

HOSPITAL DECISION INTELLIGENCE

HORUS Decision Twin

Calibrated on **10 million real outcomes.**

Reads **your hospital's own documents.**



AI made everyone fast.

Speed is no longer the moat. Every vendor ships a dashboard and an LLM.

The advantage now is deciding the **right thing** — grounded in **your data**, not textbook assumptions.

Today's tools

Dashboards tell you what happened.

Generic simulators run on textbook math — Poisson arrivals, lognormal stays, hardcoded ratios. Nobody trusts a forecast that was never tested against reality.

Two data assets you already own.



Outcome Corpus

10M+ patient histories calibrate the simulation on **real outcomes** — what's *likely* to happen, per cohort.



Document Intelligence

Your **spreadsheets, policies & conference / rounding notes** — a private RAG that grounds every recommendation in **your context**.

Structured connectors say **what happened**. These two say **what's likely** — and **why decisions were made**.

One platform: connect → activate → decide.

Admin / HDAP

HDAP · HORUS — Data & Decision Hub

One location for the whole loop: connect every external system, activate its data, watch it sync live, and turn it into decisions with the HORUS command center and the Hospital Decision Twin.

1 · ACTIVATE

Ingest & de-identify

Edge adapters emit a de-identified SyncHealthSummary; the platform validates + PHI-guards it. No raw PHI crosses a tier.

2 · TRUST

Review & gate

Field/code mappings are reviewed; data-readiness is scored. Estimates are never presented as actuals.

3 · DECIDE

Simulate & sign off

The Digital Twin simulates the initiative; a 4-role human gate releases any decision (recommender-only AI).

CONNECT & ACTIVATE

Bring every external system in and turn its data into facts.

HDAP · HORUS — one Data & Decision Hub

Connector Store

Migration Review

Connector Store

48 connectors · 4 live · 23 available · 21 planned

Tour

Search connectors...

All · Live · Available · Planned

All · 48 · Interoperability · 3 · EHR / HIS source · 9 · Claims / Payer · 7 · ERP / Finance · 5 · HRM / Payroll · 2 · Lab / LIS · 2 · Imaging / RIS-PACS · 2 · Pharmacy · 1 · Devices / IoT · 4 · Terminology · 3 · Messaging · 4 · Identity / SSO · 4 · Payment / Banking · 2

FHIR R4

FHIR R4 REST

Read + write Patient/Encounter/Observation subscription-based event delivery.

ever-sync-adapter (MOPH 43-...

Ever - 43-file / PC-1 - TH

Edge appliance pushing to MOPH cloud identified sync-health. Live at 15 sites.

Neusoft HIS

Neusoft - SQLAPI (read-only) - CN

Chinese HIS source adapter pack.

Activate your hospital's data — ERP, lab, claims, devices

Connector Store — 48 connectors

Connected External Systems

Demo data

Refresh

2 live · 1 failing · 4 connected

Live · Stale · Idle · Failing

erp-odoo:gl

odoo · PH · Live

sync 2h ago · 312 rec(24h)

hrm-generic:payroll-csv

local · JP · Stale

sync 30h ago · 0 rec(24h)

erp-sap:cost-center

sap · PH · Failing

sync 26h ago · 0 rec(24h) · 100% err

medOS Platform

Data Activation Platform

214 connectors live

Live connector topology + liveness

Connector Activity & Liveness

Demo data

Refresh

ever-sync-adapter:moph

HQSxP · outbound · TH · Live

Last sync: 24m ago

48 runs · 2.08% err · 18,240 rec

erp-odoo:gl

odoo · inbound · PH · Live

Last sync: 2h ago

6 runs · 0% err · 312 rec

hrm-generic:payroll-csv

local · inbound · JP · Stale

Last sync: 30h ago

0 runs · 0% err · 0 rec

erp-sap:cost-center

sap · inbound · PH · Failing

Last sync: 26h ago

4 runs · 100% err · 0 rec

ACTIVITY LOG

2h ago · complete · erp-odoo:gl · inbound · PULL_GL · 3124

12m ago · failed · erp-sap:cost-center · inbound · PULL_COST_CENTER · 01

24m ago · complete · ever-sync-adapter:moph · outbound · PUSH_43PLUS · 3804

30h ago · complete · hrm-generic:payroll-csv · inbound · PULL_LABOR · 444

Audit log + tamper-evident hash-chain

Pick an initiative → the twin simulates it on **empirical, patient-level** distributions from 10M histories.

demand & capacity verified 100% · reimbursement 96% — calibration you can see.

medical · nursing · revenue · compliance — HITL on every decision.

reproduce a held-out year before any forecast is trusted.



Seven ways 10M outcomes feed the twin.

1 · Empirical distributions

LOS & arrivals per cohort — not one fitted curve.

2 · Microsimulation

A realistic synthetic patient population flows through.

3 · Risk models

Readmission · complication · cost as agent behaviors.

4 · Demand & epi

Prevalence & chronic-disease progression in the catchment.

5 · Care-pathway mining

The *actual* pathways, variants & bottlenecks.

6 · Counterfactuals

Comparable past cohorts → evidence-grounded effects.

7 · Backtesting = trust

Reproduce a held-out year → leadership trusts it.

→ The two that sell

#1 realism, cheap. #7 trust — the sign-off.

Activate the documents the EHR never captured.

Ingest **xlsx** · **docx** · **pdf** · **pptx** + conference, rounding & committee notes into a private, de-identified corpus + RAG.

INGEST

Multi-format parsers

xlsx → tables · docx/pdf/pptx → text · OCR · voice → STT

DE-IDENTIFY → CORPUS

Strip PHI · chunk · medallion

Bronze → Silver → Gold embeddings + extracted facts

RAG

Permission-scoped retrieval

Documents become a first-class source in the Connector Store →

The screenshot displays the medOS Platform Connector Store interface. At the top, it shows '48 connectors' with status indicators for '4 live', '23 available', and '21 planned'. A search bar and a 'Tour' button are in the top right. Below the header, filters for 'All', 'Live', 'Available', and 'Planned' are shown. A list of categories includes Interoperability, EHR / HIS source, Claims / Payer, ERP / Finance, HRM / Payroll, Lab / LIS, Imaging / RIS-PACS, Pharmacy, Devices / IoT, Terminology, Messaging, Identity / SSO, and Payment / Banking. A modal window is overlaid on the interface, featuring a diagram of various system icons connected to the 'medOS Platform' (48 connectors). The modal text reads: 'Activate your hospital's data — ERP, lab, claims, devices' and 'Connect everything, in one place'. It further states: 'Bring every external system — EHR/HIS, ERP, lab, imaging, claims, devices, identity — into one platform. 48 connectors, ready to browse and install.' The modal includes a 'Next' button and a progress indicator showing '1 / 5'.

What documents carry that the EHR does not.

SOURCE	FORMAT	THE SIGNAL THE CODED RECORD MISSES
M&M / tumor board / grand rounds	docx · pptx · pdf	Why a case went wrong — and the agreed process change
Ward rounding notes	notes · voice	The plan, the discharge barriers, the rationale
Committee minutes (P&T, quality, IC)	docx · pdf	Formulary changes, targets set, policy decisions
Registries / rosters / cost sheets	xlsx · csv	Semi-structured facts not in the EHR — quality metrics, rates, staffing
Board / ops reports	pptx · xlsx	Targets, strategy, the questions leadership is asking

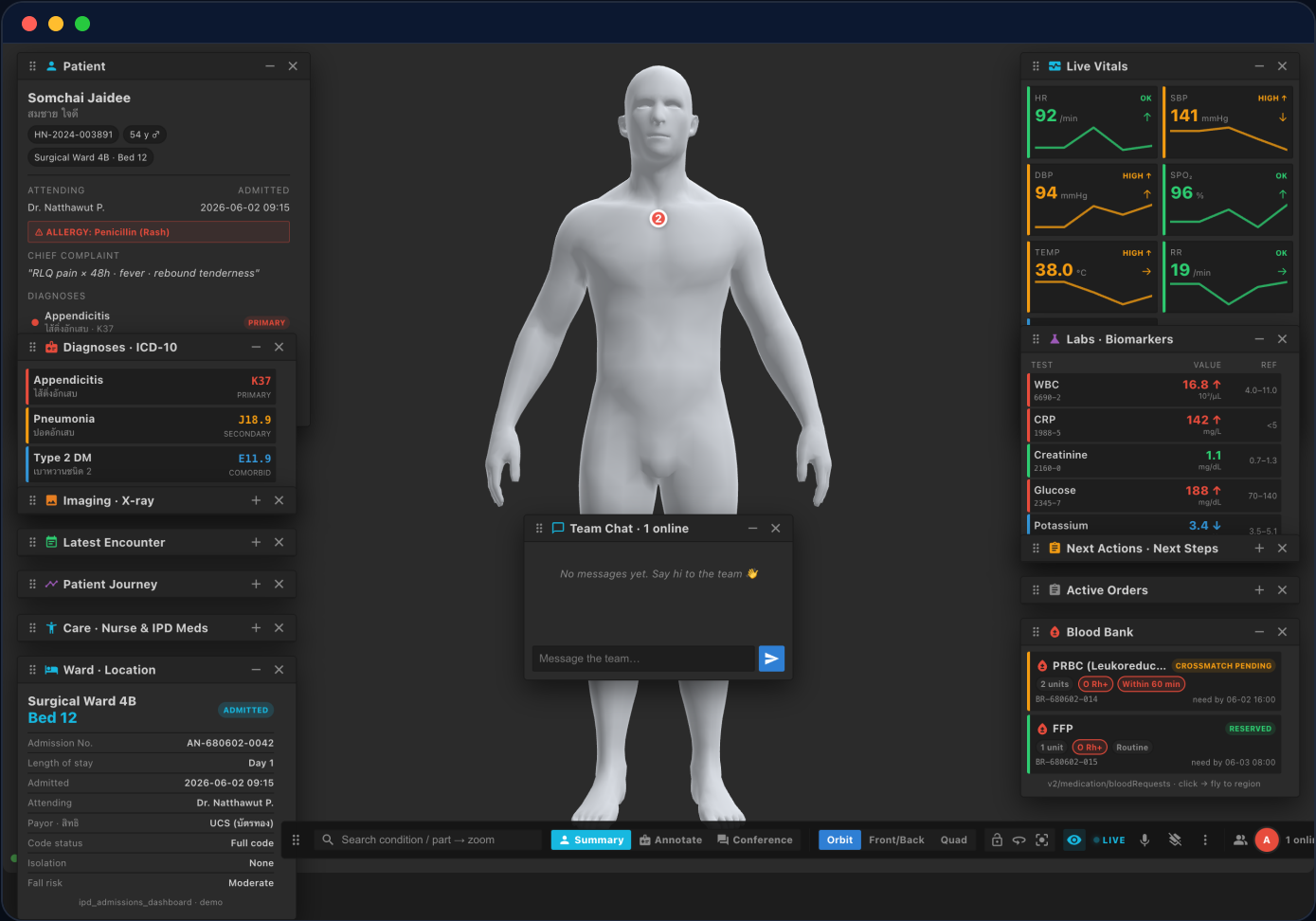
A · RAG grounds the reasoning

B · Spreadsheets → twin metrics

C · Context → scenario design

09

See your hospital in 3D.



Patient 360 — the 3D patient command surface (live).

The command surface — your team **sees, annotates & decides in space**, not spreadsheets.

Patient 360

Diagnoses, imaging, labs, vitals & orders pinned to a 3D body — annotate & conference modes, live collaboration.

3D Disease Atlas

Population health in space — case dots by home/workplace, severity & ICD-group colors; cluster detection.

Operational 3D

Incidents, zones & capacity on a 3D map + floor plan — drill from city to ward to bed.

Governance is the product, not a checkbox.

🔒 Raw PHI never reaches the twin

Histories & documents stay in the secure, in-region store. Only de-identified, aggregate artifacts cross into calibration & RAG.

🛡️ Permission-scoped RAG

Retrieval never surfaces a note to an unauthorized user.

🕒 Recommender-mode

Models inform; RAG grounds. A **4-role human sign-off** releases every decision. No autonomous writes.

🌐 In-region residency

Per-country stacks; de-identified roll-up only.

📋 Consent + access log

Opt-in, audited, named clinical owner + model card per model.

✓ Backtest before trust

No forecast is shown as decision support until it reproduces a held-out period.

Why it can't be copied.

Competitor

Dashboard

Shows what happened. No forecast, no decision.

Competitor

Generic simulator

Textbook assumptions. Never tested on your reality.

HORUS

Calibrated + contextual

A twin trained on **YOUR** 10M outcomes that reads **YOUR** documents — and compounds with every encounter.

Your data is the moat. A new entrant starts from zero; you start from 10 million.

Land value in the first phase.

P0

Empirical distributions + backtest

The credibility chart that
sells the sign-off

P1

Risk models

Readmission / complication /
cost → agents

P2

Document Activation + RAG

Answers grounded in your
own docs

P3

Spreadsheet facts

Registries & cost sheets
calibrate agents

P4

Microsim + pathways

Real case-mix & real
bottlenecks

P5

Counterfactuals

Evidence-grounded P10 /
P50 / P90

P0 ships a backtest — "reproduces last year's census within X%" — the single chart that earns leadership's trust.

THE HORUS DECISION TWIN

Not a dashboard. Not a generic simulator.

A decision partner grounded in your data, backtested on your history, gated by your people.

