

Medical Affairs AI TechKNOWlogy Dashboard

Strategic Navigation for High-Impact Artificial Intelligence

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The Flight Plan: Your Dashboard at a Glance

- **[The View from the Flight Deck:](#)** A quick executive briefing on the week's most important shift in AI and what it means for Medical Affairs.
- **[The Mach Meter:](#)** Move beyond simple chat prompts into deep practical integration of AI into real-world workflows within firewalled environments.
- **[The AI Flight Manual:](#)** Tactical, step-by-step procedures and SOPs for MSLS by MSLS in the field.
- **[Full Throttle:](#)** A quantifiable workflow of the week for common tasks with real ROI.
- **[The Captain's Perspective:](#)** Hard-hitting perspectives from dynamic leaders on the reality of AI implementation.
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- **[The Mechanic's Tool Box:](#)** The "Low-Hanging Fruit" of AI capabilities that solve immediate issues.

- [The Radar](#): A curated scan of groundbreaking regulatory and technical news that actually matter to BioPharma.
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The View from the Flight Deck

Are you leading an AI-Driven organization or are you fighting it?

In March 2026, the executive mandate for Medical Affairs continues to evolve. We are moving past the era of using AI for simple information drafting and entering a new phase of Intelligence Orchestration.

Intelligence Orchestration is the process of coordinating diverse AI models, agents, and data flows to work as a single, cohesive system. It is the connective tissue that allows a Medical Affairs organization to move beyond basic use of AI and toward a synchronized engine that powers evidence generation, insights, and engagement simultaneously. Senior leadership expects to see not just how much time was saved but how much strategic advantage can be extracted. Leaders can expect to be evaluated on their ability to integrate AI into day to day activity without losing scientific integrity or regulatory confidence. This shift requires a new breed of Medical Affairs executive, one who combines deep therapeutic expertise with the digital fluency to oversee robust AI enabled operating models.

One example for medical affairs of an orchestrated workflow is a modern agentic system which continuously monitors new publications and real time social sentiment. When it detects a shift in sentiment, such as emerging skepticism about a specific trial endpoint, the system automatically creates a tailored scientific briefing, flags the most relevant KOLs for engagement, and drafts a compliant response for the medical information team.

With this capability, AI becomes not just a tool for efficiency, but rather a lever for insight and competitive positioning. The organizations that will thrive are those moving to structure and treat AI as a core component of their scientific and regulatory strategy rather than a peripheral technology experiment. Leadership in 2026 isn't about being the smartest person in the room. It's about being the most effective conductor of the digital orchestra.

Here's the so what: AI is no longer a nice to have and be familiar with technology but a structural necessity. Organizations should start developing and approving AI into their workflows. Using Agentic AI to automate repetitive strategic tasks to stay ahead of the competition is critical for success. Need help doing this? [Contact Triple Helix Strategy](#).

The Mach Meter

Auditing the Medical Information Omnichannel Flight Path

Effective omnichannel strategies fail when initiatives prioritize broad channel coverage over specific friction points where scientific communication breaks down. Instead of the usual speculating on website portal features, agentic AI performs a baseline audit of dark data (the unstructured logs of search

queries and abandoned inquiries) that reveal where the narrative becomes inaccessible to a professional audience.

By analyzing the relationships between search terms and bounce rates on technical pages, an agent pinpoints where an HCP need is not met by the current content structure. This provides a clear objective for a pilot: the creation of modular, machine readable knowledge blocks that surface automatically when behavioral triggers are detected.

Omnichannel Diagnostic Prompt Example

The following prompt allows a team to audit an HCP medical information portal and identify a high value starting point for an omnichannel initiative. To move from a generic audit to a strategic roadmap, the AI requires specific guardrails and context. Before running the diagnostic, the following should be established:

1. **Strategic Grounding:** Provide the current Medical Affairs strategic pillars or launch excellence priorities. This ensures the AI prioritizes gaps that align with organizational goals rather than just high volume noise.
2. **Data Provenance:** Explicitly define the source of the logs (e.g., standard web analytics vs. gated CRM portal data) and the specific timeframes to account for seasonal congress cycles.
3. **Compliance Guardrails:** Include a constraint that the output must flag any areas where requested information would constitute an off-label response, ensuring the suggested pilot follows established medical inquiry protocols.

Here is the prompt: Analyze the last 12 months of anonymized search logs and dwell times from the HCP medical information portal. Look specifically for short dwell times of less than 15 seconds immediately followed by a site exit. Identify the top three clinical topics where an HCP intent results in high bounce rates or a failure to download supporting documentation.

For the highest priority gap, provide:

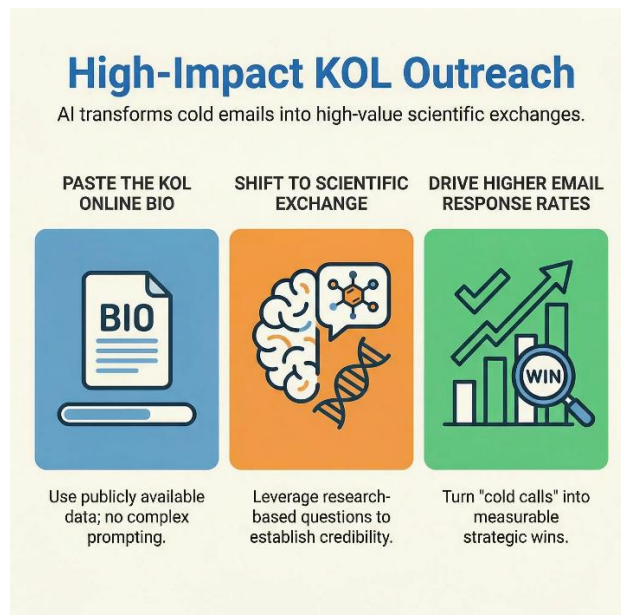
1. **Behavioral Trigger:** The specific sequence of clicks or search terms indicating an HCP is seeking deeper data than provided.
2. **Content Assessment:** The internal data silos containing the information needed to resolve this query.
3. **Pilot Recommendation:** A machine readable knowledge block to be surfaced automatically when this trigger is detected.

Compliance reminder: Use the AI output as a draft for a cross functional review between Medical Information and Field Medical teams to validate that the identified gap reflects a real world clinical need.

The AI Flight Manual

Cold Email Outreach

[Try out this AI tool](#) to create an introductory email to a KOL you are trying to meet with. All you need to enter is the URL for their online biography. That's it! No prompting, no special instructions, just the URL of the bio and let the AI do the heavy lifting. The output is an email that engages the KOL without begging for a meeting (you can ask for that after you establish the scientific exchange). Using this tool is so simple it feels like cheating. It's like having your own administrative assistant who never sleeps!



Call for best practices: Are you an MSL using AI in the field and want to share your best practice? Both you and your idea (removed of any corporate specifics) will be highlighted. [Send me your idea to be featured in an upcoming issue.](#)

Full Throttle

Does IT or Compliance block every AI idea?

By and large, BioPharma companies carry similar risks. However, a few companies have completely different strategic advantage realities because they are willing to accept different AI risks. Most allow employees to do simple queries within a firewalled LLM (aka Large Language Model or simply "AI"). Sometimes, use cases get approved to experiment with going beyond a simple "get background on this KOL's research interests" request. However, these use cases are infrequent and are surrounded by endless worries around a data leakage happening. But there are companies, with the exact same risks, utilizing AI to its fullest. They quickly move from a small AI pilot to organization wide acceptance. Doing this gives them a tremendous strategic advantage. The difference? Most likely a senior executive is

willing to assume a bit more risk. Or more to the point, an executive who understands the risk and is willing to accept that to gain an advantage over what competitors are doing, which is basically just worrying. Every month spent worrying is a month where your competitor's agentic models are getting smarter on *your* target market's data.

Here's a prompt to help you pressure test where your organization stands and worry less about an unlikely and devastating data leak:

Cut and paste this into your LLM...um...Firewalled AI and edit the sections in the brackets:

You are an AI adoption auditor. I work at a [biotechnology or big pharma company] with [X employees]. Our current AI policy is: [paste policy or describe it]. Our competitors in this industry are using [tools you would like to use].

Your task:

- > Identify which of our current restrictions are based on outdated assumptions vs. legitimate risks.
- > Identify compliance friction points where the cost of inaction outweighs the mitigated technical risk.
- > List 3 peer companies in regulated industries (biotech, pharma, healthcare) that have deployed enterprise AI without incident (use web search to look up the most recent announcements and the most credible companies possible). Constraint: only list companies that have made public press releases or case studies regarding their AI frameworks. If no public data exists for a specific company, state 'Data Not Publicly Disclosed' to maintain scientific integrity.
- > Draft a one page memo I can send to executive leadership that separates real risks from fear, uncertainty, and doubt, with specific mitigations for each real risk.
- > Include a cost of inaction section estimating what we lose per month by not deploying

Keep in mind: This isn't to blindside your compliance or legal team. Use the output to give your leadership the information they need to make a sound and informed decision instead of defaulting to "no". Better yet, [contact me](#) for guidance.

Strategic AI Navigation with Triple Helix Strategy



Is your AI implementation hovering in a holding pattern due to compliance concerns or a lack of clear ROI? Triple Helix Strategy provides expert consulting services designed to modernize Medical Affairs departments through intentional integration of Artificial Intelligence. Move beyond using AI for generic simple queries. Instead, focus on using AI for strategic impact, resource context, and specialized automatic agentic workflows that deliver measurable returns on investment while maintaining scientific integrity, data safety, and compliance.

The Triple Helix Impact: Elevating Medical Affairs

Medical Affairs as Business Driver

Transition from a reactive cost-center to a predictive, insight-driven strategic partner.

Showcase MSL Strategic Impact

Align field metrics with C-Suite priorities to demonstrate the true value of your MSL team.

AI with Measurable ROI

Replace manual "busy work" with high-efficiency workflows that deliver quantifiable returns.



[Schedule your strategic briefing](#) and clear your organization for a high-speed takeoff in the 2026 landscape.

The Captain's Perspective

Call for Flight Leads: Are you a medical affairs leader using AI?

[Contact me with how you are using AI to lead.](#)

The Checklist

The Human in the Loop SOP

As we all know, the primary risk for using AI in Medical Affairs is not the lack of data but the presence of plausible falsehoods (aka hallucinations). While agentic systems are a great drafting desk for literature summaries and scientific responses, the FDA and EMA have made it clear that accountability cannot be outsourced to an algorithm. To ensure your scientific exchange remains airworthy, follow this three-step verification protocol:

Step 1: The Source Check. Never accept a summary that does not provide direct page anchored citations. In the 2026 GxP environment, an unreviewed AI draft does not meet regulatory expectations for data integrity. Verify that the AI is not just pulling from an abstract but has interrogated the full text, including the supplemental tables where the real evidence is often buried.

Step 2: The Hallucination Stress Test. AI models are statistically driven to be helpful, which is a polite way of saying it will confidently lie to your face if it doesn't know the answer. Think of it as a very eager intern: great for the first draft, but don't let them sign off on the regulatory filings without a senior pilot in the seat. Test the output by asking the agent to identify the specific limitations of the study it just summarized. If the AI cannot provide a nuanced critique of the methodology or sample size, it is likely interpolating rather than analyzing.

Step 3: The Context Validation. A model may achieve 94 percent accuracy in sentiment classification, but it lacks the human intuition to understand the specific scientific tension in a KOL relationship. Your role is to take the AI generated evidence and wrap it in the clinical context that only a human peer can provide.

At the end of the day, AI sets up the approach, but humans are responsible for the landing. You are the final authority on scientific accuracy. Always use your expertise to make sure it is not a digital hallucination.

The Mechanic's Tool Box

Looking for a new Medical Affairs position outside your current company?

Use a structured prompt framework to help you learn about the company in prep for an interview:

Cut and paste this prompt into your AI LLM:

You are an expert level career coach.

Task: Using information that is publicly available including social media, conduct a thorough search of [COMPANY NAME] and create a briefing using these sections:

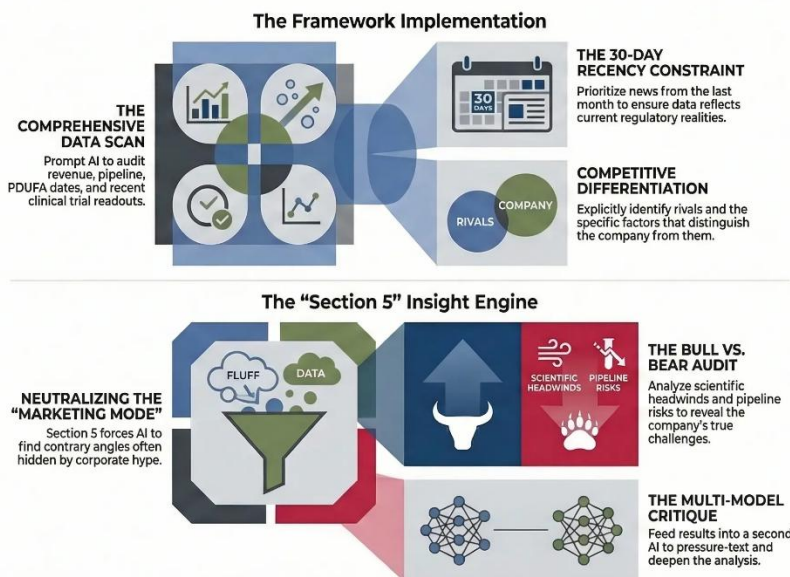
1. Key information on revenue, pipeline, PDUFA dates, clinical trial read outs, press releases that pertain to medical affairs
2. Who is the competition
3. What differentiates this company from their competition
4. What is the biggest risk if I join this company
5. One thing that is the most misunderstood about this company
6. Give 5 questions I should ask about the company
7. Flag anything that is uncertain or concerning by auditing the Bull Case vs. Bear Case for this company's pipeline to identify potential scientific headwinds

Constraint: prioritize news and press releases from the last 30 days to ensure PDUFA dates and trial readouts are current.

Section 5 will likely be the most insightful for you. By asking AI to do this, it forces AI out of marketing mode and to find an angle that is contrary to all the company marketing hype it will find.

THE STRATEGIC INTERVIEW ARCHITECT

This framework leverages "The Mechanic's Tool Box" methodology to transform an AI into an expert career coach. By using specific constraints and a "Bull vs. Bear" audit, users can bypass public relations fluff to identify real scientific headwinds.



Expert Tip: Feed the entire result into either a separate chat in the same AI or in a different AI and ask it to critique the review that your AI coach provided. This will force a second search and deliver a deeper analysis of the organization that you are interested in working for.

Hiring managers: do this when you have an open position. You will gain valuable knowledge on what candidates are learning about your company. This will help you prepare better for any tough questions you may be asked.

Want to create an AI tool with a valuable ROI? [Contact Triple Helix Strategy](#)

The Radar

The 81% Physician Tipping Point: Is Your Data AI-Ready?

A major update from the American Medical Association (AMA) confirms we have reached a definitive tipping point: 81 percent of physicians now use AI in their professional practice, a massive leap from just 38 percent in 2023. While many executives still view AI as a future project, a strong majority of your HCP customers are already using it in their practice.

The top use case cited by 39 percent of physicians is summarizing medical research and standards of care. This represents a fundamental shift in how scientific information is consumed. If 4 out of 5 doctors are using an AI agent to read your phase 3 data, the most critical question for Medical Affairs is no longer is our data accurate but is our data optimized for their tools?



To stay visible, scientific content must move beyond the dark data of static, unstructured PDFs that AI models struggle to parse. Instead, summaries must be structured for machine readability: modular, tagged with clear metadata, and anchored by the direct source that 88 percent of physicians demand for safety and validation.

This digital migration is happening where doctors already live. LinkedIn reported a 21 percent increase in physicians on its platform this year, with 29 million members engaging in discussions around drug related content. It is a peer-to-peer ecosystem where scientific noise can quickly become the narrative. When 81 percent of your audience is using AI to scan data for their own education and 29 million are discussing the results in a professional town square, your medical strategy cannot afford to be a static document.

Takeaway: Companies are no longer just competing with other drugs, they are competing for algorithmic relevance. If scientific narratives aren't structured to be AI ready, you risk it being off the radar and not in the one paragraph summary the physician reads in between patients.

The Logbook

Got ideas for an upcoming issue? Send me your comments: pminne@TripleHelixStrategy.com



The Medical Affairs AI TechKNOWlogy Dashboard is published by [Triple Helix Strategy](#). We provide strategic navigation for medical affairs leaders looking to master high impact AI while maintaining strict compliance standards. For consulting inquiries, or to discuss the capabilities mentioned in this issue, please contact us: pminne@triplehelixstrategy.com

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Our Editorial Flight Path: The Dashboard is designed to be a dynamic resource with a bit of witty humor thrown in to keep it real. Different sections will appear rotationally based on current industry relevance, ensuring every issue delivers high-impact, actionable intelligence. *The information provided in this newsletter does not constitute legal advice. Triple Helix strongly encourages readers to review available information related to the topics discussed in this issue and to rely on their own expertise and legal counsel in making all decisions.*

References & Flight Data:

1. Barrington James. How AI Is Reshaping Medical Affairs in 2026 and What It Means for Executive Leadership. Published February 17, 2026.
2. Impetus Digital. From Support to Strategy: Will 2026 be the Year of the AI-augmented Medical Affairs Team? Published February 26, 2026.
3. European Union. AI Act | Shaping Europe's digital future. Updated March 2026.
4. IntuitionLabs. FDA 510(k) AI Submissions: Guidelines and Best Practices. Published February 27, 2026.
5. Deloitte. Many health care leaders are leaning into agentic AI as adoption hurdles ease: 2026 US Health Care Outlook. Published February 11, 2026.
6. Digitalya. A Practical Guide to Optimizing Your HCP Portal for AI Search. Published 2026.
7. IntuitionLabs. GenAI in Medical Affairs: Use Cases and Compliance Guardrails. Published 2025.
8. Impetus Digital. From Support to Strategy: Will 2026 be the Year of the AI augmented Medical Affairs Team? Published February 26, 2026.
9. Causaly. The FDA Guiding Principles for AI in Drug Development. Published January 29, 2026.
10. Duke University Libraries. It is 2026. Why Are LLMs Still Hallucinating? Published January 5, 2026.
11. FDA. Data Integrity and Compliance With Drug CGMP: Questions and Answers. Current version updated 2026.
12. American Medical Association. 2026 Physician Survey on Augmented Intelligence. Published March 12, 2026.
13. ASCO Post. AMA Survey Finds Rapid Growth in Physician AI Adoption. Published March 19, 2026.
14. Harmelin Media. LinkedIn & Healthcare 2026: Key Trends for Healthcare Marketers. Published March 10, 2026.

15. Fierce Healthcare. AMA: Physicians' use of AI doubled from 2023 to 2026. Published March 12, 2026.



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