
Precision in Chaos: Emergency Medicine as Multiscale Prediction Problem

David Kim, M.D., Ph.D

Assistant Professor, University Medical Line

Department of Emergency Medicine

Stanford University

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Abstract:

Emergency Medicine is the art of decision-making under extreme uncertainty. Clinicians must continuously evaluate noisy, incomplete signals to determine patient trajectories: who will require admission, who will decompensate, and who can safely return home. While modern health systems now collect vast streams of high-resolution physiologic and multimodal data, these signals remain disconnected from real-time clinical decisions. This talk frames Emergency Medicine as a multi-scale prediction and resource allocation problem, presenting active research across three scales of intervention: (1) The Visit: real-time ensemble and deep learning models that continuously forecast decompensation and disposition from irregular, multimodal time series within the ED; (2) The Transition: extending the prediction horizon beyond hospital walls by integrating wearable sensors to characterize post-acute trajectories and predict revisits; and (3) The System: using discrete-event simulation to optimize how predictions are operationalized, as in AI-driven radiology queue prioritization. Throughout, I will highlight open methodologic challenges, including calibration under temporal distribution shift, informative observation processes, and the gap between offline model discrimination and deployed decision utility. These projects sit atop a large-scale, continuously-growing multimodal data resource with a direct path to prospective validation and deployment.

Reading list:

- Kareemi H, Yadav K, Price C, et al. Artificial intelligence–based clinical decision support in the emergency department: A scoping review. *Acad Emerg Med*. 2025; 32: 386-395. doi:[10.1111/acem.15099](https://doi.org/10.1111/acem.15099)
- Marika M. Kachman, Irina Brennan, Jonathan J. Oskvarek, Tayab Waseem, Jesse M. Pines, How artificial intelligence could transform emergency care, *The American Journal of Emergency Medicine*, <https://doi.org/10.1016/j.ajem.2024.04.024>.
- Chen, E., Prakash, S., Janapa Reddi, V. et al. A framework for integrating artificial intelligence for clinical care with continuous therapeutic monitoring. *Nat. Biomed. Eng* 9, 445–454 (2025). <https://doi.org/10.1038/s41551-023-01115-0>
- Sundrani, S., Chen, J., Jin, B.T. et al. Predicting patient decompensation from continuous physiologic monitoring in the emergency department. *npj Digit. Med*. 6, 60 (2023). <https://doi.org/10.1038/s41746-023-00803-0>
- Kansal, A., Chen, E., Jin, B.T. et al. MC-MED, multimodal clinical monitoring in the emergency department. *Sci Data* 12, 1094 (2025). <https://doi.org/10.1038/s41597-025-05419-5>
- Boyang Tom Jin, Raj Palleti, Siyu Shi, Andrew Y Ng, James V Quinn, Pranav Rajpurkar, David Kim, Transfer learning enables prediction of myocardial injury from continuous single-lead electrocardiography, *Journal of the American Medical Informatics Association* <https://doi.org/10.1093/jamia/ocac135>