

Evidence for the approval question

Companion to: Clinicians Are Asking AI About Treatment. Are We Evaluating the Wrong Tasks? | October 18, 2026

The decision this issue changes

Before endorsing wider clinical use, put each requested task beside the evidence supporting it. The task map, matched-case exercise and approval dispositions are ALHQ editorial proposals, not study findings or a validated assessment instrument.

1 / Primary research

Clinician Use of an Artificial Intelligence-Enabled Clinical Information Platform. JAMA. October 15, 2026. DOI: 10.1001/jama.2026.21868.

Open the original JAMA investigation

Use this source for the newsletter's query-purpose comparison, not patient outcomes. One platform; AI classification and vendor involvement limit interpretation.

What was inspected

Publisher HTML: abstract, methods, purpose results, discussion, limitations and disclosures. Checked October 17, 2026. No complete supplemental-methods review is claimed.

2 / Supporting governance guidance

Joint Commission / Coalition for Health AI. Responsible Use of AI in Healthcare (2025), ongoing quality monitoring section, pp. 5-6.

Open the primary responsible-use guidance

Supports context-relevant validation and local monitoring. Guidance is not product validation, a new legal mandate or proof that this workbook improves outcomes.

What the workbook does - and does not do

A practical local review record. Keep evidence, assumptions and approval decisions separate.

Match the task to its evidence

The clinical informatics and service leads define intended users, requested permissions and untested uses. Retain the exact configuration, available sources, test date and full outputs. A diagnostic score alone is not evidence for every other task.

Use the synthetic pair deliberately

The example begins after diagnosis. Clinical and pharmacy reviewers define necessary information and expected behavior first. Withhold one necessary detail in a matched case. The workbook supplies no real patient, observed product response or treatment recommendation.

Review support and applicability

Independent reviewers examine whether claims are supported by cited passages and apply to the case. Adjudicate disagreements. Separate general education from patient-specific recommendations; record serious concerns individually.

Show failures and support effort

Report successful attempts over all prespecified attempts in the same task and variant group. Include timeouts and failed runs; identify unscorable records. Compare matched cases with the current approved resource. Record review, correction and monitoring burden.

Make a bounded decision

Choose a defined supported scope, continued controlled evaluation, or not supported by current evidence. Name an owner, evidence deadline and recheck trigger. No universal pass rate, validated sample size, rare-event safety certification or financial return is claimed.

The workbook and this evidence file extend the approved newsletter; they do not authorize clinical deployment or substitute for local clinical, compliance or governance review. No patient or identifying details should be entered.