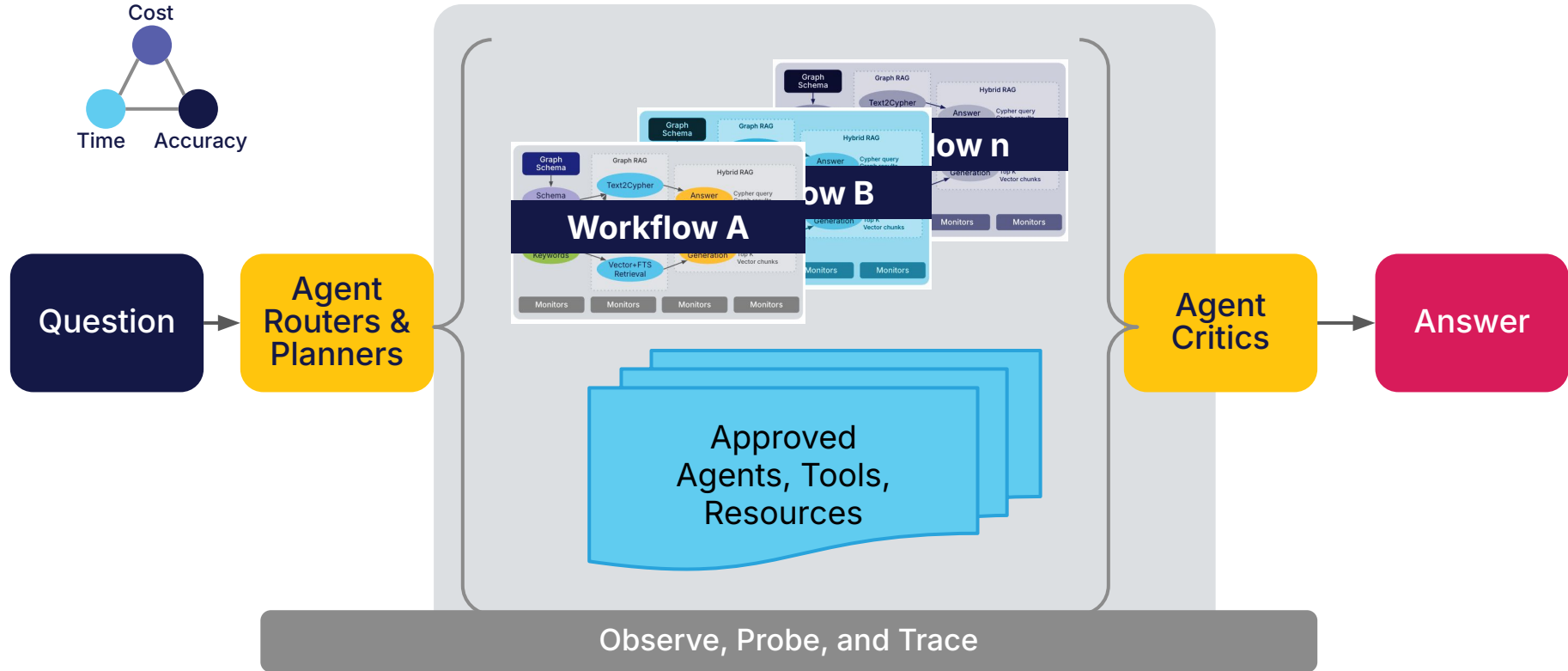
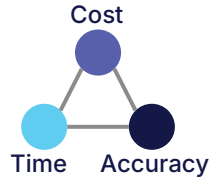
Gradually increase autonomy by component

Evaluate with respect to baseline

Add new tools, workflows & agents

Expand generalizability

Vision: Increasing Agentic Control



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AGENTIC AI SUMMIT

Agentic Workflows for Graph RAG

tiny.graphgeeks.org/Agentic-Summit

Jul 30 - Evaluating & Benchmarking



October: San Francisco

2026: East Coast, Europe ++



GraphGeeks.org

A vendor-neutral community for
graph practitioners & enthusiasts