|  |  |
| --- | --- |
| **Name:**  **Developer:**  | **Inquires or to report an issue:** abc@abc.com or +1 (999) 999- 9999 |
| **Release Stage: Release Date: Version:** **Global Availability: Regulatory Approval, If applicable:**  |
| **Summary:****Keywords:** | **Uses and Directions:** * **Intended use and workflow:**
* **Primary intended users:**
* **How to use:**
* **Targeted patient population:**
* **Cautioned out-of-scope settings and use cases:**
 |
| **Warnings** |
| * **Known risks and limitations:**
* **Known biases or ethical considerations:**
* **Clinical risk level:**
 |
| **Trust Ingredients** |
| **AI System Facts:*** **Outcome(s) and output(s):**
* **Model type:**
* **Foundation models used in application, if applicable:**
* **Input data source:**
* **Output/Input data type:**
* **Development data characterization:**
* **Bias mitigation approaches:**
* **Ongoing Maintenance:**
* **Security and compliance environment practices or accreditations, if applicable:**
* **Transparency, Intelligibility, and Accountability mechanisms, if applicable:**

**Transparency Information:** * **Funding source of the technical implementation:**
* **3rd Party Information, If Applicable:**
* **Stakeholders consulted during design of intervention (e.g. patients, providers):**
 |
| **Key Metrics** |
|

|  |  |  |
| --- | --- | --- |
| **Usefulness, Usability, and Efficacy**  | **Fairness and Equity** | **Safety and Reliability** |
| **Goal of metric(s):**  | **Goal of metric(s):** | **Goal of metric(s):** |
| **Result:** | **Interpretation:** | **Result:** | **Interpretation:** | **Result:** | **Interpretation:** |
| **Test Type:** | **Test Type:** | **Test Type:** |
| **Testing Data Description:** | **Testing Data Description:** | **Testing Data Description:** |
| **Validation Process and Justification:** | **Validation Process and Justification:** | **Validation Process and Justification:** |

 |
| **Resources** |
| * **Evaluation References, If Available:**
* **Clinical Trial, If Available:**
* **Peer Reviewed Publication(s):**
* **Reimbursement status, if applicable:**
* **Patient consent or disclosure required or suggested:**
* **Stakeholders consulted during design of solution:**
 |

Applied Model Card Template

NOTE: For instructions, references, resources, contributors, and disclaimers please refer to the full documentation located at [www.chai.org](http://www.chai.org).

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