



discussion

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ChatGPT

1. Appropriateness:

- 1. Reflection: All can help ensure the appropriate use of imaging studies by providing **decision support** to physicians, reducing unnecessary tests.
- 2. Proposed Metrics: Percentage reduction in unnecessary imaging tests, rate of adherence to evidence-based guidelines.

2. Quality:

- 1. Reflection: All can enhance diagnostic accuracy and consistency by identifying subtle abnormalities that may be missed by human radiologists.
- 2. Proposed Metrics: Increase in sensitivity and specificity rates, reduction in missed diagnoses, comparative analysis of Al-assisted vs. human-only interpretations.

3. Service:

- 1. Reflection: All can expedite the interpretation process, leading to faster results and reduced waiting times for patients.
- 2. Proposed Metrics: Average time from image acquisition to report generation, patient satisfaction surveys regarding waiting times.

4. Cost:

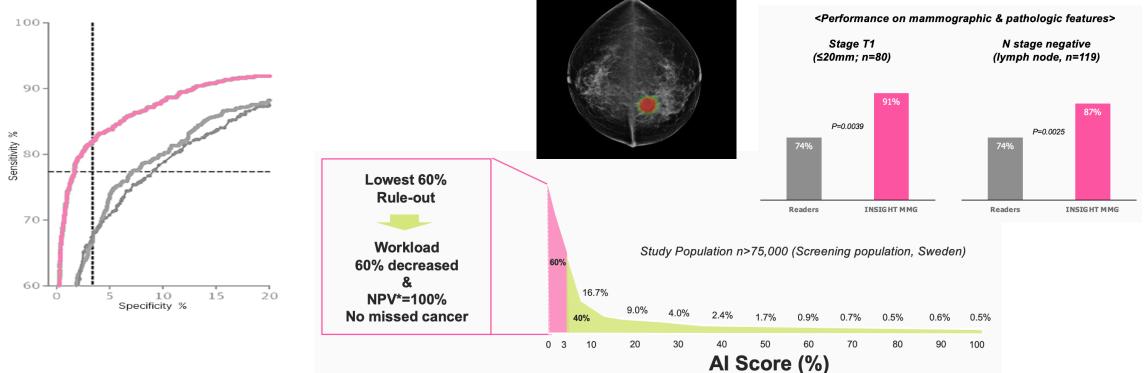
- 1. Reflection: All could potentially **reduce costs** by improving diagnostic accuracy, avoiding unnecessary tests, and optimizing resource allocation.
- 2. Proposed Metrics: Cost savings per patient due to reduced repeat imaging, comparison of overall healthcare expenditure with and without Al integration.

5. Waste:

- 1. Reflection: All can **minimize wastage** of resources by ensuring appropriate testing, reducing the need for repeat imaging, and improving resource utilization.
- 2. Proposed Metrics: Reduction in repeat imaging rates, decrease in resource wastage, analysis of instances where Al led to avoiding redundant procedures.

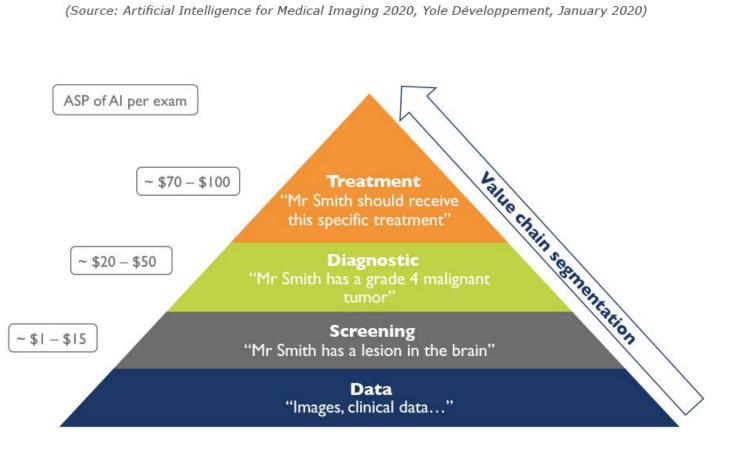
Lunit breast cancer detection algorithm





Additional Points

- Algorithm Drift
 - Consistent validation
 - Changes in protocols/machines
 - Test algorithm on your population
- Cost
 - Department v Enterprise IT
 - Separate v bundled
 - Value based v FFS
- Human implications
 - Trust by radiologist/patient
 - Perceived loss of "art" in radiology



The artificial intelligence algorithm value chain

