

Implementing AI in Healthcare for Predictive Diagnostics

Yash S. Sawant¹, Rahul U. Pawar², Sanika C. Joshi³

^{1,2,3}Post-Graduate Student, MCA Department, Finolex Academy of Management and Technology, Ratnagiri, Maharashtra, India.

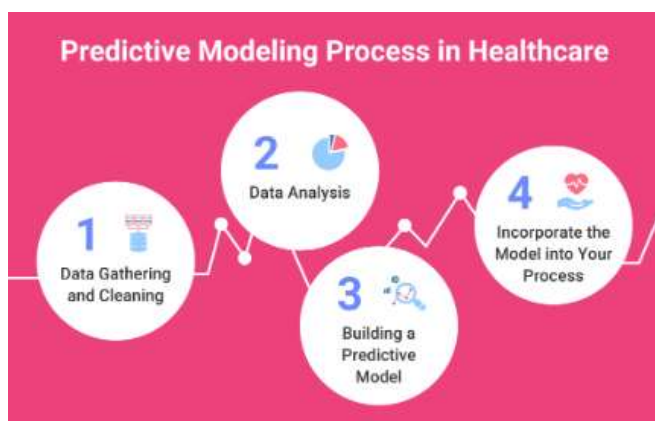
DOI:

Abstract

Artificial Intelligence (AI) is revolutionizing modern healthcare, especially in the field of predictive diagnostics. By leveraging advanced computational models and vast clinical datasets, AI has the capability to detect diseases early, predict disease progression, and optimize patient treatment strategies. The integration of machine learning (ML), deep learning (DL), and natural language processing (NLP) enables AI systems to analyze data from diverse sources such as electronic health records (EHRs), medical imaging, genetic profiles, and wearable devices. This paper delves into the applications, roles, and real-world case studies demonstrating AI's impact in predictive diagnostics. It also examines the significant challenges faced in implementing AI systems, explores ethical considerations, and outlines future directions for advancing AI-driven diagnostics in global healthcare systems.

Keywords : Artificial Intelligence, Predictive Diagnostics, Machine Learning, Deep Learning, Healthcare Analytics, Medical Imaging

1. Introduction



Artificial Intelligence (AI) is transforming healthcare by shifting the focus from reactive treatment to proactive and preventive care [4], [5]. Predictive diagnostics—the science of forecasting potential health risks before clinical symptoms appear—has gained momentum due to AI's ability to analyze complex and voluminous healthcare data [3], [5]. AI systems equipped with ML and DL capabilities can identify hidden patterns within patient data, enabling clinicians to make accurate and timely predictions regarding disease onset, progression, and response to treatments [1], [2], [5]. With

healthcare systems worldwide grappling with challenges like an aging population, rising chronic illnesses, physician shortages, and escalating costs, AI offers innovative solutions [3], [6]. Through predictive diagnostics, AI enhances early detection of conditions such as cancer, cardiovascular diseases, and neurological disorders, allowing for timely interventions and improved prognoses [1], [4], [6]. Moreover, AI facilitates personalized care, ensuring that treatments are tailored to an individual's unique genetic, environmental, and lifestyle factors [5], [6]. This research paper aims to explore the multifaceted role of AI in predictive diagnostics, highlight its applications across medical specialties, present real-world case studies, and examine the associated implementation challenges and ethical issues [7], [8]. Future possibilities and improvements for widespread AI adoption are also discussed [3], [8].

2. Review Methodology

This study adopts a narrative review methodology to systematically examine and synthesize existing literature on the implementation of Artificial Intelligence (AI) in healthcare for predictive diagnostics [4], [5].

2.1 Research Design

A narrative review approach was employed to integrate findings from diverse academic sources. This design facilitates the exploration of a wide range of AI techniques, applications, and outcomes across various medical domains, enabling the identification of key developments and common challenges in the field of predictive diagnostics [5], [8].

2.2 Data Sources and Search Strategy

Literature was retrieved from major scientific databases, including PubMed, IEEE Xplore, ScienceDirect, Scopus, and Google Scholar. A systematic search strategy was implemented using a combination of targeted keywords and Boolean operators, such as:

- “Artificial Intelligence” AND “Healthcare”
- “Predictive Diagnostics” AND “AI”
- “Machine Learning” AND “Disease Prediction”
- “Deep Learning” AND “Medical Diagnosis”
- “AI in Early Disease Detection”

The search was limited to articles published in English between 2015 and 2025 to capture recent developments and advancements in the domain [4], [5].

2.3 Inclusion and Exclusion Criteria

To ensure the relevance and quality of the reviewed literature, the following inclusion criteria were applied:

- Peer-reviewed journal articles and conference papers
- Studies focused explicitly on the use of AI for disease prediction or diagnostic purposes
- Research involving real-world clinical datasets
- Articles providing measurable outcomes such as diagnostic accuracy, sensitivity, or specificity [1], [2], [5]

The exclusion criteria included:

- Non-peer-reviewed materials such as editorials, opinion pieces, and news articles
- Studies unrelated to predictive diagnostics (e.g., administrative AI applications)
- Duplicate publications and studies with insufficient methodological transparency

2.4 Data Extraction

Relevant data from the selected articles were extracted and categorized based on the following parameters:

- Type of AI methodology (e.g., machine learning, deep learning, natural language processing)[2],[5]
- Medical domain or disease category addressed (e.g., oncology, cardiology, neurology)[1],[3],[6]
- Performance metrics reported (e.g., accuracy, precision, recall, F1-score)
- Notable challenges and limitations discussed in the studies [7], [8]

2.5 Data Analysis and Synthesis

The extracted data were thematically analyzed to identify prevailing AI approaches and their diagnostic capabilities. Studies were grouped according to disease type, AI algorithm used, and reported clinical impact. A qualitative synthesis was conducted to examine trends, highlight successful case studies, and discuss technological and ethical considerations inherent in the implementation of AI for predictive diagnostics [3], [5], [7].

2.6 Quality Assurance

Although a formal risk-of-bias assessment was not conducted due to the narrative nature of the review, emphasis was placed on selecting high-quality, peer-reviewed publications with transparent methodologies and robust outcome measures. Where applicable, studies with well-documented datasets and reproducible results were prioritized to enhance the reliability of the findings [1], [2], [5].

3. Role and Applications of AI in Predictive Diagnostics



Artificial Intelligence plays a crucial role in predictive diagnostics by enabling early disease detection through the analysis of medical imaging, genetic profiles, and electronic health records [1], [2], [5]. It supports personalized treatment plans by tailoring therapies to individual patient characteristics, enhancing the effectiveness of interventions [5], [6]. In chronic disease management, AI monitors patient data over time to anticipate complications and prompt early action [4], [6]. It also improves diagnostic accuracy, predicts clinical outcomes such as hospital readmissions, and provides real-time decision support in clinical settings through alerts and evidence-based recommendations [3], [8].

Applications of AI in Predictive Diagnostics

3.1 Cancer Diagnosis and Prediction

AI is significantly transforming cancer care by enabling the rapid and accurate analysis of complex medical data such as imaging, genomics, pathology, and electronic health records (EHRs) [1], [2], [5]. These advancements allow for earlier detection, personalized treatment, and better prognosis predictions, thereby improving patient outcomes and clinical efficiency [1], [5].

a) Early Detection through Imaging

One of the most impactful uses of AI in oncology is early detection through medical imaging. Deep learning models, particularly Convolutional Neural Networks (CNNs), have demonstrated remarkable accuracy in identifying early-stage tumors [1], [2]. For example, in breast cancer diagnostics, Google's LYNA model can detect lymph node metastases with 99% accuracy, significantly reducing the rate of false negatives. Similarly, Google Health's AI model has outperformed experienced radiologists in detecting pulmonary nodules on CT scans, aiding in early diagnosis of lung cancer. In dermatology, CNNs are capable of classifying melanomas from dermoscopic images with accuracy equal to or greater than that of dermatologists, thus supporting timely skin cancer diagnosis [1].

b) Genomic and Molecular Analysis

AI plays a crucial role in genomic and molecular analysis, particularly in the field of precision oncology. By analyzing tumor-specific genetic profiles, AI algorithms help in matching patients with the most effective, targeted therapies [5]. For instance, molecular markers like HER2 in breast cancer or KRAS in colorectal cancer can be identified, guiding oncologists toward appropriate treatment strategies. Additionally, AI helps uncover predictive biomarkers that indicate which patients are likely to respond to chemotherapy or immunotherapy, thereby avoiding ineffective treatments and minimizing side effects [3], [5].

c) Recurrence Prediction and Prognosis

Beyond initial diagnosis, AI contributes to predicting cancer recurrence and assessing prognosis. By integrating data from imaging, pathology reports, and clinical histories, AI systems can provide insights into the likelihood of disease returning after treatment [5]. Tools such as Oncotype DX and MammaPrint analyze gene expression profiles to estimate the risk of breast cancer recurrence. Moreover, radiomics — the extraction of high-dimensional features from medical images — allows AI models to predict clinical outcomes based on subtle imaging patterns not visible to the human eye [3].

d) Clinical Workflow Support

AI enhances clinical workflow by supporting oncologists in various routine and critical tasks. During imaging analysis, AI tools can highlight suspicious areas that may require closer inspection, thereby improving diagnostic accuracy [5]. Additionally, AI can automate the generation of structured pathology reports, reducing reporting time and variability. In treatment planning, AI systems can recommend therapy options based on established clinical guidelines and data from ongoing clinical trials, offering oncologists evidence-based suggestions for personalized care [5], [8].

3.2 Cardiovascular Disease Prediction

Cardiovascular diseases are the leading cause of death worldwide, and AI is playing a crucial role in revolutionizing early detection and risk assessment through diverse data sources such as electronic health records (EHRs), electrocardiograms (ECGs), imaging techniques, and wearable devices [4], [6], [8].

a) Predictive Analytics with EHRs

AI models analyze extensive clinical data, including blood pressure, cholesterol levels, medication history, and family health background, to predict cardiovascular events such as heart attacks and strokes. These AI-enhanced models improve upon traditional risk calculators like the Framingham Risk Score, QRISK, and ACC/AHA guidelines by modeling complex interactions between variables, thus providing more precise and individualized risk assessments [4], [8].

b) AI in ECG Interpretation

AI significantly enhances ECG analysis by detecting subtle abnormalities with high precision. For example, AI-ECG systems can identify asymptomatic heart dysfunctions before they manifest clinically. Moreover, AI algorithms are capable of detecting critical conditions such as hyperkalemia and silent atrial fibrillation (AFib) early, which helps initiate timely treatment and prevent adverse outcomes [6], [8].

c) Imaging and Echocardiography

AI automates and improves the interpretation of cardiac imaging by accurately measuring parameters like ejection fraction and identifying wall motion abnormalities. These capabilities enhance diagnostic accuracy for conditions such as heart failure and valvular diseases, supporting cardiologists in delivering faster and more reliable diagnoses [6].

d) Wearables and Remote Monitoring

AI-powered wearable devices, such as Fitbit, continuously monitor cardiac rhythms and detect arrhythmias like AFib or tachycardia in real-time. These devices provide timely alerts to users and healthcare providers, expanding cardiac care accessibility beyond clinical settings. This remote monitoring is particularly valuable for patients in rural or underserved areas, enabling proactive management and early intervention [4], [8].

3.3 Mental Health Prediction and Monitoring

Mental health disorders such as depression, anxiety, and schizophrenia contribute significantly to global disability. AI is revolutionizing mental health care by providing proactive, real-time, and personalized tools for early detection and timely intervention [3], [5].

a) Voice and Speech Analysis

AI can analyze subtle changes in speech patterns, which are often indicative of mental health conditions. For instance, depressed individuals tend to speak more slowly and monotonously, and AI-powered tools like Ellipsis Health monitor these vocal features to detect early signs of emotional and psychological distress with high accuracy. This enables continuous monitoring outside clinical settings, allowing for earlier support [5], [8].

b) Facial Expression and Emotion Recognition

Using computer vision, AI systems are capable of reading micro-expressions and body language to detect a person's emotional state in real time. Platforms such as Woebot use this technology to adjust therapeutic responses based on facial cues, providing personalized cognitive behavioral therapy (CBT) support tailored to the patient's current emotional condition [3].

c) AI Chatbots and Natural Language Processing (NLP)

AI chatbots, including Woebot and Wysa, utilize NLP to analyze the language and tone of users' communications,

identifying signs of emotional distress. These chatbots offer 24/7 availability, suggest coping strategies for managing stress, and track emotional wellbeing over time. Importantly, they can escalate urgent cases, such as suicidal ideation, to human professionals for immediate assistance [3], [5].

d) Predicting Crises from Online Behavior

AI systems also monitor online behavior, analyzing social media posts, messaging patterns, and the emotional tone of communications to predict mental health crises like depressive episodes or suicidal thoughts. Research, including studies from the University of Vermont, has found that certain language patterns, such as the use of self-deprecating words, can serve as early warning signals for increased mental health risks, enabling timely interventions [3].

3.4 Chronic Disease Management

Effective management of chronic diseases such as asthma, hypertension, and diabetes requires continuous, proactive care. AI improves this management by providing personalized, predictive, and data-driven solutions aimed at reducing complications and improving patient outcomes [4], [5], [6].

a) AI in Diabetes Management

AI-powered devices like Dexcom and FreeStyle Libre help in preventing dangerous blood sugar fluctuations such as hypoglycemia and hyperglycemia by continuously monitoring glucose levels. Additionally, apps such as MySugr and BlueLoop support patients by tracking meals, physical activity, and insulin intake, offering personalized recommendations to optimize blood sugar control [5].

b) Asthma Monitoring

AI systems enhance asthma management by integrating environmental data, including pollution levels and pollen counts, to predict potential asthma attacks. Technologies like Propeller Health use AI-connected inhalers to monitor medication usage and provide real-time feedback, while wearables and mobile apps track symptoms such as breathing patterns, cough frequency, and peak flow measurements to detect early signs of exacerbations [4], [5].

c) Hypertension and Heart Disease

Smart health devices, including Withings BPM Connect and Omron HeartGuide, leverage AI to monitor blood pressure continuously and suggest lifestyle modifications tailored to individual needs. These devices support patients in maintaining optimal blood pressure levels and reducing cardiovascular risk [6].

d) Predictive Models for Cardiovascular Events

AI-driven predictive models analyze longitudinal data trends to anticipate cardiovascular events before they occur. This early warning capability enables healthcare providers to intervene

sooner, enhancing patient safety and improving long-term health outcomes [4], [6].

3.5 Sepsis Prediction

Sepsis is a life-threatening condition caused by the body's extreme response to infection, requiring rapid recognition and treatment to prevent severe complications or death. AI-driven systems are playing a crucial role in early sepsis detection by analyzing a variety of clinical indicators such as vital signs, lab results, and medical records [4], [5], [8].

a) How AI Predicts Sepsis

AI continuously monitors vital signs including heart rate, blood pressure, respiratory rate, and temperature to detect subtle physiological changes that may indicate the onset of sepsis. In addition, laboratory data such as white blood cell (WBC) count, lactate levels, and C-reactive protein (CRP) are analyzed to identify early infection markers. Natural Language Processing (NLP) is also employed to extract critical information from doctors' and nurses' clinical notes within electronic health records (EHRs), capturing hidden clues about a patient's condition [5], [8].

b) Epic Sepsis Model

The Epic Sepsis Model is integrated within many hospital EHR systems to flag patients at risk of sepsis at an early stage. By alerting clinical teams promptly, this tool helps reduce mortality rates through faster diagnosis and intervention [4], [8].

c) Sepsis Watch

Developed by Duke University, Sepsis Watch is a deep learning-based system that predicts the likelihood of sepsis up to six hours before clinical symptoms fully develop. This advance warning allows healthcare providers to initiate treatment sooner, significantly improving patient outcomes [5].

d) Enhanced Early Warning Systems

AI enhances traditional Early Warning Systems (EWS) by detecting complex, non-linear patterns and monitoring dynamic changes in patient status. These improvements result in more accurate and timely identification of sepsis, enabling clinicians to respond quickly and reduce the risk of severe complications [4], [5].

4. Case Studies

4.1 Predicting Cardiovascular Events with Machine Learning (MIT)

MIT researchers used data from the Framingham Heart Study to develop a machine learning (ML) model that predicts 10-year cardiovascular disease (CVD) risk more accurately than traditional tools like the Framingham Risk Score. By applying ensemble methods (random forests, gradient boosting), the model captured non-linear relationships between

variables like blood pressure, cholesterol, smoking, and lifestyle. It showed improved accuracy across various demographics, helping reduce bias and health disparities [7]. A key innovation was real-time risk adjustment—if a patient improved their health (e.g., lowered BP or quit smoking), their risk score updated instantly, motivating positive behavior change.

The model was also integrated with EHR systems to give physicians visual risk profiles and actionable suggestions (e.g., lifestyle changes or medications). Hospital trials showed better preventive care and stronger patient adherence to treatment [3].

4.2 Google's AI for Diabetic Retinopathy Screening

Google Health, in collaboration with Aravind Eye Hospital (India) and Rajavithi Hospital (Thailand), developed an AI-based screening tool for diabetic retinopathy (DR), a leading cause of preventable blindness. Trained on over 128,000 fundus images using CNNs, the model accurately detects DR features like microaneurysms and hemorrhages with 90% sensitivity and 98% specificity [1].

Deployed in rural and low-resource settings, the tool offers quick, point-of-care diagnostics using affordable fundus cameras. In pilot implementations, screening rates increased by over 60%. The model was fine-tuned for diverse populations to reduce bias and integrated into clinical workflows with feedback loops from local clinicians, ensuring usability and effectiveness [4].

The success of this project showcases the potential for AI to democratize access to critical healthcare, especially in underserved regions. By enabling early detection of DR in places lacking ophthalmology expertise, the system not only reduces the risk of blindness but also contributes to more equitable healthcare by making diagnostic services more accessible and efficient [8].

4.3 IBM Watson for Oncology

IBM Watson for Oncology (WFO), developed with Memorial Sloan Kettering Cancer Center, assists oncologists by delivering evidence-based treatment suggestions. It analyzes millions of medical documents, patient records, pathology reports, and genomic data to generate ranked recommendations tailored to individual cancer profiles [5].

In trials across India, South Korea, and the U.S., WFO achieved over 90% concordance with expert oncologists, especially in breast, lung, and colon cancers. It helps reduce diagnostic delays in regions with limited specialists and supports multidisciplinary decision-making. While initial deployments faced challenges adapting to regional protocols, ongoing updates aim to enhance localization and accuracy. Watson for Oncology represents a significant shift towards personalized, data-driven oncology care. Its ability to process vast amounts of research and clinical data empowers oncologists to make better-informed decisions, reducing the

cognitive load on physicians and improving the efficiency of care delivery [3].

4.4 Aidoc for Brain Hemorrhage Detection

Aidoc is an AI-powered imaging tool used for early detection of intracranial hemorrhages via head CT scans. Integrated directly with hospital PACS and RIS systems, it analyzes scans in real-time, flagging critical cases like subdural or intraparenchymal bleeds [6].

Hospitals like Sheba Medical Center and University of Rochester have seen faster diagnosis and intervention. The platform also detects other urgent conditions like pulmonary embolisms and spine fractures, operating as a triage tool that enhances radiologist efficiency. By offering instant alerts, Aidoc transforms emergency radiology and supports faster, life-saving decisions in urgent care scenarios. Its scalable design and seamless integration into existing hospital systems allow for wide adoption, especially in high-volume settings. With its expansion to detect a variety of life-threatening conditions, Aidoc continues to support radiologists in managing complex clinical workflows while reducing the time to diagnosis [2].

4.5 Duke University's Sepsis Watch

Sepsis Watch, developed by Duke University, is a deep learning-based early warning system for predicting sepsis onset. It uses recurrent neural networks to analyze real-time data from vital signs, lab results, and clinical notes, detecting risk up to six hours in advance—well before traditional methods [4]. Integrated with Duke's EHR system, the model alerts a dedicated response team, enabling early intervention. It reduced ICU stays and sepsis mortality, and its transparent design—with confidence scores and predictive reasoning—helped clinicians trust and adopt the tool. The project is seen as a model for responsible AI deployment in critical care. Sepsis Watch's ability to anticipate sepsis before symptoms become critical allows hospitals to allocate resources more effectively, improving patient outcomes while reducing the burden on healthcare facilities. By enhancing clinicians' decision-making capabilities and streamlining workflow, Sepsis Watch highlights how AI can be integrated into clinical practice to prevent adverse outcomes and optimize patient care [3], [5].

5. Challenges in Implementation

Despite the transformative potential of Artificial Intelligence (AI) in predictive diagnostics, several challenges hinder its widespread adoption in healthcare. These include issues related to data, standardization, integration, ethics, and infrastructure [4], [5].

5.1 Data Quality and Heterogeneity

AI models rely on large, high-quality datasets; however, real-world clinical data are often incomplete, unstructured, or inconsistent across sources like EHRs and imaging systems. This heterogeneity limits model accuracy and generalizability [8].

5.2 Lack of Standardization

The absence of unified protocols for data collection and model evaluation hampers reproducibility and interoperability. Without clear standards, validating and comparing AI systems becomes difficult, affecting clinical trust and regulatory approval [5].

5.3 Algorithmic Bias and Fairness

AI can inherit biases from training data, potentially leading to inaccurate predictions for underrepresented groups. This risks reinforcing healthcare inequalities and undermines user trust in AI tools [7].

5.4 Clinical Workflow Integration

Many AI tools are not designed with clinician workflows in mind. Poor usability, lack of real-time support, and workflow disruption can reduce adoption and effectiveness in clinical environments [6].

5.5 Regulatory and Legal Barriers

AI in healthcare faces evolving and ambiguous regulations. The AI complicates oversight, liability assignment, and long-term validation by agencies like the FDA or EMA [3].

5.6 Data Privacy and Security

Handling sensitive health data raises privacy concerns. Compliance with laws like HIPAA and GDPR is critical, yet challenges remain in data anonymization, security, and patient consent—especially in cloud-based systems [4].

5.7 Financial and Infrastructure Constraints

Many healthcare institutions, especially in low-resource settings, lack the infrastructure or budget to adopt AI at scale [8].

6. Future Directions

To fully harness the potential of AI in predictive diagnostics, future efforts must focus on advancing technology, ensuring ethical use, and enabling real-world application [3], [5].

6.1 Explainable and Transparent AI

Future systems should prioritize explainability to help clinicians understand AI decisions, enhancing trust and adoption in clinical settings [8].

6.2 Multimodal Data Integration

Combining EHRs, imaging, genomics, and wearable data will enable more comprehensive and personalized predictions [4].

6.3 Interoperability and Data Sharing

Standardized data formats and secure sharing protocols are needed to develop robust, generalizable AI models across diverse healthcare systems [5].

6.4 Personalized and Preventive Care

AI should evolve toward anticipating individual health risks and guiding preventive strategies tailored to each patient's unique profile [3].

6.5 Clinical Validation and Implementation

Rigorous clinical trials and real-world studies are required to validate AI effectiveness and ensure smooth integration into healthcare workflows [6].

7. Conclusion

Artificial Intelligence (AI) is transforming healthcare, especially in advancing predictive diagnostic capabilities. Through advanced machine learning, deep learning, and natural language processing techniques, AI enables early disease detection, risk stratification, and personalized treatment planning. This approach improves diagnostic precision while promoting proactive and preventive healthcare practices [1], [3]. Despite the substantial benefits, the integration of AI into clinical practice presents challenges, including data privacy concerns, algorithmic bias, and the need for regulatory oversight [4], [7]. Addressing these issues through ethical governance, transparent model development, and equitable access is crucial for sustainable AI deployment. Future research should focus on explainable AI, integration of multimodal health data, and clinical validation to strengthen the reliability and trustworthiness of AI systems [5], [8]. With continued interdisciplinary collaboration and thoughtful implementation, AI holds immense potential to transform predictive diagnostics and improve health outcomes globally.

8. References

- [1] A. Esteva *et al.*, "Dermatologist-level classification of skin cancer with deep neural networks," *Nature*, vol. 542, no. 7639, pp. 115–118, 2017, doi: 10.1038/nature21056.

- [2] P. Rajpurkar *et al.*, “Deep learning for chest radiograph diagnosis: A retrospective comparison of the CheXNeXt algorithm to practicing radiologists,” *PLoS Medicine*, vol. 15, no. 11, p. e1002686, 2018, doi: 10.1371/journal.pmed.1002686.
- [3] E. J. Topol, “High-performance medicine: The convergence of human and artificial intelligence,” *Nature Medicine*, vol. 25, no. 1, pp. 44–56, 2019, doi: 10.1038/s41591-018-0300-7.
- [4] F. Jiang *et al.*, “Artificial intelligence in healthcare: Past, present and future,” *Stroke and Vascular Neurology*, vol. 2, no. 4, pp. 230–243, 2017, doi: 10.1136/svn-2017-000101.
- [5] R. Miotto, F. Wang, S. Wang, X. Jiang, and J. T. Dudley, “Deep learning for healthcare: Review, opportunities and challenges,” *Brief. Bioinform.*, vol. 19, no. 6, pp. 1236–1246, 2017, doi: 10.1093/bib/bbx044.
- [6] S. E. Dilsizian and E. L. Siegel, “Artificial intelligence in medicine and cardiac imaging: Harnessing big data and advanced computing to provide personalized medical diagnosis and treatment,” *Curr. Cardiol. Rep.*, vol. 16, no. 1, p. 441, 2014, doi: 10.1007/s11886-013-0441-8.
- [7] Z. Obermeyer, B. Powers, C. Vogeli, and S. Mullainathan, “Dissecting racial bias in an algorithm used to manage the health of populations,” *Science*, vol. 366, no. 6464, pp. 447–453, 2019, doi: 10.1126/science.aax2342.
- [8] K. H. Yu, A. L. Beam, and I. S. Kohane, “Artificial intelligence in healthcare,” *Nat. Biomed. Eng.*, vol. 2, no. 10, pp. 719–731, 2018, doi: 10.1038/s41551-018-0305-z.