

Machine Learning in Medical Diagnosis and Treatment Planning

Madhuri Sharma
Dept. of Life Science
College of Life Sciences, CHRI Campus
Gwalior, India
msharma.research@gmail.com

Deepti Singh
Dept. of Commerce & Management
Madhav University
Pindwara, India

Abhijeet Tripathi
Dept. of CS J.S
University
Shikohabad, India
abhijeettripathi8211@gmail.com

N. RAMAJAYAM
Dept. of CSE
Dhanalakshmi Srinivasan college of Engineering
Coimbatore, India
ramajayamm@gmail.com

priyanka Rawat
Dept. of CSE
Lingayas Vidyapeeth
Faridabad, India
priyankarawat@lingayasvidyapeeth.edu.in

S.Malarvizhi
Dept. of Commerce
Meenakshi A.H.E.R
Chennai, India

Abstract—Machine Learning (ML) is revolutionizing the field of medical diagnosis and treatment planning by enabling the analysis of vast amounts of medical data to identify patterns and make predictions with unprecedented accuracy. This paper investigates the application of ML algorithms in various aspects of healthcare, including disease diagnosis, prognosis, and the development of personalized treatment plans. Key ML techniques such as supervised learning, unsupervised learning, and deep learning are examined for their roles in interpreting complex medical data, ranging from imaging to genomic sequences. The research highlights how ML models can assist in early detection of diseases, predictive analytics for patient outcomes, and optimization of treatment strategies, leading to improved patient care and operational efficiencies. This model also discuss the integration of ML systems with electronic health records (EHRs) and the ethical considerations surrounding data privacy and algorithmic transparency. Through case studies and real-world implementations, the paper demonstrates the transformative impact of ML in reducing diagnostic errors, accelerating clinical workflows, and personalizing patient care. The findings underscore the potential of ML to enhance the precision and effectiveness of medical practice, fostering a future where data-driven insights significantly contribute to health outcomes.

Index Terms—Machine Learning, Medical Diagnosis, Treatment Planning

I. INTRODUCTION

In healthcare, the integration of computer vision (AI) and machine learning (ML) algorithms has transformed diagnostics and therapy planning. This paradigm shift is revolutionizing medical decision-making by enhancing the precision, effectiveness, and personalization of patient care. The incorporation of AI and ML into diagnosis and treatment planning marks the beginning of a new era in medicine, paving the way for more advanced and individualized healthcare solutions. This time, predictive modeling and data-driven

decisions are approved. The healthcare industry has increasingly adopted artificial intelligence (AI) and machine learning (ML) as data becomes more accessible and the need for personalized treatment strategies grows. These technologies' ability to process vast amounts of data, uncover intricate patterns, and derive valuable insights has revolutionized diagnostics. AI and ML have enhanced prognosis, early disease detection, and classification of illnesses, addressing the demand for faster and more accurate medical evaluations. Traditional diagnostic methods are often constrained by human limitations and the complexity of healthcare data systems. In contrast, AI, with its advanced learning algorithms, can quickly and reliably diagnose patients by identifying subtle patterns across multiple datasets. This capability facilitates early disease detection, enabling timely interventions and improved patient outcomes. This paper explores the role of AI and ML in diagnostics and treatment planning, focusing on their current status, clinical applications, challenges, and future potential. By reviewing research findings, real-world applications, and critical analyses, it aims to contribute to the ongoing discussion about integrating AI and ML into healthcare. Understanding this transformative paradigm will help medical professionals navigate its complexities and harness its potential to enhance patient care and outcomes.

A. MOTIVATION OF THE RESEARCH

The need to improve healthcare accuracy, efficiency, and personalization drives the use of machine learning (ML) in diagnostic and treatment planning. Traditional diagnosis and treatment plans rely on medical experts' expertise and experience, which might affect patient outcomes. ML algorithms can scan massive medical data, find trends, and offer insights that humans may not see. Healthcare systems can enhance diagnostic accuracy, treatment plans, costs, and patient outcomes with ML.

B. STATEMENT OF THE PROBLEM

Healthcare issues include accurate and timely diagnosis and appropriate treatment planning despite advances in medical technology and research. Misdiagnosis and inadequate treatment regimens result from human mistake, professional skill, and medical data complexity. This can worsen patient outcomes, raise healthcare expenses, and strain healthcare systems. Innovative solutions to help doctors make better decisions are needed now. These issues can be addressed with machine learning techniques that evaluate complicated datasets, forecast disease outcomes, and provide individualized treatment regimens based on data.

II. LITERATURE OF REVIEW

N. Ghaffar Nia, E. Kaplanoglu, and A. Nasab (2023) study evaluates the use of artificial intelligence (AI) techniques in disease diagnosis and prediction, emphasizing the effectiveness of machine learning algorithms in early detection and personalized treatment plans, showcasing AI's growing role in healthcare decision-making [1]. B. Ashreetha et al. (2024) explore machine learning and deep learning methodologies to improve neoplasm diagnosis, presenting a comprehensive approach that integrates various AI techniques for more accurate and timely cancer detection [2]. Y. Wu et al. (2023) highlight the importance of interpretable machine learning in healthcare, using the LIME approach for personalized medical recommendations, enabling clinicians to better understand model decisions and enhance patient trust in AI-driven treatment suggestions [3]. A. V et al. (2024) discusses the application of AI in telemedicine, specifically for remote diagnosis and treatment planning, emphasizing AI's potential to enhance the accessibility and efficiency of healthcare services, especially in underserved areas [4]. D. D. Farhud and S. Zokaei (2021) focus on the ethical implications of AI in medicine, addressing concerns like patient privacy, data security, and the need for transparent AI models to ensure ethical and responsible implementation in healthcare systems [5]. F. Wu and Z. Chen (2023) investigates AI's role in diagnosing depression, using intelligent systems to analyze patient data and provide precise diagnoses, which could revolutionize mental health care by offering scalable and effective diagnostic tools [6]. J. Prasad et al. (2022) present a machine learning model for orthodontic treatment planning, demonstrating the potential of AI to assist dental professionals by providing data-driven clinical decision support for more efficient treatment strategies [7]. G. Rajani and K. Ruparel (2023) propose a deep learning-based chatbot for medical diagnosis and treatment recommendations. This AI-driven tool aims to offer immediate, accurate advice, improving patient access to healthcare while reducing the burden on medical professionals [8].

R. Rathore and S. Pratap Singh Rathore (2024) explore the use of machine learning in human resource management, specifically predicting employee turnover and performance, with potential applications in improving organizational efficiency and decision-making through predictive analytics [9]. J. Maddipatla (2022) introduces ClassAphasia, an ensemble

machine learning model designed to improve the diagnosis of aphasia and determine its severity [10]. The approach combines multiple algorithms to increase accuracy and assist clinicians in making more informed decisions. M. M. Ahsan et al. (2022) review various machine learning-based disease diagnosis systems, covering applications in multiple medical fields. The paper emphasizes how machine learning can improve diagnostic accuracy and speed, ultimately enhancing patient outcomes [11]. F. Hamdaoui et al. (2023) applies machine learning to cancer staging, with a focus on uveal cancer, demonstrating how AI can be used to predict cancer stages and support clinicians in making timely and accurate treatment decisions [12]. H. Ahady Dolatsara et al. (2020) present a two-stage machine learning framework designed to predict heart transplantation survival probabilities, incorporating monotonic constraints to enhance model reliability and provide more accurate clinical decision support [13]. S. Dubey et al. (2023) explore the use of machine learning in healthcare treatment planning, analyzing how AI can assist in optimizing treatment strategies and improving patient care outcomes across various medical domains [14]. N. Manjunathan et al. (2023) focus on early breast cancer detection using machine learning, showcasing how AI-driven models can enhance diagnostic accuracy and reduce the risk of delayed detection, leading to better patient prognosis [15]. S. Lalmuanawma et al. (2020) provide a comprehensive review of AI and machine learning applications for managing the Covid-19 pandemic. The paper discusses the potential of AI to aid in virus detection, patient monitoring, and treatment strategies [16]. K. J. Devi et al. (2023) explore AI's role in healthcare, discussing its use for diagnosis, treatment planning, and patient prediction models, emphasizing the need for AI to improve clinical outcomes and enhance healthcare systems [17]. M. Nasir et al. (2019) apply a data analytic approach to construct risk trade-offs for cardiac patients' re-admissions, demonstrating how AI and machine learning can provide predictive models to help healthcare professionals manage patient outcomes effectively [18]. I. Kononenko (2001) classic paper reviews the history and current state of machine learning in medical diagnosis, discussing key advancements and future directions for AI in healthcare, including challenges in integrating these technologies effectively [19]. M. Al Malki (2023) reviews the challenges of sustainable growth faced by small and medium enterprises (SMEs), offering insights into how AI and machine learning can be leveraged for better decision-making and strategic planning in business contexts [20]. V. Pisarkova et al. (2022) discuss multimodal machine learning approaches for medical diagnostics, showing how combining different data sources can improve diagnostic accuracy and aid in developing more robust healthcare applications [21]. V. Sharma et al. (2024) explore revenue growth through customer segmentation using K-Means and RFM models, enhancing marketing strategies efficiently [22]. P. Kaushik et al. (2024) address hate speech in SMART environments by combining ensemble learning with LSTM, proposing a robust detection framework [23]. S. S. Sikarwar et al. (2024) discuss the

use of OpenCV and IoT for improving lane management, contributing to smarter traffic systems [24]. S. Tanwar et al. (2024) develop a CNN-based approach for detecting brain haemorrhages, advancing healthcare capabilities in intelligent environments [25].

III. METHODOLOGY

A. Dataset

Healthcare-Diabetes.csv comprises 2768 rows and 10 columns. Characteristics include pregnancy, blood pressure, glucose, and insulin. Goal variable 'Outcome' shows diabetes (1) or absence (0).

B. Preprocessing

After removing the 'Id' column, the data is segmented into features (X) and target variable (y), normalized using StandardScaler, and divided into training and testing sets. Outliers were controlled and the 'Id' field was removed.

C. Training and building the model

Two machine learning models are trained on a healthcare dataset. Using a "Receiver Operating Characteristic (ROC)" curve and extensive evaluation, the Random Forest classifier achieved 98% accuracy. In comparison, Logistic Regression showed a distinct performance profile with 77% accuracy. Preprocessing, feature scaling, classification reports, and confusion matrices, including ROC curves, tested both models' healthcare diagnostic capability [26].

D. Model construction

Machine learning models were developed using Random Forest and Logistic Regression. The "random forest classifier" attained 98% accuracy using decision trees. However, probabilistic Logistic Regression obtained 77% accuracy. After being trained on standardized characteristics, the models were evaluated using several criteria to determine their diagnostic healthcare performance [27].

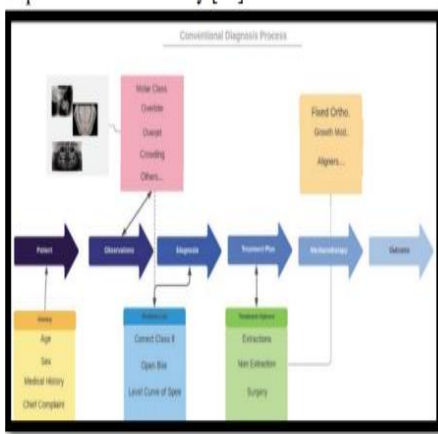


Fig. 1. Role Of AI And ML In Healthcare

E. Model evaluation

Models were evaluated using "accuracy, precision, recall, & F1 score" metrics. The Random Forest model outperformed the Logistic Regression approach with 98% accuracy versus 77%. F1 scores, recall, and precision reveal model efficacy. The model's predictive power has been extensively assessed using "Area Under the Curve (AUC)" values and "Receiver Operating Characteristic (ROC)" curves.

F. Performance evaluation

The approach performed well utilizing "recall, accuracy, precision, and F1 score" to assess the model's efficacy. Figure 2: AI in Healthcare Adding "Receiver Operating Characteristic (ROC)" curves and "Area Under the Curve (AUC)" values complicate the evaluation. The Logistic Regression model's 77% accuracy rate revealed the models' predictive ability, while the Random Forest model's 98% accuracy rate showed its superiority.

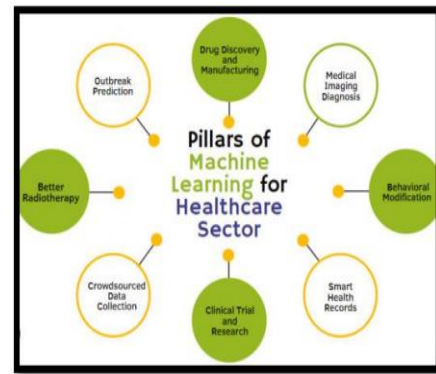


Fig. 2. Role Of AI In Health Sector

G. Deep learning models

The code sample does not indicate Deep Learning Models. However, adding neural networks like "Recurrent Neural Networks (RNNs)" or "Convolutional Neural Networks (CNNs)" may improve the model's ability to identify complex patterns in healthcare data and diabetes diagnosis prediction. Implementation may require TensorFlow or PyTorch frameworks and a deep learning paradigm-specific architecture [28].

H. Architectural comparison the architecture

comparison compares the diabetes outcome prediction power of Random Forest and Logistic Regression models. Random Forest, a tree-based ensemble technique, performed well with 98% accuracy, whereas logistic regression had 77% accuracy. Interpretability, computing complexity, and diagnostic application needs influence the choice between these architectures, which balance model intricacy and simplicity.

IV. EXPERIMENTAL SETUP AND IMPLEMENTATION

A. Experimental setup and performance metrics

The experimental setup included data preparation, feature analysis, and loading a diabetes dataset. Two machine learning models, Random Forest and Logistic Regression, were developed and evaluated to predict diabetes outcomes. Performance metrics such as accuracy, precision, recall, F1 score, and the area under the ROC curve (AUC) were used for assessment. Among the two models, the Random Forest demonstrated superior performance, achieving an impressive 98% accuracy compared to Logistic Regression's 77%, making it more effective in predicting diabetes outcomes.

B. Dataset

The 2768-entry dataset includes total ID, pregnancies, blood pressure, insulin, skin thickness, diabetes pedigree function, BMI, and the diabetes outcome variable.

C. Results analysis

	Id	Pregnancies	Glucose	BloodPressure	SkinThickness	Insulin	BMI
0	1	6	148	72	35	0	33.6
1	2	1	85	66	29	0	26.6
2	3	8	183	64	0	0	23.3
3	4	1	89	66	23	94	28.1
4	5	0	137	40	35	168	43.1

	DiabetesPedigreeFunction	Age	Outcome
0	0.627	50	1
1	0.351	31	0
2	0.672	32	1
3	0.167	21	0
4	2.288	33	1

	Id	Pregnancies	Glucose	BloodPressure	SkinThickness
count	2768.000000	2768.000000	2768.000000	2768.000000	2768.000000
mean	1384.500000	3.742775	121.102601	69.134393	20.82442
std	799.197097	3.323801	32.036508	19.231438	16.05959
min	1.000000	0.000000	0.000000	0.000000	0.000000

Fig. 3. Data Description

Figure 3: Data Description It shows the dataset's summary statistics and the first few rows, along with attributes like blood pressure, glucose, pregnancy, and ID . It offers information on the distribution, structure, and major statistical parameters of the data, including the mean, standard deviation, minimum, and maximum values for every characteristic gave insights into how well they worked in diagnostic healthcare applications.

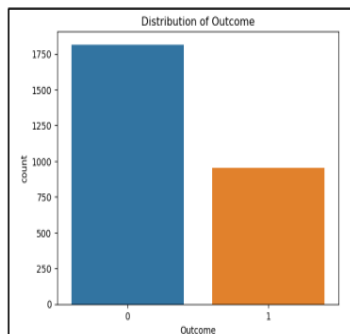


Fig. 4. Bar Graph

The code provides insights into the distribution of the target variable by detecting any missing values in the dataset and then employing a count plot to visualize the 'Outcome' variable's distribution .

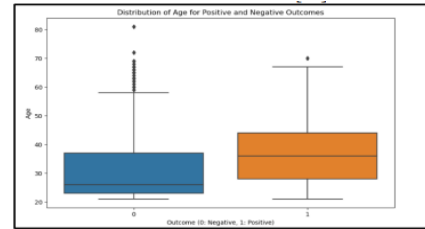


Fig. 5. Box Plot

The box plot illustrates the relationship between "Age" and "Outcome" in the dataset, highlighting the distribution of positive and negative outcomes.

Figure 6 depicts the accuracy of the Random Forest model. The program trains a **RandomForestClassifier**, generates predictions on the test set, and evaluates its performance using metrics such as recall, accuracy, precision, and F1-score. A confusion matrix is also provided to visualize the classification results. The model achieves a remarkable accuracy of **98%**, demonstrating its effectiveness in predicting outcomes.

Accuracy: 0.98				
	precision	recall	f1-score	support
0	0.98	0.99	0.99	367
1	0.99	0.96	0.98	187
accuracy			0.98	554
macro avg	0.99	0.98	0.98	554
weighted avg	0.98	0.98	0.98	554

Confusion Matrix:				
[[365 2]				
[7 180]]				

Fig. 6. Accuracy of Random Forest

It displays the "F1-score, precision, recall, & confusion matrix" for the logistic regression classification report, the model's accuracy is 77

Logistic Regression Classification Report:				
	precision	recall	f1-score	support
0	0.79	0.90	0.84	367
1	0.73	0.52	0.61	187
accuracy			0.77	554
macro avg	0.76	0.71	0.72	554
weighted avg	0.77	0.77	0.76	554

Logistic Regression Confusion Matrix:				
[[331 36]				
[90 97]]				

Fig. 7. Accuracy of Logistic Regression

The code calculates and plots the ROC (Receiver Operating Characteristic) curves for both the "Random Forest Classifier" and Logistic Regression models. Additionally, it compares the Area Under the Curve (AUC) values for each.

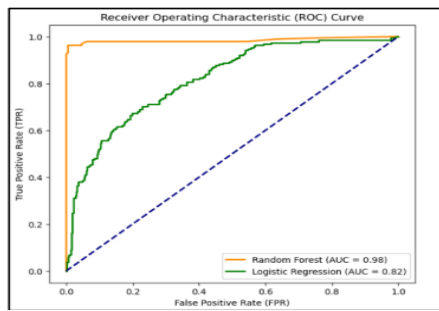


Fig. 8. ROC Curve

V. APPLICATION AREAS OF WORKS IMAGE RECOGNITION IN RADIOLOGY

Artificial Intelligence (AI) and Machine Learning (ML) have revolutionized diagnostics across various medical fields. These technologies, particularly in radiology, have enhanced image recognition by analyzing MRIs, CT scans, and X-rays with remarkable precision. They identify subtle patterns, anomalies, and irregularities that might escape human observation, leading to improved diagnostic accuracy for conditions like tumors detected through mammography.

In pathology and histopathology, AI and ML have streamlined the evaluation of tissue samples. Automated systems efficiently analyze extensive databases of pathology slides, identifying disease trends and minimizing manual workload for pathologists. These innovations accelerate diagnoses and enhance accuracy, especially in complex cases where minute details influence treatment decisions.

Beyond radiology, AI and ML have proven valuable in other imaging modalities such as PET scans and ultrasounds. These tools assist in automated classification, feature extraction, and identifying regions of interest. Applications are particularly impactful in fields like neurology, cardiovascular medicine, and oncology.

A critical application of AI and ML lies in the early detection of chronic diseases. Predictive algorithms leverage family history, lifestyle data, and medical records to identify high-risk individuals, enabling proactive therapy and early treatment planning. They also support managing diabetic complications and optimizing treatments.

AI and ML further excel in diagnosing infectious diseases. By analyzing clinical data, test results, and patient symptoms, these technologies detect infections swiftly and accurately. Predictive modeling aids resource management and outbreak response, as seen during the COVID-19 pandemic, where AI-powered diagnostic tools facilitated early identification of cases.

Overall, AI and ML have significantly advanced diagnostic capabilities across medical specialties, enhancing efficiency, precision, and patient outcomes.

VI. DISCUSSION & RESULT

The study highlights that RandomForest Classifier outperforms Logistic Regression in diabetes prediction. With an accuracy of 98% and an AUC score of 0.98, RandomForest proves to be a more dependable choice, offering valuable insights to enhance diagnostic accuracy for diabetes prediction in medical applications.

VII. CONCLUSION

The integration of Artificial Intelligence (AI) and Machine Learning (ML) in healthcare has revolutionized diagnosis and treatment planning. These advanced technologies offer significant potential to enhance accuracy, efficiency, and personalization in medical care. A comprehensive review of existing literature highlights the evolving role of AI and ML in transforming healthcare practices. Studies demonstrate how these tools analyze complex datasets, enabling precise diagnoses and well-informed treatment decisions. Researchers have employed methods such as predictive modeling for personalized treatments and radiographic image analysis to further medical innovation.

The speed and precision offered by AI and ML have significantly improved diagnostic processes. Physicians now leverage these technologies to identify diseases at earlier stages, facilitating timely interventions and improving patient outcomes. Real-world examples underscore how these tools refine diagnostic accuracy and enhance testing methodologies. As AI and ML continue to be incorporated into healthcare, their transformative impact is reshaping the field, paving the way for more informed, efficient, and patient-specific treatments.

However, with rapid technological advancements come challenges and ethical considerations. It is crucial to address these concerns while maximizing the benefits of AI and ML in healthcare. The ongoing collaboration between technology and medicine will continue to drive innovation, benefiting both patients and healthcare professionals alike.

REFERENCES

- [1] N. Ghaffar Nia, E. Kaplanoglu, and A. Nasab, "Evaluation of artificial intelligence techniques in disease diagnosis and prediction," *Discover Artificial Intelligence*, vol. 3, no. 1. Springer Science and Business Media LLC, Jan. 30, 2023. doi: 10.1007/s44163-023-00049-5.
- [2] B. Ashreetha, S. V. S. S. Srinivasa Kumar, J. S. Srinivas, K. Prasad, S. R. and D. G. V., "Accurate Neoplasm Diagnosis with Comprehensive Machine Learning and Deep Learning Approaches," *2024 5th International Conference for Emerging Technology (INCET)*, Belgaum, India, 2024, pp. 1-7, doi: 10.1109/INCET61516.2024.10593563.
- [3] Y. Wu, L. Zhang, U. A. Bhatti, and M. Huang, "Interpretable Machine Learning for Personalized Medical Recommendations: A LIME-Based Approach," *Diagnostics*, vol. 13, no. 16. MDPI AG, p. 2681, Aug. 15, 2023. doi: 10.3390/diagnostics13162681.
- [4] A. V. I. Sumalatha, A. Mishra, H. P. Thethi, R. Kalra and M. Almusawi, "Utilizing Artificial Intelligence in Telemedicine for Efficient Remote Diagnosis and Treatment Plan," *2024 IEEE 13th International Conference on Communication Systems and Network Technologies (CSNT)*, Jabalpur, India, 2024, pp. 1060-1065, doi: 10.1109/CSNT60213.2024.10546158.
- [5] D. D. Farhud and S. Zokaie, "Ethical Issues of Artificial Intelligence in Medicine and Healthcare," *Iranian Journal of Public Health. Knowledge E*, Oct. 27, 2021. doi: 10.18502/ijph.v50i11.7600.
- [6] F. Wu and Z. Chen, "Artificial Intelligence in Intelligent Medical Diagnosis for Depression," *2023 3rd International Conference on Digital Society and Intelligent Systems (DSInS)*, Chengdu, China, 2023, pp. 248-251, doi: 10.1109/DSInS60115.2023.10455490.
- [7] J. Prasad, D. Mallikarjunaiah, A. Shetty, N. Gandedkar, A. Chikkamuniswamy, and P. Shivashankar, "Machine Learning Predictive Model as Clinical Decision Support System in Orthodontic Treatment Planning," *Dentistry Journal*, vol. 11, no. 1. MDPI AG, p. 1, Dec. 20, 2022. doi: 10.3390/dj11010001.
- [8] G. Rajani and K. Ruparel, "Deep Learning based Chatbot Architecture for Medical Diagnosis and Treatment Recommendation," *2023 International Conference on Advanced Computing Technologies and Applications (ICACTA)*, Mumbai, India, 2023, pp. 1-6, doi: 10.1109/ICACTA58201.2023.10392702.

- [9] R. Rathore and S. Pratap Singh Rathore, "Machine Learning Applications in Human Resource Management: Predicting Employee Turnover and Performance," *International Journal for Global Academic & Scientific Research*, vol. 3, no. 2. International Consortium of Academic Professionals for Scientific Research, pp. 48–59, Jul. 02, 2024. doi: 10.55938/ijgasr.v3i2.77.
- [10] J. Maddipatla, "ClassAphasia: An Ensemble Machine Learning Network to Improve Aphasia Diagnosis and Determine Severity," 2022 IEEE International Conference on Bioinformatics and Biomedicine (BIBM), Las Vegas, NV, USA, 2022, pp. 3270–3273, doi: 10.1109/BIBM55620.2022.9995002.
- [11] M. M. Ahsan, S. A. Luna, and Z. Siddique, "Machine-Learning-Based Disease Diagnosis: A Comprehensive Review," *Healthcare*, vol. 10, no. 3. MDPI AG, p. 541, Mar. 15, 2022. doi: 10.3390/healthcare10030541.
- [12] F. Hamdaoui, A. Sghaier, A. Bdioui and S. Hmissa, "A machine learning model for cancer staging, case study: uveal cancer," 2023 International Conference on Innovations in Intelligent Systems and Applications (INISTA), Hammamet, Tunisia, 2023, pp. 1-5, doi: 10.1109/INISTA59065.2023.10310635.
- [13] H. Ahady Dolatsara, Y.-J. Chen, C. Evans, A. Gupta, and F. M. Megahed, "A two-stage machine learning framework to predict heart transplantation survival probabilities over time with a monotonic probability constraint," *Decision Support Systems*, vol. 137. Elsevier BV, p. 113363, Oct. 2020. doi: 10.1016/j.dss.2020.113363.
- [14] S. Dubey, G. Tiwari, S. Singh, S. Goldberg, and E. Pinsky, "Using machine learning for healthcare treatment planning," *Frontiers in Artificial Intelligence*, vol. 6. Frontiers Media SA, Apr. 25, 2023. doi: 10.3389/frai.2023.1124182.
- [15] N. Manjunathan, N. Gomathi and S. Muthulingam, "Early Detection of Breast Cancer using Machine Learning," 2023 International Conference on Sustainable Computing and Smart Systems (ICSCSS), Coimbatore, India, 2023, pp. 165-169, doi: 10.1109/ICSCSS57650.2023.10169777.
- [16] S. Lalmuanawma, J. Hussain, and L. Chhakchhuak, "Applications of machine learning and artificial intelligence for Covid-19 (SARS-CoV-2) pandemic: A review," *Chaos, Solitons & Fractals*, vol. 139. Elsevier BV, p. 110059, Oct. 2020. doi: 10.1016/j.chaos.2020.110059.
- [17] K. J. Devi, W. Alghamdi, D. N. A. Alkhayyat, A. Sayyora, and T. Sathish, "Artificial Intelligence in Healthcare: Diagnosis, Treatment, and Prediction," *E3S Web of Conferences*, vol. 399. EDP Sciences, p. 04043, 2023. doi: 10.1051/e3sconf/202339904043.
- [18] M. Nasir, C. South-Winter, S. Ragothaman, and A. Dag, "A comparative data analytic approach to construct a risk trade-off for cardiac patients' re-admissions," *Industrial Management & Data Systems*, vol. 119, no. 1. Emerald, pp. 189–209, Feb. 04, 2019. doi: 10.1108/imds-12-2017-0579.
- [19] I. Kononenko, "Machine learning for medical diagnosis: history, state of the art and perspective," *Artificial Intelligence in Medicine*, vol. 23, no. 1. Elsevier BV, pp. 89–109, Aug. 2001. doi: 10.1016/s0933-3657(01)00077-x.
- [20] M. Al Malki, "A Review of Sustainable Growth challenges faced by Small and Medium Enterprises," *International Journal for Global Academic & Scientific Research*, vol. 2, no. 1. International Consortium of Academic Professionals for Scientific Research, pp. 53–67, Mar. 30, 2023. doi: 10.55938/ijgasr.v2i1.39.
- [21] V. Pisarkova et al., "Machine learning methods for medical diagnostics based on a multimodal approach: a brief review," *Proceedings of the 6th International Conference on Future Networks & Distributed Systems*. ACM, Dec. 15, 2022. doi: 10.1145/3584202.3584305.
- [22] V. Sharma, P. Agarwal, H. Y. Shaikh, R. M. Lenka, S. K. Manjhi and R. Rathore, "Smart Next-Generation Revenue Growth: A Methodology for Partitioning Customers Utilizing the K-Means Algorithm and RFM Model," 2023 International Conference on Smart Devices (ICSD), Dehradun, India, 2024, pp. 1-6, doi: 10.1109/ICSD60021.2024.10751627.
- [23] P. Kaushik, R. Rohilla, P. Walia, S. Shankar, M. M. Kaushik and T. S. Gupta, "Confronting Hate Speech in SMART Environments: An Approach that Uses Ensemble Learning and LSTM," 2023 International Conference on Smart Devices (ICSD), Dehradun, India, 2024, pp. 1-6, doi: 10.1109/ICSD60021.2024.10751441.
- [24] S. S. Sikarwar, N. Chawla, P. Agarwal, M. F. Afzal, S. P. S. Rathore and N. Valecha, "Improving Lane Management: Leveraging OpenCV and IoT to Empower Smart Environments," 2023 International Conference on Smart Devices (ICSD), Dehradun, India, 2024, pp. 1-5, doi: 10.1109/ICSD60021.2024.10751495.
- [25] S. Tanwar, N. Choudhary, V. Chaudhary, A. Dahiya, P. Kaushik and R. Rathore, "Advancing Healthcare: CNN-Based Brain Hemorrhage Detection in Intelligent Environments," 2023 International Conference on Smart Devices (ICSD), Dehradun, India, 2024, pp. 1-6, doi: 10.1109/ICSD60021.2024.10751290.
- [26] Kaushik, P., Rathore, S. P. S., Rathore, R., & Sikarwar, S. S. (2024). Big Data-Powered Analytics for Fortifying Virtualized Infrastructure Security in the Cloud. In *Communications in Computer and Information Science* (pp. 156–168). Springer Nature Switzerland. https://doi.org/10.1007/978-3-031-80778-7_12
- [27] Kaushik, P., Rathore, S. P. S., Rathore, R., & Sikarwar, S. S. (2024). Data Analytics Augmented by AI in the Realm of 6G Wireless Communication. In *Communications in Computer and Information Science* (pp. 144–155). Springer Nature Switzerland. https://doi.org/10.1007/978-3-031-80778-7_11
- [28] Rathore, S. P. S., Kaushik, P., Rathore, R., & Sikarwar, S. S. (2024). Predictive Analytics for Inventory Management in Multi-Vendor E-Commerce. In *Communications in Computer and Information Science* (pp. 132–143). Springer Nature Switzerland. https://doi.org/10.1007/978-3-031-80778-7_10