



AMPEL-CDSS

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Public

2025 was a year of many answers for our AMPEL project. Today, we successfully completed our acceptance test—in just a few weeks, our in-house medical device will be ready to go! [#Exciting](#)

Until then, we wish everyone a relaxing time between Christmas and New Year. We look forward to 2026!

<https://www.youtube.com/watch?v=rfZtq-bMwhI>

[#CDS](#) [#CDSN](#) [#AMPEL](#) [#Leipzig](#)



[17.12.2025, 12:56:41](#) [Original]

1 Schub



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Our new Linux laptops have arrived!

All of the world's top 500 supercomputers run on Linux – and so does the [#AMPEL](#) 😊

<https://youtu.be/JEoDu3ldwtY>

People still debate whether solar power will prevail. That debate is over – just like the one about Linux. Solar energy is simply the cheapest energy. Many will be puzzled: The world's largest energy source is also the most affordable?

Similarly, [#Linux](#) dominates global servers not because it's "nice," but because [#OpenSource](#) drives innovation.

1/2

[08.10.2025, 10:42:37](#) [Original]

1 Favorit



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If we want the most innovation in software, we should tap into the biggest source: Open Source.

With AMPEL, we're working on bringing this concept into regulated medical software in Germany.

2/2

[#CDSS](#) [#CDS](#) [#PatientSafety](#)

[08.10.2025, 10:44:05](#) [Original]



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What is AMPEL? Last week, the tv station MDR visited us and filmed a short report about AMPEL at University Hospital [#Leipzig](#).

What does AMPEL do now? We like to describe it as a digital infrastructure enabling clinical AI in routine [#healthcare](#). It detects critical situations in real time to improve [#PatientSafety](#).

https://www.youtube.com/watch?v=KquYs9i_5fY

[06.10.2025, 14:56:39](#) [Original]



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There's a massive gap when it comes to [#ClinicalEvidence](#) for AI products in patient care.

At [#AMPEL](#), we're determined to close that gap — and [#OpenSource](#) is a key part. Curious? Toralf Kirsten and Daniel Steinbach put together a new presentation - take a look!

<https://youtu.be/GMb4M8XjpBE>

Why is Open Source so important? Because clinical evidence and transparency belong together. You want trustworthy, evidence-based AI software in [#Healthcare](#)? Then Open Source isn't optional — it's essential.

[04.09.2025, 13:53:38](#) [Original]



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Can we solve evidence and trust challenges in AI Medical Devices with [#OpenSource](#)?

The northern european countries gathered last week for Estonian Health Tech Week, and Prof. Toralf Kirsten and I were invited to present our new concept of “For-Evidence Medical Devices.”

A recently published study on [#AI #MedicalDevices](#) in [#Radiology](#) shows that 99% provide no evidence of patient outcomes. 👉 <https://doi.org/10.1007/s00330-025-11830-8>

We need much more clinical evidence when it comes to AI in medicine!

1/3



[03.09.2025, 13:18:43](#) [Original]



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Our solution to close this gap: the development of an in-house medical device, designed with one priority above all else—the generation of new [#ClinicalEvidence](#).

What else was discussed?

- Want to implement AI? Estimates for how long change processes take are always too short (Nasim Bergman Farrokhnia), and they require a lot of resources (Peter Lasborg).

- Biggest obstacles bringing new [#MedicalDevices](#) to market? Legal ambiguity, data quality, and interoperability (Elina Drakvik).

2/3

[03.09.2025, 13:22:06](#) [Original]



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- Looking at AI medical devices, we see a massive lack of [#ClinicalEvidence](#) (Dr. Stephan Binder), and we need to build trust through greater transparency (Dr. Khulood Alsayegh).

- Where to start? A great entry point could be the results of the [#CaidX](#) Project (Thomas Karopka). 👉 <https://clinicalai.eu/>

We came away full of new ideas and reassured that we are not alone in our analysis of the state of AI medical devices. Thank you for this inspiring event!

3/3

[03.09.2025, 13:23:45](#) [Original]



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Want to experience first-hand how an AI improves medical care in a clinic? This is possible tomorrow, during the “Long Night of Science” at our AMPEL workshop.

Maria Schmidt and I will go through all the pitfalls in a role play and, with a bit of luck, we'll manage to successfully bring the AI into the clinic together!

We're also happy to present the AMPEL-CDSS outside of the workshop!

<https://www.wissen-in-leipzig.de/einrichtungen/medizininformatikzentrum>

We are looking forward to it!

We are looking forward to it.



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University hospitals in Germany play a key role in bringing evidence-based AI into patient care. The journey - and the regulations - can only be mastered as a team. We shared our experiences at the Ecclesia seminar: close collaboration with [#QM](#) and [#DataProtection](#) is essential. As the AMPEL team, we're fortunate to have such competent and proactive support!

Our conclusion: AI at university hospitals? Only works if all departments participate!

[#MedicalAI](#) [#ClinicalAI](#) [#AMPEL](#) [#Leipzig](#)



[16.06.2025, 13:56:13](#) [Original]

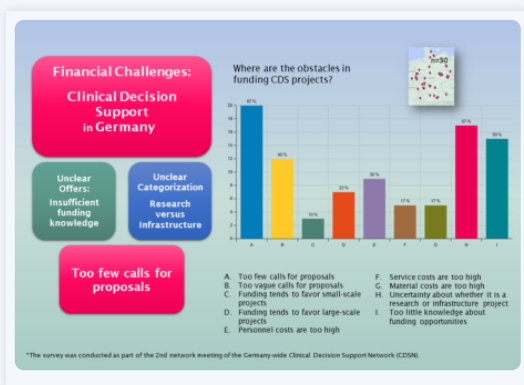


Where are the obstacles in financing projects on the future topic of [#ClinicalAI](#) support?

That's what we asked the experts from the Clinical Decision Support Network ([#CDSN](#)).

Our interpretation: Funding generally tends to be divided between academic research and business-driven funding. That presents a challenge for [#CDS](#) researchers — because their field often lies right in between!

[#CDSS](#) [#MedicalAI](#) [#AcademicFunding](#)



13.05.2025, 16:58:27 [Original]



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We're back from [#DMEA](#) – voice almost gone, head full of ideas.

Two days of exciting conversations, valuable exchanges, and genuine interest in our [#CDSS](#), [#AMPEL](#). The discussions showed us that our evidence approach addresses exactly where the greatest need is and where the market currently offers few solutions.

Big thx to everyone who stopped by – for your feedback, interest, and honest questions. We've gained a lot and are already looking forward to next year!

[#DMEA25](#) [#DigitalHealth](#)



[10.04.2025, 18:25:48](#) [Original]




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Tomorrow is the day! We, as the Division of Clinical AI and Translational Medicine ([#MedKIT](#)) are jointly represented with the IHK Leipzig at [#DMEA2025](#) in Berlin, and we are excited to welcome you to our booth.

Come by, exchange ideas with us, and learn more about our latest [#AMPEL](#) project progress and ideas. We look forward to engaging conversations and inspiring encounters!

 When? April 9th + 10th

 Where? Hall 6.2, Stand D-102

<https://plus.dmea.de/company/AMPEL-Clinical-Decision-Support-System-Universitatsklinikum-Leipzig-AoR--1216106>

[#DMEA](#) [#DMEA25](#)



[08.04.2025, 09:34:43](#) [Original]



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[#Hiring](#) Wir suchen einen nicken Medizininformatik-Menschen für unsere universitäre Klinik-KI [#AMPEL](#)

- 80-100%
- überdurchschnittliche Bezahlung da besser als TV-L E13 (nicht viel, aber immerhin! 😊)
- [#PeaceOfMind](#) Bring mit uns wissenschaftliche Evidenz in die Patientenversorgung!
- Flache Hierarchien und hohe Selbstwirksamkeit

https://www.uniklinikum-leipzig.de/stellenangebote/Seiten/Stellenausschreibung_9684.aspx

[#NewWork](#) [#OpenSource](#) [#CDSS](#) [#CDS](#) [#Medizininformatik](#) [#DigitalHealth](#) [#eHealth](#) [#Leipzig](#) [#Medizin](#) [#Uniklinik](#) [#Job](#) [#Stellenausschreibung](#)



[03.04.2025, 13:19:00](#) [Original]

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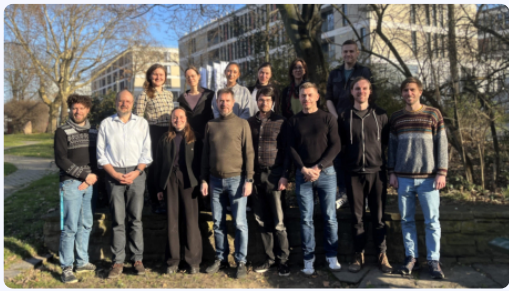
Public

Last week marked the successful start of the "Made in Saxony: Scaling Clinical AI Support through AMPEL" project. [#CDSS](#)

The goal is to transfer the [#AMPEL](#) success from [#Leipzig](#)'s to [#Dresden](#)'s University Hospital, further scaling AI-based clinical decision support.

Through intense collaboration, we defined the next steps, focusing on optimizing AI models, integrating them into routine care, and improving clinician acceptance.

A big thank you to all who contributed to this successful launch!



[24.03.2025, 14:07:09](#) [Original!]



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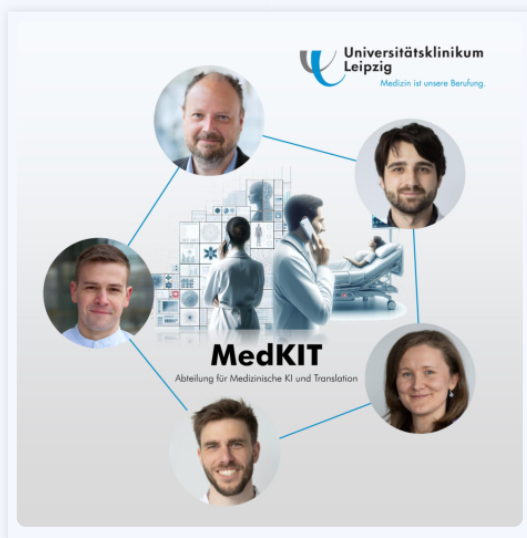
A major milestone for [#MedicalAI](#): The Division for Clinical AI and Translational Medicine ([#MedKIT](#)) has been established at University Hospital [#Leipzig](#)!

As far as we know, this is a unique case: from now on, a dedicated hospital department will be responsible for the further development of an [#OSS](#), with the goal of becoming the first [#MDR](#)-certified [#OpenSource](#) software in Europe!

Exciting Times!

Press release: https://www.uniklinikum-leipzig.de/presse/Seiten/Pressemitteilung_8030.aspx

[#AMPEL](#) [#AI](#) [#Medicine](#) [#Healthcare](#) [#CDSS](#) [#CDS](#)



[20.03.2025, 11:44:52](#) [Original]

1 Schub



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Big News for [#OpenSource](#) in Medicine: Our AMPEL-CDSS is expanding to Dresden!

With €1M funding from Saxony, our clinical clinical support system will be scaled, further developed, and studied in real-world applications at Dresden University Hospital and beyond. The 3-year project is led by the new department MedKIT (more soon!) and involves multiple partners in Leipzig and Dresden. Exciting collaboration ahead!

More:

<https://tu-dresden.de/med/mf/imb/forschung/forschungsprojekte/ampel>

[#CDS](#) [#CDSS](#) [#AMPEL](#) [#MedicalAI](#) [#Academic](#)



[23.01.2025, 11:18:55](#) [Original]

1 Schub



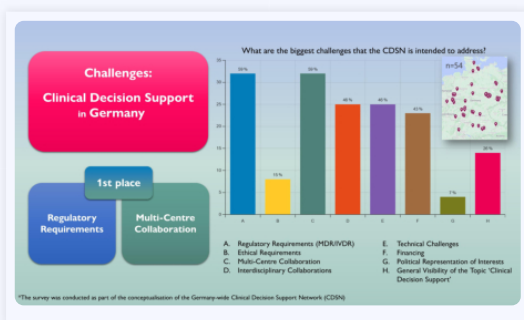
What are the biggest challenges in the field of [#ClinicalDecisionSupport](#)?

In our current conceptualisation of the Clinical Decision Support Network (CDSN), we have asked ourselves precisely this question. What's the sticking point in the scientific community?

The results are clear: meeting regulatory requirements and working together in multi-centre collaborations.

Sounds familiar? Let's get in touch to solve these problems together in the [#CDSN!](#)

[#CDS](#) [#CDSS](#) [#MedicalAI](#) [#MDR](#) [#IVDR](#)



22.01.2025, 14:42:18 [Original]



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The year is 2024 A.D. All of Germany is facing the 'Ampel-Aus'. A university hospital, populated by indomitable Leipzigers, still holds out against intransparent AI and continues to develop the [#OpenSource](#) [#CDSS](#) AMPEL...

We thank all our partners for this exciting year!

Will the next word of the year then be 'AMPEL-An'? 😊 More on that in the new year!

We wish everyone a peaceful Christmas season and a happy New Year!"

[#AmpelAus](#) [#AMPEL](#) [#DigitalHealth](#)



[16.12.2024, 10:26:55](#) [Original]

1 Schub



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Do what you enjoy and earn money for it.

[#Hiring](#) [#Leipzig](#) [#ComputerScientist](#) [#IT](#) [#Informatician](#) [#HybridWork](#)
[#MedicalAI](#) [#CDSS](#) [#Java](#) [#TypeScript](#) [#Python](#) [#AcademicChatter](#)
[#OpenSource](#) [#OpenScience](#) [#NiceTeam](#)



[02.12.2024, 17:11:16](#) [Original]

1 Schub



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@AMPEL@med-mastodon.com

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Are you like Christian Lindner looking for a job? Then feel free to apply with us! We are looking for women, men, and everyone in between and beyond to engage in independent research, development, and application of [#MedicalAI](#) in routine care at Leipzig University Hospital. Current expertise we need:

- [#ComputerScience](#)
- [#Statistics](#) (Data Analysis)
- [#MedicalInformatics](#)
- Organization and [#PublicRelations](#)
- [#MachineLearning](#) (Model Development)

-> ampel@uniklinik-leipzig.de

[#Hiring](#) [#Leipzig](#)



[12.11.2024, 11:40:03](#) [Original]

2 steigert



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[#Hiring](#)

KoordinatorIn Öffentlichkeitsarbeit und Assistenz der Abteilungsleitung im Medizininformatikzentrum des Universitätsklinikums Leipzig

<https://www.linkedin.com/jobs/view/4090290808/>

DatenanalystIn | BiometrikerIn | StatistikerIn in der klinischen Forschung am Universitätsklinikum Leipzig

<https://www.linkedin.com/jobs/view/4089373143/>

04.12.2024, 11:21:00 [Original]



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#Hiring

Computer Scientist | InformatikerIn | Software EntwicklerIn für klinische KI-Forschung und Anwendung

<https://www.linkedin.com/jobs/view/4089517070/>

MedizininformatikerIn | InformatikerIn zur Weiterentwicklung eines Clinical Decision Support Systems am Universitätsklinikum Leipzig

<https://www.linkedin.com/jobs/view/4090207823/>

04.12.2024, 11:21:24 [Original]



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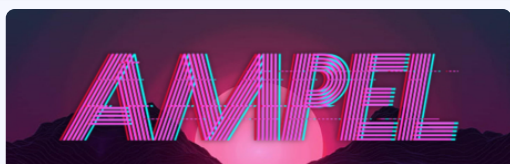
Public

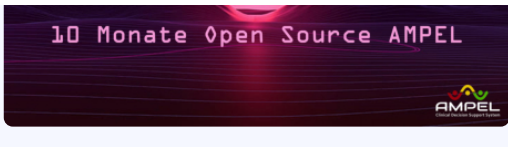
When we started our initiative this year to launch an [#OpenSource #ClinicalAI](#), we expected it to start slowly. Then events quickly accelerated. What a fantastic start!

Our highlights from the first 10 months of Open Source [#AMPEL](#):

- HIMSS'24 in Rome: Together with pioneer Bart de Witte, we discuss open source in European healthcare
- [@Mer_edith](#) (CEO of Signal) promotes AMPEL during the award ceremony for the Future Prize of the Helmut Schmidt Foundation

1/3





[23.10.2024, 10:38:47](#) [Original]

1 Schub



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-New and exciting were our appearances in national media, such as MDR, WDR, Süddeutsche, Spektrum, and Deutsches Ärzteblatt

Our [#OpenSource](#) publications:

- Multicenter [#Dataset](#) of over 5 million blood samples for [#Sepsis](#) detection -> <https://github.com/ampel-leipzig/sbcddata>
- [#CDS](#) [#AImodel](#) for early sepsis detection based solely on a complete blood count -> <https://github.com/ampel-leipzig/sbcmmodel>
- Prospectively studied CDS models for detecting [#RefeedingSyndrome](#) and hypo- and [#Hypercalcemia](#) -> <https://www.uniklinikum-leipzig.de/einrichtungen/ampel/modelle/%C3%BCbersicht>

2/3

[23.10.2024, 10:41:54](#) [Original]

1 Schub



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We look forward to our next publications:

- [#OpenSource](#) [#CDSS](#) [#AMPEL](#)
- Dataset for sepsis detection in emergency rooms [#OpenData](#)
- CDS models for interpreting procalcitonin, detecting AKI under vancomycin treatment, and identifying hypokalemia

Let's continue the path to open-source [#ClinicalAI](#) together! For more

information and contact with our team. visit <https://www.ampel-cdss.com> !



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@AMPEL@med-mastodon.com

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What happens when you throw Google, the innovators of the Sheba Medical Center and German lighthouse projects into the atmosphere of the Pittlerwerke in Leipzig?

A big compliment to the organizers, who succeeded in creating an open space for ideas! Many thanks to all the speakers, it was great fun. The future of medicine can come! 😊

[#STFOM24](#) [#MedicalAI](#) [#Leipzig](#) [#CDS](#) [#CDSS](#)



[26.09.2024, 11:25:53](#) [Original]

[04.10.2024, 09:44:20](#) [Original]

1 Schub



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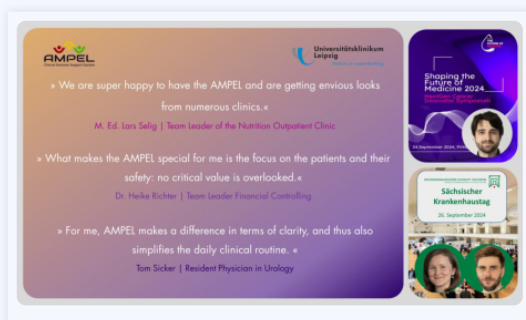
Following 'From the clinic for the clinic,' we have created [#AMPEL](#), a university hospital [#AI](#) that provides real added value.

We are excited to present our system tomorrow at "Shaping the Future of Medicine" [#STFOM](#). On Thursday, we will continue at the [#SaxonHospitalDay](#)

As an [#OpenSource](#) initiative, we aim to make not only the software but also scientific evidence and best practices transparent.

Will you be in Leipzig in the coming days? Feel free to stop by for a chat with us!

[#CDS](#) [#CDSS](#)



[24.09.2024, 15:34:17](#) [Original]

1 Schub



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Public

So trivial and yet somehow quite cool: The first [#Spektrum](#) ([#ScientificAmerican](#)) article to report on its own work.

<https://www.spektrum.de/news/sepsis-fataler-amoklauf-des-immunsystems/2225505>

For all those who want to know (without a paywall) what our [#Sepsis](#) early detection AI is all about, I recommend our homepage: <https://www.uniklinikum-leipzig.de/einrichtungen/ampel/en/models/sepsis>

[#CDS](#) [#CDSS](#) [#AMPEL](#) [#MedicalAI](#) [#CBC](#) [#OpenScience](#)



21.08.2024, 21:24:39 [Original]

1 Schub · 1 Favorit



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Public

How can we use AI in hospitals to better handle future pandemics and other challenges?

The answer is: in emergency situations, we fall back on existing structures. And those do not yet exist for [#AI](#) applications.

Together with a total of 14 university hospitals, we have therefore submitted an application for the first Clinical Decision Support Network ([#CDSN](#)) in Germany.

1/3

[#CDSS](#) [#CDS](#) [#AMPEL](#) [#MedicalAI](#) [#HealthCare](#)



[09.08.2024, 13:27:33](#) [Original]



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The CDSN intends to create scientific evidence, i.e. quickly enabling studies about which AI algorithms really do help with treatment and diagnosis in everyday clinical practice.

This is a big step. Only through multicenter collaboration can [#CDS](#) move from theory to practice. What we are building: innovative, interoperable and transparent structures in order to have the most innovative AI algorithms in clinical care.

Now it's time to keep our fingers crossed for our application!

2/3

[09.08.2024, 13:28:11](#) [Original]



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Public

But one thing is for sure: the interest in transparent and jointly developed [#CDSS](#) structures is overwhelming. We have already infected 14 university hospitals with this idea and the number is growing! This gives us enormous momentum for the further development of our open source [#AMPEL](#)!

<https://ampel-cdss.com>

3/3



09.08.2024, 13:29:32 [Original]



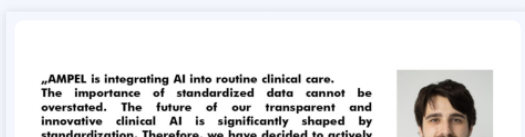
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As the new spokesperson for the core dataset 'laboratory report' of the Medical Informatics Initiative [#MII](#), Martin Federbusch now represents science towards industry and politics in the standardisation of digitised [#LabData](#).

With the introduction of [#AI](#) in clinics such as [#AMPEL](#), the scientific secondary data of today will become the primary data of tomorrow. It is therefore crucial that the conditions for both training and application of AI systems are right.

<https://ampel-cdss.com>





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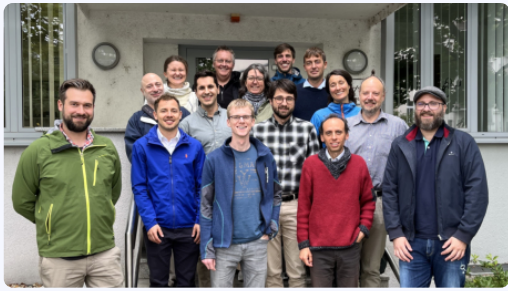
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Today we had the AI expertise of 7 university hospitals with us. This scientific exchange in person is so important. The great discussions about how to bring [#OpenSource](#) [#AI](#) into clinical reality would hardly be possible otherwise.

With such a new topic without real examples to follow, one relies on expert knowledge. Our [#AMPEL](#) project benefits from this in multiple ways. We want to shape this open and transparent future of [#MedicalAI](#)!

We are already looking forward to the next time!



[03.07.2024, 19:47:06](#) [Original]

1 Schub



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"Detecting critical situations in real time:

At Leipzig University Hospital, for example, various systems equipped with AI are already being used in different areas. The so-called "AMPEL" - a clinical decision support system - helps to detect the rare "refeeding syndrome", for example. [...] Accordingly, more than half of all cases detected by the "AMPEL" are overlooked without the system."

Translated from: <https://www.sueddeutsche.de/wissen/wissenschaft-einsatz-von-ki-veraendert-arbeitsweisen-an-kliniken-dpa.urn-newsml-dpa-com-20090101-240426-99-815178>

[#AMPEL](#) [#Press](#) [#MedicalAI](#) [#CDS](#) [#CDSS](#) [#Leipzig](#)

[16.06.2024, 10:08:39](#) [Original]



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Open Source Medical AI and Summary of [#HIMSS24](#) in Rome: First of all, what a buzzing event!

The EU Medical Device Regulation was not made with AI and [#OpenSource](#) principles in mind. So, instead of following a trodden path, we must pave our own. We at [#AMPEL](#)-CDSS are developing a clinical decision support system that is AI-ready, evidence-based, interoperable and, most of all, Open Source. Public funds started us, so we are giving back to the community.

Our journey at <https://ampel-cdss.com>



[08.06.2024, 14:19:47](#) [Original]

1 Favorit



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From other sessions, this one surprised me the most: "EU [#AIAct](#) - How can it pave the way to better AI regulation globally?" Why? Because irrespective of the title, the speakers made excellent points:

- training medical personnel is crucial, they have to have AI-literacy (Jessica Workum, chief data officer - artificial intelligence at Elosabeth-TweeStedan hospital)
- who is liable in adaptive AI? Well, all agreed that currently it's the medical personnel, but responsibility must be shared!

[08.06.2024, 14:21:30](#) [Original]



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- real-time monitoring of [#medicalAI](#) use will bring about more assurance (Rachel Dunscombe, [#openEHR](#) International)
- thresholds (causation and damage) as to when we have a defective AI system must be established along with the system (Yiannis Toliás, DG Sante European Commission)
- the AI Act is a framework act, it needs more to come to fruition. Medical and legal practitioners will have to fill it with life! (Petra Wilson, [#HIMSS](#))

What do you think about these points?

[#HIMSS24](#) [#HealthCare](#)

[08.06.2024, 14:25:38](#) [Original]



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Program tip for today's HIMSS in Rome: Starting at 11am, [#OpenSource](#) AI in healthcare will be discussed. As AMPEL (<https://www.ampel-cdss.com>), we are pleased to be able to present our point of view there 🕶️

"The Hitchhiker's Guide to AI..and Thanks for All the Fish" (11:00 AM, Room Bologna)

[#CDS](#) [#CDSS](#) [#AMPEL](#) [#eHealth](#) [#HIMSS](#) [#HIMSS24](#) [#Rome](#)

[30.05.2024, 10:19:22](#) [Original]



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Meredith Whittaker, president of Signal and winner of the Bundeskanzler-Helmut-Schmidt Foundation's Future Prize, speaks from our souls:

"To open, accountable and shared core infrastructures that, instead of being abandoned and extracted, are supported and nurtured."

The [#CDSS](#) AMPEL is exactly that in the medical sector. Let's get together!

[@Mer__edith](#)

<https://www.helmut-schmidt.de/aktuelles/detail/die-rede-der-zukunftspreistraegerin>

[#CDS](#) [#eHealth](#) [#OpenSource](#)

[28.05.2024, 09:33:15](#) [Original]

10 steigert · 23 Favoriten



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[@Mer__edith](#)

Thank you for sharing! 😊

[28.05.2024, 12:04:39](#) [Original]



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Organised by the EU-funded SHIFT-HUB project, we will present our [#AMPEL](#) - Clinical Decision Support System here next week.

Free registrations: <https://www.digitalsme.eu/events/shifthub-online-demoday-leipzig/>

[#CDSS](#) [#CDS](#) [#Healthcare](#)

Demo Day
@Leipzig 5 JUN 2024 - 10:00 CET

The event organised by the SHIFT-HUB Horizon Europe Project and the Medical Informatics Center - Dept. Medical Data Science of the University of Leipzig

AGENDA

- 10.00 – 10.10** **Welcome and opening of the event**
Prof Dr Toralf Kirsten - Medical Informatics Center - Dept. Medical Data Science of the University of Leipzig
- 10.10 – 11.50** **SHIFT-HUB project and DemoDays**
Ms Alice Seim, Steinbeis
Invited start-ups, researchers and scientists, technology developers and entrepreneurs
- 11.50 – 12.00** **Opportunities for collaboration, uptake and closing remarks**
Dr Adamantios Koumpis - University Hospital Cologne & Ms Alice Seim, Steinbeis

shift-hubproject.eu www.shift-hub.eu

SHIFT-HUB **ONLINE EVENT**

[27.05.2024, 16:51:12](#) [Original]



AMPEL-CDSS

@AMPEL@med-mastodon.com

Public

Let's talk about the possibilities of scientific software in routine care and the potential of [#OpenSource](#) in [#Healthcare](#)!

We often utilize conferences, alongside our own presentations, for privately arranged meetings in small groups, to discuss our [#AMPEL](#) [#CDSS](#) project. At the end of the month, we're heading to [#Rome](#) for the first time!

Feel free to drop by Maria's session or let's schedule a meeting: <https://www.uniklinikum-leipzig.de/einrichtungen/ampel/en/contact>

<https://www.himss.org/event-himss-europe> [#HIMSS24Europe](#)

[#DigitalHealth](#) [#HIMSS](#) [#CDS](#)



[06.05.2024, 10:34:22](#) [Original!]



AMPEL-CDSS

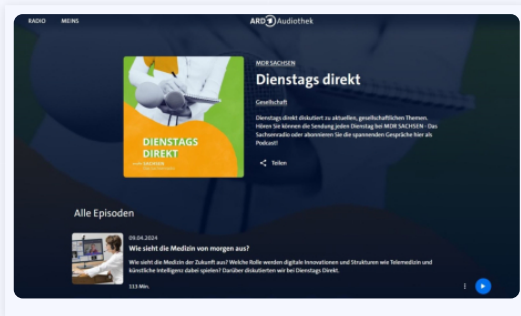
@AMPEL@med-mastodon.com

Public

How does the [#Future](#) of [#Medicine](#) look? And how can we help shape it through the [#AMPEL](#) project? We had the opportunity to discuss this on the German public broadcaster [#MDR](#). Result: AI will become an integral part of medical practice!

(from min 46:30)

<https://overcast.fm/+HCzVKXb3A/46:29>



[16.04.2024, 17:09:29](#) [Original]



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@AMPEL@med-mastodon.com

Public

How can we get more [#OpenSource](#) into medicine, especially into the medical device landscape? Martin Federbusch (Project Leader of AMPEL) led a discussion at Analytica in Munich on this topic. The occasion was the Open Source release of the [#AMPEL](#) [#Sepsis](#) Early Detection Model based on the complete blood count. Open Source in routine care is gaining momentum: it's no longer about the "Why," but about the "How"! 💪

Let's do it!

[#CDSS](#) [#CDS](#) [#MedicalAI](#) [#Analytica](#) [#MDR](#)



[15.04.2024, 13:53:09](#) [Original]

1 Schub



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Public

Secret tip for today's analytica in Munich: At 3:00 PM (ICM - Room 4a), the session "Applications of AI Algorithms in Laboratory Medicine (DGKL)" will kick off with Martin Federbusch (Head of AMPEL-CDSS). Surprise - it will focus on AMPEL, but also on many concrete AI applications, such as our recently published AI model for early detection of sepsis, based solely on the complete blood count.

[https://veranstaltungen.gdch.de/microsite/index.cfm?
l=11543&sp_id=2&selSiteID=vplanner](https://veranstaltungen.gdch.de/microsite/index.cfm?l=11543&sp_id=2&selSiteID=vplanner)



[10.04.2024, 10:38:46](#) [Original]



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Public

Thank you so much for the fantastic AMPEL workshop at this year's [#SPIN2030](#) science festival! We had a great time 😊

Interested in exciting scientific projects? We were able to discover some new ones:

While others desperately try to capture plastic in the ocean with large floating rings, an innovation from Leipzig could bring about a turning point: plastic degrading enzymes!

<https://research.uni-leipzig.de/bact/technology-transfer-and-cooperation/start-up-projects-n/>

[1/2]



[19.03.2024, 15:49:56](#) [Original]



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Public

Spring is coming, and the birds are starting to sing again. Creating a spectrogram from bird chirps and then using an [#OpenSource](#) [#ImageRecognition](#) to identify the bird - now possible on every smartphone. <https://www.tu-chemnitz.de/tu/pressestelle/aktuell/10606/en>

InnoSpeedDating aims to connect young researchers and foster new project ideas.

<https://www.leistungszentrum-smart-production-materials.de/start.html>

Thank you very much also for the great feedback on our [#AMPEL](#) project, it

Thank you very much also for the great feedback on our [#AMPEL](#) project, it motivates us every time again!

[2/2]



[19.03.2024, 15:50:39](#) [Original!]

1 Favorit



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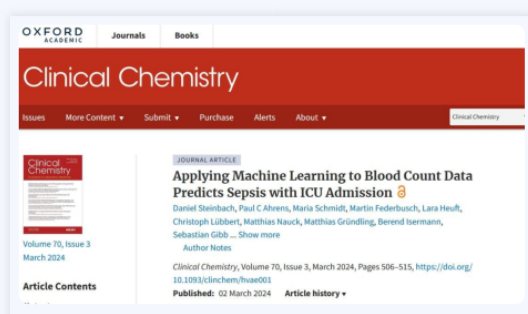
Public

Delayed sepsis detection increases mortality risk. How can [#MedicalAI](#) assist us here?

In the [#AMPEL](#) project, we extensively researched this over years using multicenter data from Germany and the USA. The results of our [#OpenSource](#) [#AI](#) basic model, based only on few parameters of the complete [#BloodCount](#) (CBC), exceeded expectations:

[1/2]

[#Sepsis](#) [#SepsisAwareness](#) [#DeutschlandErkenntSepsis](#)
[#GemeinsamGegenSepsis](#) [#GetAheadOfSepsis](#)



[06.03.2024, 09:42:46](#) [Original!]



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Public

We found:

- The diagnostic value of the CBC is significantly higher than assumed
- Even the basic model can achieve predictive power of up to 15% PPV [at 2% sepsis prevalence]
- Procalcitonin, as most established sepsis parameter, can be significantly surpassed when combined with the AI model [AUC: 0.857 vs 0.790]



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Public

🔴 Today we published our [#OpenSource](#) AI model for the early detection of sepsis in the world's leading journal of laboratory medicine! 🔴

Discovering sepsis patients sooner (=saving lives) is now possible with just a bit of routine lab data

Article:

<https://doi.org/10.1093/clinchem/hvae001>

Press release of the University Hospital Leipzig [German]:

https://www.uniklinikum-leipzig.de/presse/Seiten/Pressemitteilung_7850.aspx

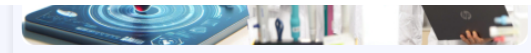
Press release [English]:

https://www.uniklinikum-leipzig.de/einrichtungen/ampel/en/Pages/sepsis_press_release.aspx

[#Sepsis](#) [#SepsisAwareness](#) [#DeutschlandErkenntSepsis](#)

[#GemeinsamGegenSepsis](#) [#GetAheadOfSepsis](#)





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Public

Experience firsthand how AI improves medical care in a clinic?

You can do just that on March 8th at the [#SPIN2030](#) [#ScienceFestival](#) in [#Dresden](#) in our AMPEL workshop.

With a kind of Pen&Paper game, we'll go through all the pitfalls, and with a bit of luck, we'll successfully integrate AI into the clinic together!

Even outside the workshop, we're happy to introduce the [#AMPEL-CDSS](#)!

Contact: ampel@uniklinik-leipzig.de

<https://wissenschaftsfestival.lineupr.com/wissenschaftsfestival/schedule>

[#CDSS](#) [#CDS](#) [#MedicalAI](#) [#OpenScience](#) [#OpenSource](#)



[23.02.2024, 18:05:24](#) [Original]

1 Schub · 2 Favoriten



AMPEL-CDSS

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Public

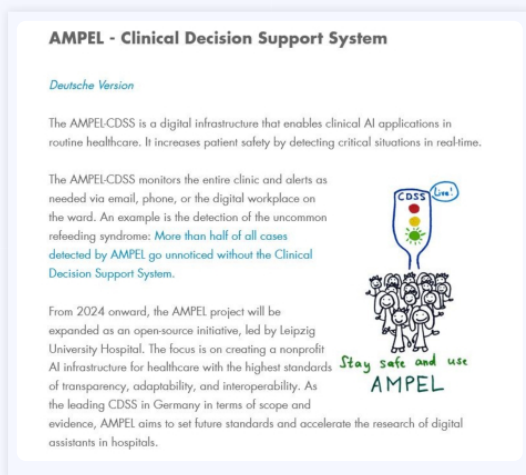
For over 5 years now, AMPEL has been researching automated AI models in the clinical everyday life of the University Hospital Leipzig! [#HappyBirthday](#)

We've chosen to forge a new path in [#Healthcare](#), advancing AI in medicine alongside the [#OpenSource](#) community

Our [#OSS](#) initiative kicks off with the gradual release of all 13 existing [#AMPEL](#) models

<https://www.uniklinikum-leipzig.de/einrichtungen/ampel/en/models/overview>

Our aim is to make the content of our models easily understandable and accessible to all. We truly appreciate your feedback!



[14.02.2024, 13:49:58](#) [Original]

2 Favoriten

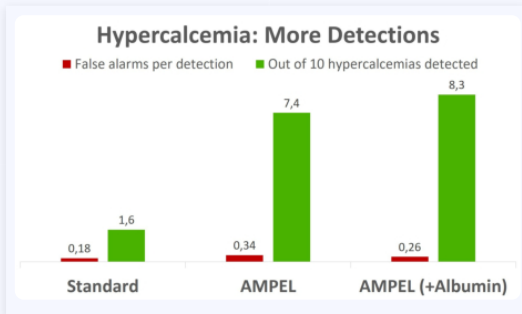
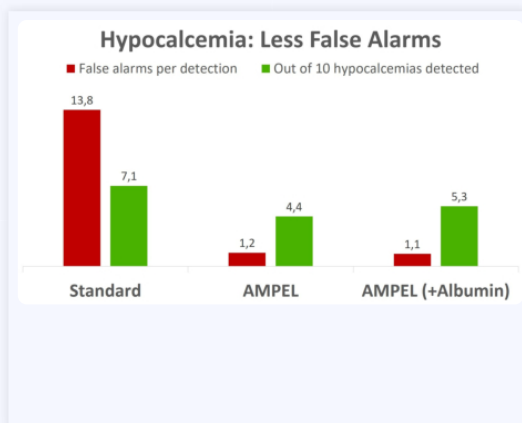
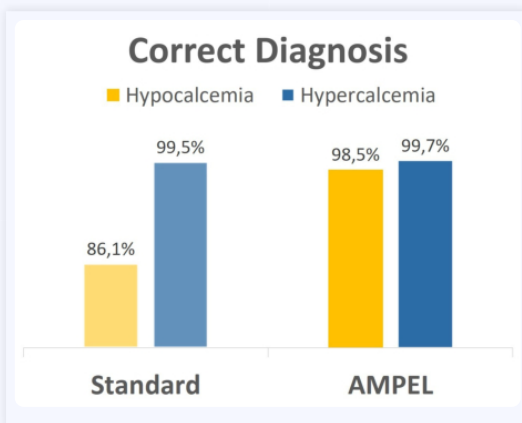


One-third of all inpatients experience hypo- or hypercalcemia. This can potentially be overlooked. We have researched how to monitor severe [#Calcium](#) imbalances automatically using clinical routine data (see previous post).

We have now published a lay-friendly overview (admittedly, sometimes even our heads start smoking here) on our homepage:

<https://www.uniklinikum-leipzig.de/einrichtungen/ampel/en/models/calcium>

[#PatientSafety](#) [#CDSS](#) [#Hypocalcemia](#) [#Hypercalcemia](#) [#AMPEL](#)



09.01.2024, 11:53:40 [Original]

1 Favorit



Using automation in [#Healthcare](#) doesn't always require [#ML](#) and [#MedicalAI](#). Often, it is sufficient to implement existing knowledge in a more easily applicable form [#CDS](#)

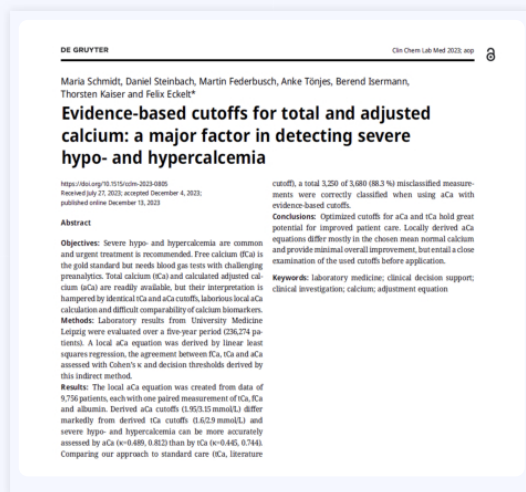
We investigated the use of total (tCa) and albumin-adjusted [#Calcium](#) (aCa) in severe calcemia detection.

We found:

- aCa is generally superior to tCa [as expected]
- Local hospital cutoffs are crucial [as known but widely ignored]
- We can now prevent >85% of all tCa misclassifications [wow!]

<https://doi.org/10.1515/cclm-2023-0805>

[1/2]



03.01.2024, 11:43:23 [Original]



As part of our Clinical Decision Support System [#CDSS](#), we are currently evaluating the new cutoffs in our clinic and encourage others to do the same.

[#AMPEL](#) can support physicians with the most reliable screening and enhance [#PatientSafety](#).

The AMPEL-CDSS is an [#OpenScience](#) project, so get involved! And yeah, we also do [#ML](#) and [#MedicalAI](#) ;)

More about the project: <https://www.uniklinikum-leipzig.de/einrichtungen/ampel/en>

[2/2]

[03.01.2024, 11:44:08](#) [Original]



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@AMPEL@med-mastodon.com

Public

Labor medicine holds a significant place in Germany. Many [#ML](#) models rely on [#labdata](#), and we believe this sets the stage for exciting [#AI](#) applications in the future [#healthcare](#) system.

The German Laboratory Medicine Congress [#DKLM](#) has been taking place since yesterday. Our contribution on [#bloodcount](#)-based ML early detection of [#sepsis](#) won the 1st prize today. Thanks for valuing our work! 🏆

The awarded poster can be downloaded here: <https://www.uniklinikum-leipzig.de/einrichtungen/ampel/Freigegebene%20Dokumente/Sepsis%20Poster%20DKLM%202023.pdf>

[#AMPEL](#) [#CDSS](#) [#LaboratoryMedicine](#)





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@AMPEL@med-mastodon.com

Public

How can [#AI](#) be implemented in [#healthcare](#)? We had some great discussions about this at the Saxon Hospital Day in Leipzig and at the German Association of Medical Informatics Meeting ([#GMDS](#)) in Heilbronn. Thank you for the valuable input!

We are pleased that our research- and common good-oriented approach [#AMPEL](#) has generated such significant interest. Let's achieve this goal together!

1/2



09.10.2023, 13:19:33 [Original]

1 Schub



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Public

Using our [#AI](#) frameworks for Acute Kidney Injury ([#AKI](#)) and [#Sepsis](#) as examples, we will present this again on October 12th and 13th at the German Laboratory Medicine Congress in Mannheim. [#DKLM](#)

<https://laboratoriumsmedizin-kongress.de/>

For all those who we cannot reach in this way (or would like to read in advance), we provide our posters as PDFs here:

Sepsis: <https://www.uniklinikum-leipzig.de/einrichtungen/ampel/Freigegebene%20Dokumente/Sepsis%20Poster%20DKLM%202023.pdf>

AKI: <https://www.uniklinikum-leipzig.de/einrichtungen/ampel/>

<https://www.uniklinikum-leipzig.de/einrichtungen/ampel/Freigegebene%20Dokumente/AKI%20Poster%20DKLM%202023.pdf>

We appreciate your feedback!

[#AMPEL](#) [#CDSS](#) [#MedicalAI](#) [#PatientSafety](#) [#CDS](#)

2/2

[09.10.2023, 13:23:11](#) [Original]



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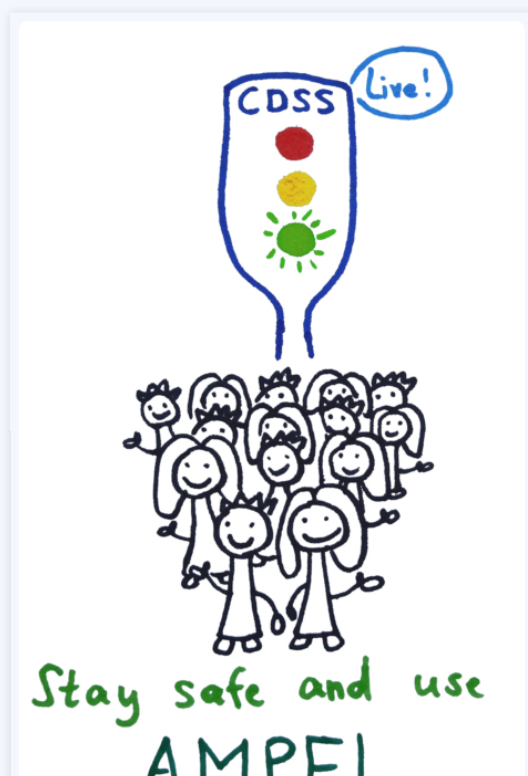
Public

When it could have been avoided, that's when you get the most frustrated. [#PatientSafety](#) is precisely that.

A few years ago, the WHO began prioritizing this issue and established [#WorldPatientSafetyDay](#) on September 17th.

We are among the projects actively striving to fulfill this mission with [#CDSS](#) :)

[#StaySafe](#) and use [#AMPEL](#)





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Public

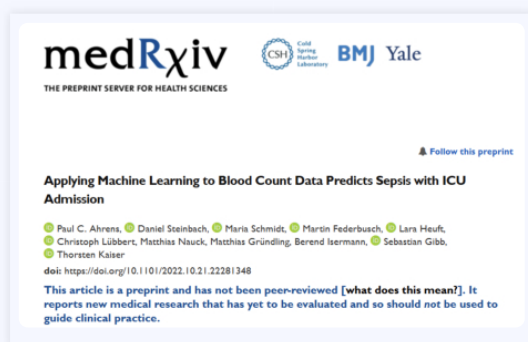
Today is [#WorldSepsisDay](#)

Time to celebrate? ...far too many people are still dying from this treatable disease.

The clear link between early detection and improved survival has made [#ML](#) models predicting [#Sepsis](#) one of the most common use cases in Clinical Decision Support [#CDS](#)

Some announcements were overpromising: <https://med-mastodon.com/@danielsteinbach@fediscience.org/110422924336325724>

1/2



[13.09.2023, 09:10:38](#) [Original]

2 steigert



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@AMPEL@med-mastodon.com

Public

The [#AMPEL](#) team develops a [#Sepsis](#) model based on [#LabData](#). It has been shown that just a few parameters from the blood count may suffice: <https://doi.org/10.1101/2022.10.21.22281348>

Preliminary findings indicate that in specific scenarios (e.g., [#ED](#)), even better predictions can be achieved.

Next year, we will release our [#OpenSource #CDSS](#), including an ML model for [#Sepsis](#) detection!

[#WorldSepsisDay](#)

2/2

[13.09.2023, 09:11:33](#) [Original]



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Public

Common things are common, and when you hear hoof beats, think of horses, not zebras!

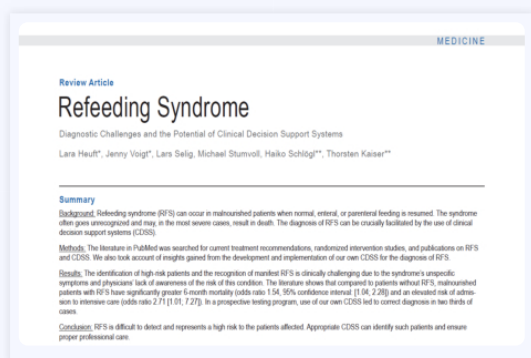
With these teaching pearls, physicians are trained to focus on common and likely diagnoses. Unfortunately, the [#Refeeding](#) syndrome is not particularly common.

To explore if [#MedicalAI](#) can detect such uncommon diseases, we have developed a laboratory based algorithm for the [#RefeedingSyndrome](#)

<https://doi.org/10.3238/arztebl.m2022.0381>

We are now able to share prospective data:

1/2



[11.09.2023, 11:07:02](#) [Original]

1 Schub



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Public

We found:

- Out of all prospective [#CDSS](#) alerts, 67% accurately detected [#Refeeding](#) syndrome
- In just 6 months, we identified 13 patients who would have missed out on therapy otherwise
- It was not possible to calculate sensitivity [Limitation]

<https://doi.org/10.3390/nu15173712>

[#MedicalAI](#) in Clinical Decision Support Systems can identify uncommon diseases, enhancing [#PatientSafety](#). AMPEL-CDSS is an [#OpenScience](#) project, we're thrilled to provide all the details!

[#AMPEL](#) [#Nutrition](#) [#AI](#)

2/2



AMPEL-CDSS

@AMPEL@med-mastodon.com

Public

How can AI succeed in hospital care? On September 28, the AMPEL team will be at the Saxon Hospital Day to present the AMPEL-CDSS as a successful example. We are looking forward to stimulating conversations!

More information: <https://khg-sachsen.de/kgs-engl/>

[#MedicalAI](#) [#AMPEL](#) [#Saxony](#) [#eHealth](#) [#CDSS](#)





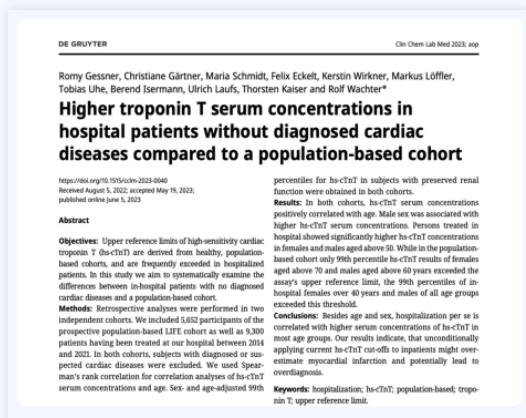
New study results incoming!

Our new study discusses the importance of high-sensitivity cardiac troponin T (hs-cTnT) as a marker of myocardial injury in the diagnosis of cardiac disease. Currently recommended reference values are based on healthy populations, but there is evidence of differences in hs-cTnT levels according to age, sex, and race, especially in hospitalized patients without diagnosed cardiac disease.

More about this under the comments or here: <https://doi.org/10.1515/cclm-2023-0040>

1/3

#CDSS



04.08.2023, 18:18:55 [Original]

1 Schub



The study included two independent cohorts: a population-based cohort of 9 882 healthy subjects from the LIFE-Adult study in Leipzig, and a hospital-based cohort of 43 328 patients from Leipzig University Hospital. In both cohorts, subjects with suspected or diagnosed cardiac disease were excluded.

2/3

[#troponin](#) [#hs-cTnI](#) [#AMPEL](#)

[04.08.2023, 18:21:37](#) [Original]



AMPEL-CDSS

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Public

Key findings:

- age and sex had a significant effect on the 99th percentile of serum hs-cTnT concentration in both cohorts
- hospitalization is associated with higher hs-cTnT levels in in most age groups than in individuals in the general population, even in patients without diagnosed or suspected heart disease
- age- and sex-specific hs-cTnT reference values may be beneficial for hospitalized patients

3/3

[#cTnT](#) [#Troponin](#) [#AMI](#) [#AMPEL](#) [#CDSS](#) [#SexBias](#) [#PatientSafety](#)

[09.08.2023, 10:49:32](#) [Original]



AMPEL-CDSS

[@AMPEL@med-mastodon.com](#)

Public

Which project has the greatest clinical benefit? This question was posed to over 5000 employees of the University Hospital [#Leipzig](#) as part of the modernization initiative "Operation Zukunft" (Operation Future).

We are very pleased that we have landed in 1st place. The feedback from our colleagues really means a lot to us!

Our [#AMPEL](#)-CDSS connects laboratory findings with additional data, detects critical situations in daily ward routines, and assists clinicians with automated alarms.

[#CDSS](#)



AMPEL-CDSS

@AMPEL@med-mastodon.com

Public

Unadjusted Creatinine Hinders Females to Get New Liver

- Standard mathematical conversion of [#creatinine](#) disadvantages females in liver transplantation prioritization
- We investigated options to reduce this gender inequality
- We identified 72 of 650 (11%) females with an original [#MELD](#) score < 20, for whom the adjusted female-as-male MELD score would be >20, thus giving them a better chance to receive a [#Liver #Transplant](#)

<https://doi.org/10.3390/jpm13060963>

[#LTx](#) [#SexBias](#) [#GenderBias](#) [#CDSS](#) [#AMPEL](#)



14.06.2023, 09:29:41 [Original]

1 Schub · 1 Favorit



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@AMPEL@med-mastodon.com

Public

More [#MELD](#) content: We recently published a better [#ML](#) approach “AMELD” which outperforms all previous MELD scores

<https://doi.org/10.1515/labmed-2022-0162>

[#LTx](#) [#Liver](#) [#AMELD](#) [#CDSS](#) [#AMPEL](#)

[14.06.2023, 09:31:04](#) [Original]



AMPEL-CDSS

@AMPEL@med-mastodon.com

Public

Enthusiasm for AI in medicine?

We are participating in the Long Night of Science in Leipzig on Friday, June 23. Come by and test our AI assistant AMPEL-CDSS in live operation!

We are not alone: With a variety of other exhibits from our colleagues of the Medical Data Science Team, it pays double.

The event starts at 6 p.m. at Philipp-Rosenthal-Straße 27. Admission free.

<https://www.wissen-in-leipzig.de/programm-nach-orten/universitaetsmedizin-leipzig-philipp-rosenthal-strasse/>



[12.06.2023, 11:46:38](#) [Original]



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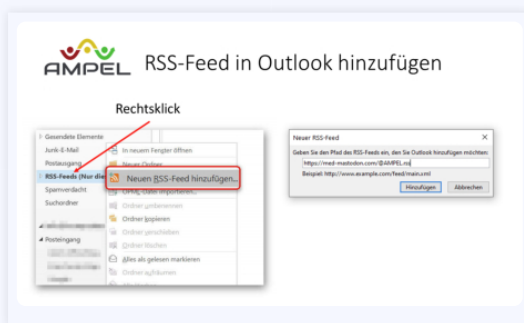
Public

How to follow mastodon with outlook:

Add ".rss" at the end of the URL (e.g. <https://med-mastodon.com/@AMPEL.rss>) and copy it.

Outlook: Right click on "RSS Feeds" and "add a new RSS-Feed". Paste the copied URL from above.

Thats it. Now you can follow all mastodon posts in your own outlook.



[31.05.2023, 11:45:58](#) [Original]



AMPEL-CDSS

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Public

AMPEL-CDSS detects patients with refeeding syndrome. The majority would have remained undetected without our decision support system. Here is the press release of the University Hospital Leipzig:

https://www.uniklinikum-leipzig.de/presse/Seiten/Pressemitteilung_7685.aspx

[#Refeeding](#) [#RefeedingSyndrome](#) [#CDSS](#) [#AMPEL](#) [#UKL](#) [#Leipzig](#)

Pressemitteilung vom 23.05.2023

Refeeding-Syndrom bleibt häufig unerkannt

Selbstentwickeltes automatisiertes Diagnose-Unterstützungssystem kann dies ändern und warnt am UKL rechtzeitig vor schweren Folgen einer Mangelernährung



Das Team der Ernährungsmedizin am UKL kommt zusammen, wenn das automatisierte System einen Alarm für einen Verdacht auf das Refeeding-Syndrom auslöst.

[26.05.2023, 14:17:28](#) [Original!]

1 Schub



AMPEL-CDSS

@AMPEL@med-mastodon.com

Public

According to an internal Google document leaked yesterday, the potential of open source appears to be significantly greater than that of the trillion dollar giant:

„But the uncomfortable truth is, we aren't positioned to win this arms race and neither is OpenAI. While we've been squabbling, a third faction has been quietly eating our lunch.

I'm talking, of course, about open source.”

<https://www.semianalysis.com/p/google-we-have-no-moat-and-neither>

[#opensource](#) [#openscience](#)

[05.05.2023, 08:59:28](#) [Original]

3 steigt · 1 Favorit

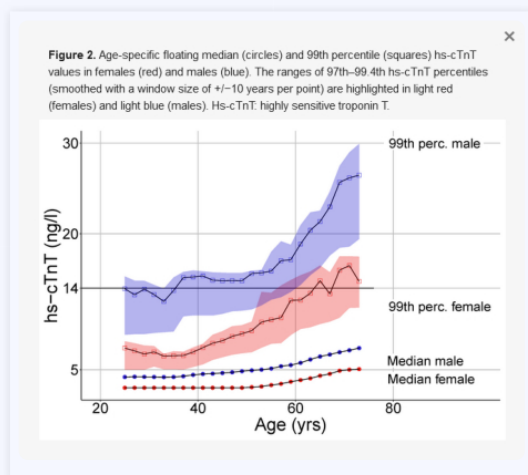


Our recent study about troponin thresholds (<https://doi.org/10.3390/jcm10235508>) shows the large differences in age- and sex-specific reference ranges. Young women are systematically underdiagnosed. The study by Arslani & Tontsch et al (described before) now suggests that this may lead to increased mortality in young women.

Gender and age-specific adjustment of troponin thresholds, is easy to accomplish, has low costs, and is likely to save lives.

[#SexBias](#) [#Patientsafety](#) [#Troponin](#) [#AMI](#) [#CDSS](#) [#AMPEL](#)

2/2



28.04.2023, 17:13:08 [Original]



Young women may be more likely to die from acute myocardial infarction (AMI) simply because laboratory decision thresholds are not adjusted!

2008-2019:

- ICU mortality for AMI increased in women
- Interventions aimed at restoring tissue perfusion were less frequently performed in women
- ICU admissions for AMI decreased more in women
- Drop in ICU admissions for AMI in 2015 in women, while introducing the use of high-sensitivity troponin in triage decisions

<https://doi.org/10.1186%2Fs13054-022-04299-0>

1/2

[28.04.2023, 17:11:54](#) [Original]

1 Schub



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@AMPEL@med-mastodon.com

Public

Clinical decision support, by its own definition, must be translational research. We are looking forward to the DMEA, which will take place next week in Berlin. On 25.04. we will be there ourselves. Want to learn about our research? Feel free to contact us, we are looking forward to meet you there.

<https://www.dmea.de/en/>

[21.04.2023, 15:59:50](#) [Original]



AMPEL-CDSS

@AMPEL@med-mastodon.com

Public

Are you interested in AI in medicine? We've given our website a major redesign. In addition to information about our project to support clinical decisions of physicians and nurses with real-time algorithms, there is now a great Mastodon implementation!

<https://ampel.care>

[#Mastodon](#) [#Mastodonimplementation](#) [#Ehealth](#) [#Datascience](#) [#AMPEL](#)



[22.02.2023, 08:59:03](#) [Original]



AMPEL-CDSS

@AMPEL@med-mastodon.com

Public

A major challenge in AI medicine is publicly available datasets [#Opendata](#)

We therefore publish our [#ML](#) data (as well as our code [#Opensource](#)), enabling a wide range of future research.

Included in the publication of [#AMELD](#) (see previous post), we released another [#Dataset](#) + an associated [#Rstats](#) package with a variety of integrated functions:

<https://github.com/ampel-leipzig/ameld>

```
(R: remotes::install_github("ampel-leipzig/sbcddata")
```

[#Openscience](#) [#Opensource](#) [#MELD](#) [#LTx](#) [#Livertransplantation](#) [#AMPEL](#)
[#CDSS](#)

[14.02.2023, 12:39:21](#) [Original]



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@AMPEL@med-mastodon.com

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[#ML](#) outperforms classic scores. One of these is the end-stage liver disease prediction model for 90-day mortality ([#MELD](#))

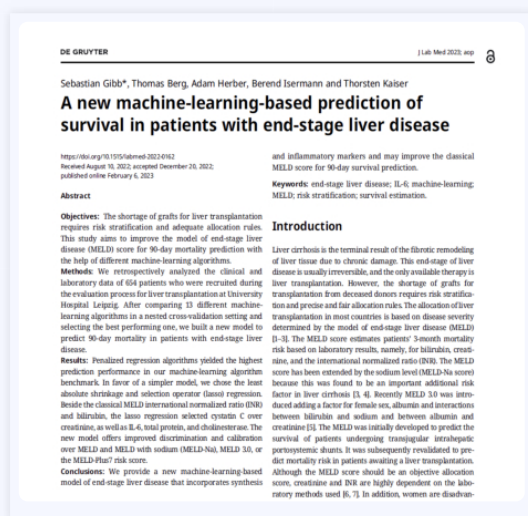
- We derived an ML model AMELD which outperforms MELD, MELD-Na, MELD 3.0, and MELD-Plus7

- How? AMELD extends the classic MELD predictors INR, bilirubin, and cystatin C / creatinine to include total protein, cholinesterase and [#IL6](#)

<https://doi.org/10.1515/labmed-2022-0162>

Using more accurate AMELD prediction may improve [#CDS](#) for performing liver transplants

[#AMPEL](#) [#CDSS](#) [#LTx](#) [#Liver](#)



[13.02.2023, 12:57:44](#) [Original]

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Today was the kick off meeting of [#INTERPOLAR](#) a use case of the medical informatics initiative in Germany [#MII](#)

The interoperable structures of the German university hospitals will be used to identify patients at risk for medical related problems and to perform an intervention with pharmacy visits. Our project is connected on several levels and looks forward to further collaboration. Let's harness the potential of [#eHealth](#) in clinics!

<https://www.medizininformatik-initiative.de/en/about-initiative>

[#CDSS](#) [#datascience](#) [#riskscore](#)

[10.02.2023, 12:00:39](#) [Original]



Today we also publish new data on the laboratory parameter serum creatinine and its use in staging of acute kidney injury:

- Women and elderly patients are systematically underdiagnosed
- A sex- and age-adapted approach is necessary to address this discrimination

Our aim is to automatically identify undetected medical conditions and integrate them into the clinicians' digital workflow.

<https://doi.org/10.3390/jcm12031092>

[#CDSS](#) [#patientsafety](#) [#AKI](#) [#KDIGO](#) [#Troponin](#) [#Creatinine](#)

2/2



01.02.2023, 14:32:25 [Original]

1 Schub



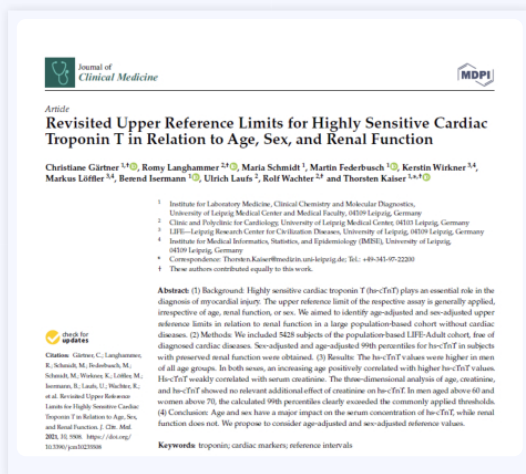
The evaluation of laboratory findings may lead to under- and overdiagnosis depending on age and sex.

We have already shown this for the laboratory parameter cardiac troponin T:

- Age and sex have a major impact on the serum concentration of troponin, while renal function does not
- The troponin values were higher in men of all age groups
- In men (>60y) and women (>70y), the calculated 99th percentiles clearly exceeded the commonly applied thresholds

<https://doi.org/10.3390%2Fjcm10235508>

1/2



01.02.2023, 14:30:16 [Original]

1 Schub · 2 Favoriten



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Happy New Year!

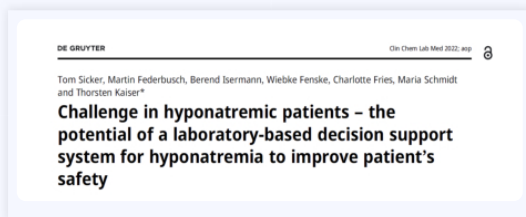
Let's start with our first publication 2023: <https://doi.org/10.1515/cclm-2022-0883>

Late follow-up measurements in patients with hyponatremia correlate with:

- Low sodium correction
- Discharge in hyponatremic states
- Inadequate fast correction
- Length of hospital stay

AMPEL aims to increase [#PatientSafety](#) by alerting these cases. Results of our prospective evaluation will be published soon.

[#Hyponatremia](#) [#CDSS](#) [#OpenScience](#)



[03.01.2023, 11:31:51](#) [Original]

1 Schub



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We are excited about two early Christmas gifts. Thank you!

Patient Blood Management Award (<https://www.pbm-academy.de>)

SAP Innovation Award (<https://www.sap.com/idea-place/sap-innovation-awards>)

[#PBM](#) [#PatientBloodManagement](#) [#SAP](#) [#CDSS](#)



[14.12.2022, 10:11:52](#) [Original]



AMPEL-CDSS

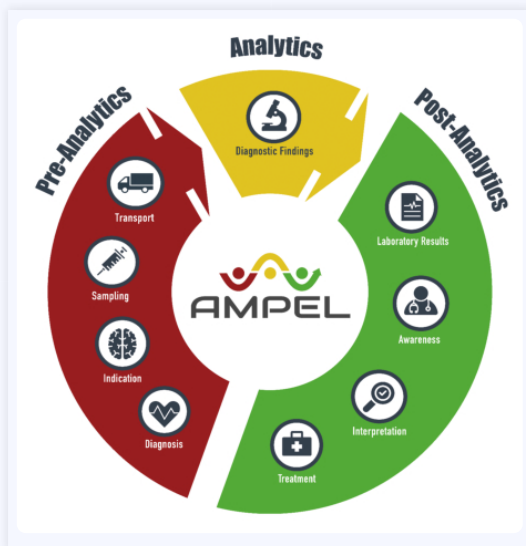
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[#Introduction](#)

The [#AMPEL](#) project operates a clinical decision support system in routine care and is continuously researching its application. We focus on increased [#PatientSafety](#) and improved diagnostics by harnessing the potential of [#DigitalMedicine](#). In three German hospitals (>1500 beds), [#AI](#) models based mainly on laboratory data are applied in a randomized controlled setting. The project is funded by the German government [#KHZG](#).

[#CDSS](#) [#DataScience](#) [#OpenScience](#) [#UniLeipzig](#)



[09.12.2022, 12:46:48](#) [Original]

1 Favorit