

# **Medical Al Ensemble Clinical Decision Report**

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# **Primary Diagnostic Consensus**

Diagnosis	ICD-10	Agreement	Confidence	Status
Familial Mediterranean Fever (FMF) Evidence: Recurring fever episodes, Family history, Periodic nature of symptoms, Mediterranean ancestry pattern	E85.0	0.0%	Very Low	PRIMARY

### **Alternative & Minority Diagnoses**

Diagnosis	ICD-10	Support	Туре
Periodic Fever Syndrome (other types)  Evidence: Periodic fever pattern	E85.0	3.7%	Minority (<10%)
Systemic Juvenile Idiopathic Arthritis  Evidence: Systemic inflammation, Fever episodes	M08.2	7.4%	Minority (<10%)
Adult-Onset Still's Disease Evidence: Fever pattern, Systemic symptoms	M05.8	3.7%	Minority (<10%)
Systemic Juvenile Idiopathic Arthritis (sJIA)  Evidence: Systemic inflammation, Recurrent fever	M08.0	3.7%	Minority (<10%)

Analysis Overview
Models Queried: 3
Successful Responses: 3
Consensus Level: High
Total Estimated Cost: <\$0.01

# **Critical Decision Points & Evidence Synthesis**

#### **Critical Decision Points**

Key areas where models showed significant divergence in diagnostic or management approach:

### **Evidence Synthesis & Clinical Correlation**

### **Symptom-Diagnosis Correlation Matrix**

Symptom	FMF	Periodic	Systemic
recurring fever	Strong	-	-
periodic episod	-	Strong	-
family history	Strong	-	-

Legend: +++ Strong association, ++ Moderate, + Weak, - Not typical

#### **Diagnostic Decision Tree**

Step	Action	If Positive	If Negative
1	MEFV Genetic Test	→ Confirm FMF, Start Colchicine	$\rightarrow$ Proceed to Step 2
2	Extended Genetic Panel	→ Alternative periodic fever	→ Proceed to Step 3
3	Autoimmune Workup	→ Consider SLE/Still's	→ Consider IBD
4	Inflammatory Markers	→ Monitor progression	→ Reassess diagnosis

### **Executive Summary**

#### **Case Description**

A 28-year-old male of Mediterranean descent presents with:

- Recurrent episodes of fever lasting 1-3 days
- Severe abdominal pain during episodes
- Chest pain with breathing difficulties
- Joint pain affecting knees and ankles
- Family history: Father and paternal uncle have similar symptoms
- Episodes occur every 2-3 weeks
- Labs during attack: Elevated CRP, ESR, and WBC
- Between attacks: Completely asymptomatic

Patient reports episodes started in childhood around age 7. Recent genetic testing is pending.

#### **Key Clinical Findings**

- Recurrent fever episodes
- · Migratory arthritis affecting large joints
- Severe abdominal pain with peritoneal signs
- Elevated inflammatory markers (CRP, ESR)
- · Positive family history of similar episodes

### **Primary Recommendations**

- Consider Familial Mediterranean Fever (FMF) among differential diagnoses
- Assess current episode severity and pain level
- Rule out acute complications (peritonitis, pleuritis)
- Obtain detailed family history of Mediterranean ancestry
- Obtain MEFV gene mutation analysis for diagnostic confirmation

# **Primary Diagnosis Clinical Summaries**

# **■** Key Clinical Findings

Finding	Supporting Evidence	Clinical Reasoning
Recurring fever episodes	Clinical presentation	Key diagnostic indicator
Family history	Clinical presentation	Key diagnostic indicator
Periodic nature	Clinical presentation	Key diagnostic indicator
Mediterranean ancestry	Clinical presentation	Key diagnostic indicator
Systemic inflammation	Clinical presentation	Key diagnostic indicator

### **■** Recommended Tests

Test Name	Туре	Priority	Rationale
MEFV gene mutation analysis	Laboratory	Urgent	Diagnostic confirmation
Complete blood count with differential during acute episode	Laboratory	Urgent	Diagnostic confirmation
Inflammatory markers (ESR, CRP) during attack and remission	Laboratory	Urgent	Diagnostic confirmation
Comprehensive metabolic panel including renal function	Laboratory	Urgent	Diagnostic confirmation
Urinalysis with microscopy to assess for proteinuria	Laboratory	Urgent	Diagnostic confirmation

## **■** Immediate Management

Intervention	Category	Urgency	Clinical Reasoning
Assess current episode severity and pain level	Medical	Immediate	Critical intervention
Rule out acute complications (peritonitis, pleuritis)	Medical	Immediate	Critical intervention
Obtain detailed family history of Mediterranean ancestry	Medical	Immediate	Critical intervention

Intervention	Category	Urgency	Clinical Reasoning
Document episode frequency and duration patterns	Medical	Immediate	Critical intervention

### **■** Medications

Medication	Dosage	Route/Frequency	Indication
Colchicine	0.6 mg	oral / twice daily	prevention of FMF attacks and amyloidosis
NSAIDs (ibuprofen)	400-600 mg	oral / every 6-8 hours as needed	symptomatic relief of pain and inflammation

## **Diagnostic Landscape Analysis**

#### **Detailed Diagnostic Analysis**

The ensemble analysis identified **Familial Mediterranean Fever (FMF)** as the primary diagnosis with 0.0% consensus among 3 models.

#### **Detailed Alternative Analysis**

Diagnosis	Support	Key Evidence	Clinical Significance
Periodic Fever Syndrome (other types) Evidence: Periodic fever pattern	3.7%	1 models	Unlikely
Systemic Juvenile Idiopathic Arthritis Evidence: Systemic inflammation, Fever episodes	7.4%	2 models	Unlikely
Adult-Onset Still's Disease Evidence: Fever pattern, Systemic symptoms	3.7%	1 models	Unlikely
Systemic Juvenile Idiopathic Arthritis (sJIA)  Evidence: Systemic inflammation, Recurrent fever	3.7%	1 models	Unlikely

#### **Minority Opinions**

All alternative diagnoses suggested by any models with their clinical rationale:

• Periodic Fever Syndrome (other types) (ICD-10: R50.9) - 3.7% agreement (1 models)

Supporting Models: Model1

• Systemic Juvenile Idiopathic Arthritis (ICD-10: Unknown) - 7.4% agreement (2 models)

Supporting Models: Model1, Model2

• Adult-Onset Still's Disease (ICD-10: Unknown) - 3.7% agreement (1 models)

Supporting Models: Model2

• Systemic Juvenile Idiopathic Arthritis (sJIA) (ICD-10: Unknown) - 3.7% agreement (1 models)

Supporting Models: Model2

#### **Additional Diagnoses Considered:**

# **Management Strategies & Clinical Pathways**

## **Immediate Actions Required**

Priority	Action	Rationale	Consensus
1	Assess current episode severity and pain level	Clinical indication	50%
2	Rule out acute complications (peritonitis, pleuritis)	Clinical indication	50%
3	Obtain detailed family history of Mediterranean ancestry	Clinical indication	50%
4	Document episode frequency and duration patterns	Clinical indication	50%

## **Recommended Diagnostic Tests**

Test	Purpose	Priority	Timing
MEFV gene mutation analysis	Diagnostic confirmation	Routine	As indicated
Complete blood count with differential during acute episode	Diagnostic confirmation	Routine	As indicated
Inflammatory markers (ESR, CRP) during attack and remission	Diagnostic confirmation	Routine	As indicated
Comprehensive metabolic panel including renal function	Diagnostic confirmation	Routine	As indicated
Urinalysis with microscopy to assess for proteinuria	Diagnostic confirmation	Routine	As indicated

#### **Treatment Recommendations**

Treatment recommendations pending diagnostic confirmation.

### **Model Diversity & Bias Analysis**

#### **Model Response Overview & Cost Analysis**

Model	Origin	Tier	Cost	Diagnosis	Training Profile
deepseek-chat-v	China	Unknown	<\$0.01	Familial Mediterranean Fever	General
gemma-3-12b-it	USA	Unknown	<\$0.01	Periodic Fever Syndrome (likely Familial Mediterranean Fever - FMF)	General
mistral-7b-inst	France	Free	Free	Familial Mediterranean Fever	General

<sup>\*\*</sup>Total Estimated Cost: <\$0.01\*\*

#### **Understanding Training Profiles**

Training profiles indicate the type and depth of medical knowledge in each model:

Comprehensive: Extensive medical literature training with broad clinical knowledge

Standard: Standard medical knowledge base with general clinical training

Regional: Region-specific medical training reflecting local practices and conditions

General: Broad general knowledge, not specifically trained on medical literature

Alternative: Alternative medical perspectives and non-conventional approaches

#### **Al Model Bias Analysis**

Al model bias analysis is generated during orchestration (Step 2). This comprehensive analysis examines cultural, geographic, and training data biases across the Al models used.

### **Detailed Model Responses**

Complete diagnostic assessments from each model:

#### 1. deepseek-chat-v (China, Released: 2024-12-26)

**Primary Diagnosis:** Familial Mediterranean Fever (ICD-10: E85.0) - Confidence: 0.95 **Differential Diagnoses:** 

- Periodic Fever Syndrome (other types) (ICD: E85.0) 0.7
- Systemic Juvenile Idiopathic Arthritis (ICD: M08.2) 0.4
- Inflammatory Bowel Disease (ICD: K50.9) 0.3

#### **Key Clinical Findings:**

- Mediterranean descent
- Recurrent self-limited febrile episodes
- Abdominal pain
- Chest pain

#### 2. gemma-3-12b-it (USA, Released: 2024-12-11)

Primary Diagnosis: Periodic Fever Syndrome (likely Familial Mediterranean Fever - FMF) (ICD-10:

M69.8) - Confidence: 0.85

#### **Differential Diagnoses:**

- Adult-Onset Still's Disease (ICD: M05.8) 0.6
- Systemic Juvenile Idiopathic Arthritis (sJIA) (ICD: M08.0) 0.5
- Vasculitis (e.g., Polyarteritis Nodosa) (ICD: M30) 0.4

#### **Key Clinical Findings:**

- Recurrent fever episodes (1-3 days)
- Severe abdominal pain during episodes
- Chest pain with breathing difficulties
- Joint pain (knees and ankles)

### 3. mistral-7b-inst (France, Released: 2023-09-27)