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DATASCI 210, Section 6

#### Current Diagnostic Models Utilize Only One Data Type

- Inadequate Utilization of EHR Data Systems
- Barriers to Accessing Complex Insights For Physicians
- Limitations in AI for
  Comprehensive Diagnostics



# Introducing MedFusion Analytics – The Future of Diagnostic Precision

#### **A pioneering multi-modal model** to predict top pathological findings in chest X-rays

- **Combines** patient data, clinician notes, and radiology images
- **Tailored** for healthcare researchers and attending physicians
- **Empowers** users to harness AI-based diagnostic insights
- Easy-to-use tool allows for seamless integration



#### Data: MIMIC-IV



#### Data Processing Pipeline



### Individual Model Performance



#### Revolutionizing Diagnostics with Multi-Model Integration



# MedFusion Analytics Web Demo

https://uc-berkeley-i-school.github.io/mids-210-medfusion -analytics-spring24/ the statement of the second

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#### Real Post

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#### Table 4 Horse

#### Early Fusion Model Pipeline – From Data to Diagnosis



## Early Fusion Outperforms Individual Models



**AUC** Early Fusion: 0.7319 **Image: 0.7361** Notes: 0.5042 Tabular: 0.5184

#### AUC

**Early Fusion: 0.8350** Image: 0.8080 Notes: 0.6811 Tabular: 0.6140 **AUC Early Fusion: 0.7713** Image: 0.7450 Notes: 0.5994 Tabular: 0.6204 **AUC Early Fusion: 0.8705** Image: 0.8548 Notes: 0.7654 Tabular: 0.6164

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### Redefining Standards with Early Fusion



Compared to an average late fusion aggregator, our early fusion model has:

- Superior AUC
- Sharper Detection
- Robust Across Pathologies
- Sets New Norms

#### MedFusion Analytics: Transforming Healthcare Diagnostics

Early Fusion Approach: Our pioneering multi-modal model integrates patient data, clinician notes, and radiology images for accurate diagnosis.

Key Benefits:

- Real-time predictions in seconds
- Intuitive user interface
- Comprehensive documentation to promote model transparency



# Our Mission: Revolutionize patient care by harnessing the power of multi-modal data

#### **Our Mission Pillars**



Pioneering

Novelty



Precision & Personalization



Empowering Physicians



Enhancing Patient Outcomes



Shaping the Future of Healthcare

### References

- Huang, SC., Pareek, A., Seyyedi, S. *et al.* Fusion of medical imaging and electronic health records using deep learning: a systematic review and implementation guidelines. *npj Digit. Med.* 3, 136 (2020). <u>https://doi.org/10.1038/s41746-020-00341-z</u>
- 2. Soenksen, L.R., Ma, Y., Zeng, C. *et al.* Integrated multimodal artificial intelligence framework for healthcare applications. *npj Digit. Med.* 5, 149 (2022). <u>https://doi.org/10.1038/s41746-022-00689-4</u>
- 3. Kline, A., Wang, H., Li, Y. *et al.* Multimodal machine learning in precision health: A scoping review. *npj Digit. Med.* 5, 171 (2022). <u>https://doi.org/10.1038/s41746-022-00712-8</u>



#### **Insights from the Frontlines**

"[current clinical decision support systems] increased the workload ... more steps, discrete ... instead of writing a **free-text** reason for your study"

MARC KOHLI, M.D. Radiologist, Professor of Radiology, UCSF

"...we need a decision support tool to provide an opportunity to **cut down on time** required for physicians to make a **diagnosis**... as a consequence we **improve the patient experience**..."

JOSEPH NGUYEN, M.D. Radiologist, Synergy Radiology Associates

"...our problem is resources... radiologists may take 2 to 6 hours to return a reading..."

MOHIT BANSAL, M.D. Family Physician, Lifeline Urgent Care

"Image analysis is very hot in radiology right now ... [it takes] long time until you **incorporate** the rest of the things in the chart..."

RONALD CRANDALL, M.D. Radiology Resident, Richmond University Medical Center

# EDA: Combining Notes, CXR (Images) with other MIMIC Modules

People w/ Discharge Notes & Images By Module

source 👻	total_count 👻	notes_overlap 👻	notes_proportion_of	cxr_overlap 👻 🎵	cxr_proportion_of_ta	both_overlap 👻 🎣	both_proportion_of_table -
MIMICIV_Derived_Age	180733	145914	0.807345642467	51299	0.283838590628	45935	0.2541594506813919
MIMICIV_ECG	161352	111647	0.691946799543	54362	0.336915563488	42511	0.263467450047102
MIMICIV_ED_Edstays	205504	100470	0.488895593273	61856	0.300996574275	45922	0.22346037060105886
MIMICIV_Hosp_Admissions	180733	145914	0.807345642467	51299	0.283838590628	45935	0.2541594506813919
MIMICIV_ICU_Icustays	50920	50496	0.991673212882	19264	0.378318931657	19227	0.37759230164964652
MIMICIV_Note_Discharge	145914	145914	1.0	45935	0.314808722946	45935	0.31480872294639306
MIMIC_CXR	65379	45935	0.702595634683	65379	1.0	45935	0.70259563468392

### Data Processing – MIMIC–IV Modules

mimi subjec study study path text

			mimiciv_note.disc	harge			
			subject_id	INTEGER NN			
			hadm_id	INTEGER NN			
iv_cxr.study			text	VARCHAR		mimiciv_hosp	transfers
t_id	INTEGER NN >					subject_id	INTEGER NN
id	INTEGER NN	_				hadm_id	INTEGEI
datetime	TIMESTAMP						INTEGER NN
	VARCHAR		mimiciv_cxr_jpg.mimic-cxr-	2.0.0-chexpert		eventtype	VARCHA
	VARCHAR		subject_id	INTEGER NN		careunit	VARCHA
		_<	study_id	INTEGER NN		intime	TIMESTAM
			atelactasis	VARCHAR		outtime	TIMESTAM
			cardiomegaly	VARCHAR			
			consolidation	VARCHAR	mimic	v_ed.triage	
			edema	VARCHAR	subject	_id INTEG	SER NN
			enlarged_cardiomediastinum	VARCHAR	stay_id	INTEG	GER NN >
			fracture	VARCHAR	temper	ature I	NTEGER
			lung_lesion	VARCHAR	heartra	ite l	NTEGER
			lung_opacity	VARCHAR	resprat	ie I	NTEGER
			no_finding	VARCHAR	o2sat	1	NTEGER
			pleural_effusion	VARCHAR	sbp	1	NTEGER
			pleural_other	VARCHAR	dbp	1	NTEGER
			pneumonia	VARCHAR	pain	1	NTEGER
			pneumothorax	VARCHAR	acuity	V	ARCHAR
			support devices	VARCHAR	chiefco	mplaint V	ARCHAR

### Data Processing - Pipeline



## Data Processing – Split

	Train Dataset							
	train_setchexpert4_findingssingle_labelunbalanced.json							
	finding not_mention positive_mention total_studies percentage							
0	no_finding	2,228	5,530	7,758	71.3%			
1	lung_opacity	6,865	893	7,758	11.5%			
2	cardiomegaly	7,242	516	7,758	6.7%			
3	atelectasis	7,292	466	7,758	6.0%			
4	pleural_effusion	7,405	353	7,758	4.6%			

	Validation Dataset						
	validation_set_chexpert_4_findings_single_label_unbalanced.json						
	finding	not_mention	positive_mention	total_studies	percentage		
0	no_finding	557	1,382	1,939	71.3%		
1	lung_opacity	1,716	223	1,939	11.5%		
2	cardiomegaly	1,810	129	1,939	6.7%		
3	atelectasis	1,822	117	1,939	6.0%		
4	pleural_effusior	1,851	88	1,939	4.5%		

Test Dataset test_setchexpert4_findingssingle_labelunbalanced.json						
0 no_finding	557	1,381	1,938	71.3%		
1 lung_opacity	1,715	223	1,938	11.5%		
2 cardiomegaly	1,809	129	1,938	6.7%		
3 atelectasis	1,822	116	1,938	6.0%		
4 pleural_effusion	1,849	89	1,938	4.6%		

Train Dataset - Balanced							
train_set_chexpert_4_findings_single_label_balanced.json							
finding not_mention positive_mention total_studies percentage							
0 no_finding	1,412	706	2,118	33.3%			
1 atelectasis	1,765	353	2,118	16.7%			
2 cardiomegaly	1,765	353	2,118	16.7%			
3 lung_opacity	1,765	353	2,118	16.7%			
4 pleural_effusion	1,765	353	2,118	16.7%			

	Train Dataset - Balanced							
	train_setchexpert4_findingssingle_labelbalanced.json							
	finding not_mention positive_mention total_studies percentage							
0	no_finding	1,412	353	1,765	20.0%			
1	atelectasis	1,412	353	1,765	20.0%			
2	cardiomegaly	1,412	353	1,765	20.0%			
3	lung_opacity	1,412	353	1,765	20.0%			
4	pleural_effusion	1,412	353	1,765	20.0%			

### Data Processing – Pathology Selection

		pathology	not_mention	positive_mention
	0	no_finding	152372	75455
	1	support_devices	157783	66558
×	2	pleural_effusion	146369	54300
	3	lung_opacity	173233	51525
	4	atelectasis	180488	45808
Look for the top 4	5	cardiomegaly	167071	44845
findings/pathologies	6	edema	175168	27018
	7	pneumonia	186933	16556
	8	consolidation	209082	10778
	9	pneumothorax	175113	10358
	10	enlarged_cardiomediastinum	215365	7179
	11	lung_lesion	220681	6284
	12	fracture	222551	4390
	13	pleural_other	225690	2011

#### pathology not\_mention positive\_mention total\_studies percent

16974	54.79
16974	19.62
16974	13.11
16974	12.34
16974	10.31
	16974 16974 16974 16974 16974

sum	percentage	cumsum	percentage
3 u iii	percentage	cum5um_	_percentug

pathologies			
no_finding	65,282	30.1%	30.1%
no_finding, support_devices	10,173	4.7%	34.8%
lung_opacity	9,605	4.4%	39.2%
cardiomegaly	7,358	3.4%	42.6%
atelectasis	5,253	2.4%	45.0%
$cardiomegaly, edema, enlarged\_cardiomediastinum, lung\_lesion, pleural\_effusion, support\_devices$	1	0.0%	100.0%
$cardiomegaly, edema, enlarged\_cardiomediastinum, lung\_opacity, pneumothorax, support\_devices$	1	0.0%	100.0%
atelectasis, cardiomegaly, consolidation, edema, lung_lesion, pleural_effusion, support_devices	1	0.0%	100.0%
$cardiomegaly, edema, enlarged\_cardiomediastinum, pleural\_effusion, pneumonia, support\_devices$	1	0.0%	100.0%
cardiomegaly, edema, enlarged_cardiomediastinum, lung_opacity, pleural_other, support_devices	1	0.0%	100.0%

1726 rows × 3 columns

Positive mentions for the top 4 findings/pathologies after cleaning the data (they total 64 combinations)

Multiple combinations (multilabel)

#### Data Processing – Notes

#### Name:

Unit No:

Sex: F

Discharge Date:

Admission Date:

Date of Birth: \_\_\_

Service: MEDICINE

Allergies: Sulfa (Sulfonamide Antibiotics) / Codeine / Bactrim

Attending: \_\_\_\_.

Chief Complaint: Weakness, nausea/vomiting

Major Surgical or Invasive Procedure: none

#### History of Present Illness:

This is a \_\_\_\_ yof with h/o recently diagnosed metastatic cancer of unknown prior presenting with nausea, vomiting, and fever to 101 today. Patient has been vomiting over the past 6 - 8 weeks, since before she was diagnosed with metastatic cancer. She also reports pain over her upper abdomen and has very poor P0 intake. She has been feeling progressively weak over this time period. Her vomiting and abdominal pain has not increased from the past weeks, but she just feels more fatigued. She has a chronic non-productive cough as well. No URI symptoms, no urinary complaints. She has been constipated, which improves when she stops her anti-emetics. Last bovel movement was yesterday. She is passing gas. She has lower extremity edema, which has been present for the past several weeks.

Of note, she was supposed to have one of her liver mets biopsied in the past several weeks, but she was taking ibuprofen so the biopsy had to be postponed.

In the ED, initial VS were: 97.6 117 128/74 18 95% RA. Labs were significant for WBC of 18.7, with 77% polys. UA was significant for ketones. Patient received zofran, NS. She had a CXR that showed new left sided opacity that may reflect PNA superimposed on metastatic diseae vs. Umphangiitic spread of cancer. She received vanc and cefepime for pneumonia. Vitals on transfer are: 99.6 110 118/78 20 9%.

Currently, she continues to feel weak and nauseous. She is trying to take her pants off, but feels too weak and tired to do so.

#### REVIEW OF SYSTEMS:

(+) per HPI

(-) hight sweats, headache, vision changes, rhinorrhea, congestion, sore throat, BRBPR, melena, hematochezia, dysuria, hematuria.

#### History of Present Illness:

50.

This is a \_\_\_\_\_ yo f with h/o recently diagnosed metastatic cancer of unknown prior presenting with nausea, vomiting, and fever to 101 today. Patient has been vomiting over the past 6 - 8 weeks, since before she was diagnosed with metastatic cancer. She also reports pain over her upper abdomen and has very poor P0 intake. She has been feeling progressively weak over this time period. Her vomiting and abdominal pain has not increased from the past weeks, but she just feels more fatigued. She has a chronic non-productive cough as well. No URI symptoms, no urinary complaints. She has lower extremity edema, which has been present for the past several weeks.

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In the ED, initial VS were: 97.6 117 128/74 18 95% RA. Labs were significant for WE of 18.7 with 7% polys. LA was significant for ketones. Patient received zofran, NS. She had a CXR that showed new left sided opacity that may reflect PNA superimposed on metastatic disea vs. lumbhandinitic spread of cancer. She received vanc and cefepime for heumonia. Vitals on transfer are: 99.6 110 118/78 20 99%. Currently, she continues to for weak and nauseous. She is trying to take her pants off, it feels too weak and tired to do



Problem: Data leakage (some notes contain the pathology/finding associated with the x-ray) History of Present Illness:

This is a \_\_\_\_ yof with h/o recently diagnosed metastatic cancer of unknown prior presenting with nausea, vomiting, and fever to 101 today. Patient has been vomiting over the past 6 - 8 weeks, since before she was diagnosed with metastatic cancer. She also reports pain over her upper abdomen and has very poor P0 intake. She has been feeling progressively weak over this time period. Her vomiting and abdominal pain has not increased from the past weeks, but she just feels more fatigued. She has a chronic non-productive cough as well. No URT symptoms, no urinary complaints. She has been constipated, which improves when she stops her anti-emetics. Last bovel movement was yesterday. She is passing gas. She has lower extremity edema, which has been present for the past several weeks.

Of note, she was supposed to have one of her liver mets biopsied in the past several weeks, but she was taking ibuprofen so the biopsy had to be postponed.



**Solution:** Extraction of paragraphs that don't contain explanation of results from the ED (via algorithm)

# Data Processing – Images

#### Key challenges with imaging data:

- Patients can have more than 1 X-ray
- X-rays can be taken from multiple angles and positions
- Images are of varying sizes

#### Progress on imaging data:

- Found positioning metadata connected with each image to identify the orientation of the image systematically
- Developed a logic to select which image we will keep from each patient





(in pixels)

### Data Processing – Image Padding



# Data Processing – Images

Logic for reducing/selecting which image to keep from each patient:

- For each patient, if # of images per study > 1: [Main criteria for reducing all images per patient down to 1 single image]
- 2. Non-lateral views are preferred\* (from SME conversations)
- 3. Exclude 'Recumbent' orientation wherever possible
- 4. Prefer images with larger 'Rows' pixels if orientations vary
- 5. Latest 'StudyTime' if times vary
- 6. Remove record with NaN in meta data for two images with similar other meta data
- 7. Remove record with lower 'Columns' if column pixels is the only difference in the meta data between 2 images
- 8. Preference to 'antero-posterior' view over 'posterior-antero' if this is the only difference in the meta data

## NLP Models – Top Performers

	Train Data	Class Weights	AUC
Bio_ClinicalBERT	Unbalanced	No	0.66531
Bio_ClinicalBERT	Unbalanced	Yes	0.65781
Bio_ClinicalBERT	Balanced	No	0.66177
Bio_Discharge_Summary_BERT	Unbalanced	No	0.61101
Bio_Discharge_Summary_BERT	Unbalanced	Yes	0.51912
Bio_Discharge_Summary_BERT	Balanced	No	0.65772
BioBERT	Unbalanced	No	0.60079
BioBERT	Unbalanced	Yes	0.52576
BioBERT	Balanced	No	0.67084

### Top NLP Model (Bio\_ClinicalBERT)

	Balanced									
	precision	recall	f1-score							
no_finding	0.82	0.33	0.47							
atelectasis	0.08	0.30	0.12							
cardiomegaly	0.13	0.39	0.19							
lung_opacity	0.24	0.34	0.28							
pleural_effusion	0.18	0.46	0.26							
accuracy			0.34							
macro avg	0.29	0.36	0.26							
weighted avg	0.63	0.34	0.40							



	precision	recall	f1-score
no_finding	0.81	0.44	0.57
atelectasis	0.08	0.24	0.12
cardiomegaly	0.15	0.35	0.21
lung_opacity	0.28	0.39	0.32
pleural_effusion	0.18	0.43	0.26
accuracy			0.42
macro avg	0.30	0.37	0.30
weighted avg	0.63	0.42	0.48

Unbalanced with class weights



Unl	balan	ced
-----	-------	-----

	precision	recall	f1-score	
no_finding	0.77	0.89	0.82	
atelectasis	0.15	0.04	0.07	
cardiomegaly	0.27	0.20	0.23	
lung opacity	0.35	0.27	0.30	
pleural_effusion	0.35	0.19	0.25	
accuracy			0.69	
macro avg	0.38	0.32	0.33	
weighted avg	0.63	0.69	0.65	



Predicted Label

## Top Imaging Model: EfficientNet-B3 Results

F	Precision	Recall	F1-score	AUC
Atelectasis	0.79	0.69	0.74	0.83
Cardiomegaly	0.89	0.78	0.83	0.88
Lung Opacity	0.76	0.70	0.73	0.82
Pleural Effusion	0.92	0.71	0.80	0.85
No Findings	0.86	0.76	0.80	0.83

Other computer vision models assessed:

- RestNet18
- DenseNet121
- Various custom CNNs







### Individual Model Performance



Predicted Label

11

78

87

Predicted Label

#### Fusion Model Comparisons – Additional Figures





## Average AUC

Individual Models vs MedFusion Analytics 0.80 0.78 0.76 0.74 0.72 O.70 0.68 0.66 0.64 0.62 0.60 XGBoost (Tabular) BioClinicalBert EfficentNet XGBoost (Early (Text) (Image) Fusion 1a) Indivudual Models Early Fusion

#### Research Summary

					AUC Score							
Case	Model	estimator	basis	data	Average	no findings	atelectasis	cardiome galy	lung opacity	pleural effusion		
			train	trainset	0.6617	0.6655	0.6497	0.6777	0.6641	0.6469		
1	Tabular	XGBoost	CV	-	0.6024							
	Tabulai		val	valset	0.6215	0.6247	0.5698	0.6260	0.6587	0.5565		
			test	testset	0.6234	0.6358	0.5184	0.6140	0.6204	0.6164		
	Notes 1	Bert	train	trainset	0.8314	0.8003	0.7226	0.9052	0.8556	0.9257		
2			val	valset	0.6416	0.6490	0.5247	0.6602	0.6382	0.7007		
			test	testset	0.6399	0.6491	0.5042	0.6811	0.5994	0.7654		
	Image 2	EfficientNet	train	large modified trainset	0.9964	0.9962	0.9918	0.9989	0.9964	0.9993		
5			val	valset	0.7759	0.7771	0.7233	0.8226	0.7601	0.8137		
			test	testset	0.7799	0.7832	0.7361	0.8080	0.7450	0.8548		
			train	trainset + valset	0.9635	0.9526	0.9521	0.9759	0.9586	0.9782		
13	EF 1a: Tabular + Notes1 +	XGBboost	XGBboost	CV	-	0.9491						
Second Second	image2		test	testset	0.7962	0.7987	0.7319	0.8350	0.7713	0.8705		

#### Notes:

1 All data are for 4\_bal\_s (4 pathologies, balanced data, and single pathology per image)

2 All models (except Image model) used the same following datasets

trainset	2118
valset	1940
testset	1930

#### Research Summary

					AUC Score									
						no		cardiome	lung	pleural				
Case	Model	estimator	basis	data	Average	findings	atelectasis	galy	opacity	effusion	Std D	Min	Max	
		5	train	trainset	0.6617	0.6655	0.6497	0.6777	0.6641	0.6469				
1	Tabular	VCRoast	CV	-	0.6024		Ì							
1	rabular	Adboost	val	valset	0.6215	0.6247	0.5698	0.6260	0.6587	0.5565				
			test	testset	0.6234	0.6358	0.5184	0.6140	0.6204	0.6164				
		S	train	trainset	0.8314	0.8003	0.7226	0.9052	0.8556	0.9257				
2	Notes 1	Bert	val	valset	0.6416	0.6490	0.5247	0.6602	0.6382	0.7007				
			test	testset	0.6399	0.6491	0.5042	0.6811	0.5994	0.7654				
	8948C (2X	1 222	train	trainset	0.8757	0.8399	0.8019	0.9303	0.9081	0.9494				
3	Notes 2	Bert	val	valset	0.6496	0.6549	0.5137	0.6634	0.6666	0.7300				
_		8	test	testset	0.6500	0.6598	0.4766	0.6547	0.6583	0.7531				
			train	trainset	0.4971	0.4930	0.4978	0.4955	0.5038	0.4996				
4	Image 1	CNN	val	valset	0.5009	0.5038	0.5004	0.4849	0.4934	0.4994				
_			test	testset	0.5032	0.5061	0.5001	0.4997	0.4903	0.5016				
	12 D	EfficientNe	train	large modified trainset	0.9964	0.9962	0.9918	0.9989	0.9964	0.9993				
5	lmage 2	t	val	valset	0.7759	0.7771	0.7233	0.8226	0.7601	0.8137				
			test	testset	0.7799	0.7832	0.7361	0.8080	0.7450	0.8548				
			train	trainset+valset	0.4985	0.4931	0.4986	0.4969	0.5040	0.4997				
6	Tabular + Image (CNN)	XGBboost	CV	-	0.6130						0.0068	0.5983	0.621	
			test	testset	0.6315	0.6395	0.5456	0.6288	0.6486	0.5980				
	aerica est e	Success 5	train	trainset+valset	0.8294	0.7921	0.7557	0.8650	0.8359	0.8983				
7	Tabular + Notes 1 XGBbc	XGBboost	CV	-	0.7892						0.0143	0.7634	0.810	
			test	testset	0.6830	0.6909	0.5564	0.6983	0.6685	0.7842				
		1	train	trainset+valset	0.8362	0.7909	0.7562	0.8789	0.8436	0.9113	21.2 March 107		2014-020-020-020-020-020-020-020-020-020-02	
8	Tabular + Notes 2	XGBboost	XGBboost	CV	-	0.8128						0.0128	0.7914	0.832
			test	testset	0.6691	0.6735	0.5193	0.6752	0.7048	0.7406				
100	7 2 2		train	trainset+valset	0.8248	0.9181	0.8968	0.9646	0.9523	0.9744	0.000		0.000	
9	Late Fusion		CV	-	0.6823						0.0126	0.0126	0.7951	0.835
		2	test	testset	0.6844	0.6929	0.5770	0.6923	0.6746	0.7414				
	EF 1a: Tabular + Note2 +		train	trainset+valset	0.8624	0.8242	0.7999	0.8966	0.8713	0.9201				
10	Image1	XGBboost	CV	-	0.8196						0.0126	0.7951	0.839	
_			test	testset	0.6732	0.6794	0.5029	0.6962	0.7020	0.7423				
1000	EF 1a: Tabular + Notes2 +	Second 1	train	trainset + valset	0.9634	0.9525	0.9515	0.9768	0.9569	0.9791	1010000	202762	10000000	
11	Image 2	XGBboost	CV.		0.9506						0.0066	0.9433	0.9613	
_	_		test	testset	0.7929	0.7952	0.7308	0.8258	0.7762	0.8553				
	EF 1b: Tabular + Notes2 +		train	trainset + valset	0.9624	0.9509	0.9497	0.9759	0.9553	0.9805				
12	Image2	XGBboost	CV.	-	0.9511						0.006203148	0.9428239	0.960575	
	20105-000		test	testset	0.7920	0.7951	0.7264	0.8258	0.7719	0.8536				
1	EF 1a: Tabular + Notes1+	1	train	trainset + valset	0.9635	0.9526	0.9521	0.9759	0.9586	0.9782			100000	
13	Image2	XGBboost	CV	-	0.9491						0.0071	0.9394764	0.9608	
_			test	testset	0.7962	0.7987	0.7319	0.8350	0.7713	0.8705				
	1000000	EfficientNe	train	trainset		ļ								
14	Image 3	t	val	valset										
_			test	testset	0.7621	0.7655	0.6960	0.8167	0.7097	0.8787				
1000	EF 1a: Tabular + Notes2 +	lines i	train	trainset + valset	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	202000			
15	Image3	XGBboost	CV	-	0.9900						0.0016	0.9876094	0.9921	
	mageo		test	testset	0.7635	0.7661	0.6724	0.7916	0.7449	0.8844				

Notes: 1 All data are for 4\_bal\_s (4 pathologies, balanced data, and single pathology per image) 1 All data are for 4\_bal\_s (4 pathologies, balanced data, and single pathology per image)

2 All models (except Image model) used the same following datasets trainset 2118

- 1940 valset
- 1930 testset

3 train/test records ratio is different for different cases!