DUK-C

INSTITUTIONAL PILOT PROGRAM
ONE-PAGE OVERVIEW

A 90-day, no-cost pilot of guideline-based clinical decision support.

Your clinicians evaluate DUK-C on your own workflows — full premium access, structured feedback your program owns, and no commitment until the results are in.

BUILT BY PEOPLE WHO PRACTICE MEDICINE · Founded by Johns Hopkins graduates **Marko Lazović**, CEO & **Bianca Galasso, D.O.**, Chief Medical Officer

90 days	100 users	Full	$0
EVALUATION PERIOD	ACROSS DEPARTMENTS & ROLES	PREMIUM ACCESS, ALL MODULES	NO COST, NON-BINDING

WHAT YOUR TEAMS GET

Clinical Pearl Library
The heart of DUK-C: a full specialty library of evidence-based guideline blurbs — concise, high-yield summaries clinicians can act on at the bedside.

Treatment Protocol Center
Guideline-driven outpatient, inpatient & emergency pathways with first-line therapy, dosing, and safety keys for every protocol.

Clinical Decision Tools
Risk scores, disposition, and renal & cardiac calculators with unit conversions.

EKG Interpretation Center
Pattern recognition, STEMI & arrhythmia criteria, clinical pearls, quiz mode.

Nothing to procure, nothing stored off-device
DUK-C stores no identifying patient information — clinical inputs stay on the device, so the pilot raises no PHI concerns and needs no BAA. DUK-C supports, and never replaces, the treating clinician's judgment.

HOW THE PILOT WORKS

1. **WEEK 1** — **Kickoff & onboarding**
   We set up access and onboarding for up to 100 clinicians, coordinating with your team.

2. **WEEKS 2–11** — **Live evaluation**
   Clinicians use DUK-C in real clinical and teaching workflows — no stripped-down trial, no feature gates.

3. **WEEK 12** — **Structured feedback**
   A short survey — owned by your program — captures clinical usefulness, educational value, workflow fit, and content trust.

4. **CLOSE** — **Results review & decision**
   We review your team's feedback together, so a licensing decision rests on firsthand evidence.

After the pilot: licensing sized to your organization — from single departments (25–100 users) to residency-wide rollouts (100–500) and health-system deployments (500+), all custom-quoted.

DUK-C · Guideline-based clinical decision support, at the bedside.
The pilot is no-cost and non-binding — a measured path to an evidence-based licensing decision.

Schedule a Briefing

dukc.app