



# CHATEHR

Your AI Copilot for Clinical Work

Already deployed at Stanford Health  
care with over 150 doctors



# Finally, a software doctors love.

ChatEHR is your clinical sidekick—an AI built at Stanford to help you spend less time charting and more time being a doctor.

**It summarizes the full chart and lets you ask what matters—no more digging through pages of notes.**

## Provider Economics Breakdown

Metric	Baseline	With ChatEHR	Improvement
Daily Patient Visits	12	12.5	+4.2%
Documentation Time/Visit	10 min	8 min	-20%
After-Hours Documentation	1.5 hours	0.9 hours	-40%

## Chart less. Think more. Go home on time.

**“OdinMD is like having a resident who never forgets anything and never slows you down. I finish notes faster, catch more details, and actually leave on time.”**

— Dr. Sarah Lin, Internal Medicine, Stanford Health





# Stanford Health Care Deployment

## User Growth Trajectory



— Actual Growth    — Projected Growth

**150+**

Current Active Users  
*Stanford Health Care*

**3,000**

Physicians/APPs by Sep '25  
*Expansion plan*

**30,000**

Full Deployment by Jan '26  
*All Stanford employees*

**Atlanta**

Small Practice Pilot  
*advancedMD integration*

## Key Champions & Validation

**Dr. Nigam Shah:** "ChatEHR's AI workspace is transforming how our clinicians interact with patient data, saving valuable time."

**Anurang Revri:** "As Chief Enterprise Architect, I've seen ChatEHR integrate seamlessly with our systems while maintaining security."

**Dual-Track Strategy:** Enterprise validation at Stanford + small practice validation in Atlanta for comprehensive market fit.

# The ChatEHR experience



Patients

James Brown  
MRN: 1196

Sarah Connor  
MRN: 1984

@Patient... e.g. 'add diagnosis of hypertension'

James Brown  
MRN: 1196 DOB: 1969-01-05 56y, Male

Procedure Note

Date: 23rd of July 2025  
Patient Name: James Brown  
MRN: 1196  
Date of Birth: 5th of January 1969  
  
Procedure: Jellybean removal  
Indication: Too many jellybeans  
Physician: Dr. Jellybelly  
Assistant: ASSISTANT IF APPLICABLE  
  
Pre-procedure:  
Informed consent obtained: Yes  
Time out performed: No  
Patient identification verified: Yes

AI Assistant

Contextual suggestions for the active chart.

Complete Missing Vitals

Heart rate and O2 saturation are missing from the pre-procedure vitals.

Add Vitals

Specify Procedure Details

Describe the patient position, sterile technique, and anatomical approach.

Add Details

Elaborate on Findings

Detail the findings from the procedure, such as size and color of the object removed.

Add Findings

Add Assistant Name

The assistant's name is marked as applicable but not provided.

Add Name

## Clinical AI Workspace

Natural language commands,  
@Patient/@Population queries

## Clinical Copilot

MRN-based chat, automated notes,  
saves 1-2 hours daily

## AI Worker Automation

Prior auth, registries, quality  
reporting automation

## Partner Platform

Third-party apps, secure containers,  
marketplace



# Results That Matter

See what CHATEHR delivers — in real workflows, with real clinical impact.

## 70% Reduction in Time Spent Reviewing Charts

Clinicians cut through dozens of pages of notes with instant, AI-generated summaries.

## 3x Increase in Cross-Team Communication

Secure, real-time chat replaces fragmented inboxes and pagers, improving coordination across nurses, physicians, and specialists.

## 2x Faster Decision-Making at the Point of Care

Smart prompts bring the most relevant data forward — when it counts.

## ~50% Reduction in Communication Software Spend

By consolidating messaging, AI-assistants, and clinical summarization into one platform, AegisEHR eliminates the need for multiple point solutions — reducing license overlap and integration overhead.



# Case Study: Accelerating Diagnosis with ChatEHR

## Clinical Context

A complex oncology case landed in the hands of a leading care team.

- 6 expert pathologists
- 70+ stains and specialized studies
- Still no definitive diagnosis

The case: a mysterious, aggressive cancer with no clear origin.

## The Turning Point

A clinician asked ChatEHR “Any prior skin-cancer history?” In seconds, it surfaced a buried note: “Rare, aggressive melanoma; treated.” That one insight led to the right test, a fast diagnosis, and immediate treatment—no delays, no dead ends.

## The Real ROI

Measurable Gains

- Avoided unnecessary workups and costly repeat testing
- Saved hours of clinician investigation time
- Most importantly: a life placed on a better path, sooner







# Technical Architecture & Security



## Security & Compliance

- **HIPAA on Azure:** Microsoft BAA coverage, GA models only (GPT-4, GPT-3.5)
- **Zero Data Retention:** Prompt storage disabled, no training on customer data
- **Stanford Validation:** Already deployed with 150 users, scaling to 30,000
- **Certification Path:** SOC 2 Type I → Type II → HITRUST roadmap



## Technical Architecture

- **Workspace Intelligence:** Natural language clinical operations (@Patient, @Population)
- **FHIR-Native Engine:** SMART on FHIR R4, Bulk API, OAuth 2.0 + PKCE
- **AI Workers:** Containerized tasks for prior auth, registries, quality reporting
- **Open-Core Model:** Self-host or SaaS with partner app marketplace



# Appendix A: Detailed ROI Analysis

## Time Savings & Financial Impact

25 min/day

Average Time Saved

\$14.3K/year

Revenue per Provider

7.9x

ROI Multiple

3-6 months

Payback Period

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Daily Patient Visits	12	12.5	+4.2%
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After-Hours Documentation	1.5 hours	0.9 hours	-40%
Annual Revenue Impact	\$660K	\$674.3K	+\$14.3K

## Enterprise Value Creation

Hospital Size	Providers	Annual Savings	5-Year NPV
Small (50-200 beds)	100	\$1.43M	\$5.7M
Medium (200-500 beds)	300	\$4.29M	\$17.2M
Large (500+ beds)	800	\$11.44M	\$45.8M

## Evidence-Based Outcomes

- **Time Savings Range:** 0.6 min/note to 20 min/day (NEJM Catalyst 2025, JAMIA 2024/2025)
- **Burnout Reduction:** 20-40% reduction in "pajama time" (AMA/TPMG multi-site pilots)
- **Quality Improvements:** 15% increase in quality measure capture
- **Provider Satisfaction:** >80% System Usability Scale scores
- **Stanford Validation:** Currently measuring actual time savings and satisfaction metrics



# Want to try it?

We're looking for doctors who:

- Want to spend more time thinking clinically, not clicking
- Believe better care starts with better tools
- Are open to testing something built by fellow clinicians
- Don't have time for tech headaches—but are open to something simple that just works

**You don't need to be tech-savvy—just curious about how AI can help you care better, faster.**

👉 Schedule a 15-Min Demo and email us at [patrick@green-tokens.com](mailto:patrick@green-tokens.com) and we'll set it up.

