

Harnessing Artificial Intelligence for Curriculum Review and Design in Health Professions Education: A Paradigm Shift Toward Data-Driven Reform

SubTitle: Applying Artificial Intelligence in Curriculum Review and Design

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Abstract

Artificial intelligence (AI) is rapidly transforming the landscape of health professions education (HPE), offering new possibilities for data-driven curriculum review and design. Traditional curriculum evaluation methods often rely on manual mapping, subjective interpretation, and delayed feedback cycles, which limit precision and responsiveness to evolving healthcare needs. In contrast, AI enables continuous, evidence-informed curriculum reform through data mining, learning analytics, and predictive modeling.

This review explores how AI can revolutionize curriculum review and design by automating data collection, analyzing complex educational datasets, and forecasting future competency requirements. Using a narrative synthesis of literature from 2015 to 2025, it highlights the role of AI in mapping learning outcomes, identifying redundancies, assessing content alignment, and guiding competency-based curriculum adjustments.

Data mining tools and natural language processing (NLP) systems can process large volumes of curricular documents and student performance data to reveal hidden patterns, while predictive analytics can anticipate emerging skill demands—such as AI literacy, telemedicine, and digital ethics—and guide timely curriculum integration.

A comparative analysis between manual and AI-based curriculum review methods demonstrates AI demonstrates advantages in scalability, consistency, and real-time adaptability and real-time adaptability. However, ethical challenges—such as data privacy, algorithmic bias, and faculty readiness—must be addressed to ensure responsible implementation. The paper proposes a conceptual AI-integrated curriculum review framework emphasizing human–AI collaboration, where educators retain oversight while AI supports decision-making through continuous analytics and evidence-based insights.

Integrating AI into curriculum review and design establishes a foundation for continuous quality improvement, institutional agility, and future-oriented education. As health professions evolve in the digital era, AI-driven curriculum governance offers an essential pathway toward producing competent, adaptive, and ethically grounded healthcare professionals.

Keywords: Artificial Intelligence; Curriculum Review; Curriculum Design; Competency-Based Education; Data Mining; Health Professions Education; Learning Analytics; Predictive Analytics.

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Introduction

Health professions education (HPE) is undergoing a transformative shift driven by rapid technological innovation in healthcare systems. Artificial

intelligence (AI), machine learning (ML), predictive analytics, and digital health technologies are increasingly integrated into diagnostic processes, clinical decision support systems, workflow

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automation, and learning healthcare systems (1,2). As AI reshapes clinical practice, educational institutions face mounting pressure to ensure that curricula evolve in parallel with technological advancement.

Despite the accelerating adoption of AI in healthcare, curriculum governance processes in many health professions programs remain largely manual, retrospective, and faculty-dependent (2,3). Traditional curriculum review typically relies on committee-based mapping of course learning outcomes (CLOs), program learning outcomes (PLOs), assessment blueprints, and accreditation standards. While expert judgment provides contextual value, manual systems are limited by subjectivity, delayed feedback cycles, and the inability to synthesize large, complex educational datasets efficiently (3,4,5).

The growing complexity of competency-based education (CBE) further challenges traditional review mechanisms. Modern HPE programs must ensure alignment not only with clinical competencies but also with digital literacy, AI literacy, interprofessional collaboration, ethical reasoning, and systems-based practice (5,6,7,8). Manual curriculum mapping processes may overlook redundancy, competency gaps, and longitudinal misalignment across courses, particularly when reviewing large datasets generated by learning management systems (LMS) and assessment platforms (2,6,9,10).

AI offers a potential solution to these limitations. Learning analytics, natural language processing (NLP), and machine learning algorithms can process curricular documents, assessment data, and student performance metrics at scale (4,7,11,12). These technologies enable automated curriculum mapping, identification of competency gaps, predictive forecasting of skill demands, and continuous monitoring of educational outcomes (9,13,14). Rather than replacing educators, AI systems can function as analytical partners that enhance transparency, objectivity, and responsiveness in curriculum governance (3,7,15,16).

In parallel, there is increasing recognition that health professions curricula must prepare learners not only to use AI tools but also to understand their ethical, social, and professional implications (4,9,13,17,18). AI literacy—including interpretation of algorithmic outputs, awareness of bias, and ethical governance—is emerging as a core competency for future clinicians (6,11,20,21). Consequently, curriculum review processes must adapt to ensure integration of these domains.

This review examines how AI-driven data mining, predictive analytics, and learning analytics can modernize curriculum review and design in health professions education. It proposes a conceptual AI-integrated curriculum review framework grounded in contemporary scholarship and emphasizes a collaborative human–AI governance model. By aligning curriculum oversight with technological advancement, institutions can foster adaptive, data-informed, and ethically grounded educational systems.

Methodology

This paper employed a narrative review design to examine how artificial intelligence (AI) contributes to curriculum review and design in health professions education (HPE). A narrative approach was selected to allow broad synthesis of conceptual, empirical, and policy-oriented literature addressing AI integration in educational governance (4,22). Unlike systematic reviews that focus on narrowly defined interventions, narrative reviews enable thematic interpretation and exploration of emerging innovations in rapidly evolving fields such as AI-enabled curriculum analytics.

A structured search was conducted across PubMed, Scopus, Web of Science, and ERIC databases to identify literature published between 2015 and 2025. Search terms included combinations of “artificial intelligence,” “machine learning,” “learning analytics,” “curriculum review,” “curriculum mapping,” “competency-based education,” and “health professions education.” Included sources comprised peer-reviewed empirical studies, systematic reviews, scoping reviews, AMEE guides, policy documents, and expert commentaries relevant to medicine, dentistry, nursing, and allied health education (9,24). Studies focusing solely on clinical AI applications without educational relevance were excluded.

The synthesis emphasized four interrelated domains:

- (1) AI-driven curriculum mapping and analytics,
- (2) Predictive forecasting of competencies,
- (3) Ethical governance and algorithmic accountability,
- (4) Faculty readiness and institutional adaptation.

This approach enabled comprehensive examination of how AI can support curriculum modernization, competency alignment, and data-informed quality improvement in HPE.

Manual vs. AI-Based Curriculum Review

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Curriculum review in health professions education has traditionally been a manual, faculty-driven process grounded in expert judgment, institutional experience, and periodic accreditation cycles (12,25,26). Committees typically examine course files, map course learning outcomes (CLOs) to program learning outcomes (PLOs), analyze assessment blueprints, and interpret student or faculty feedback. While such processes provide contextual insight and professional oversight, they are inherently limited by subjectivity, variability, and delayed feedback loops (3,8,27).

Manual curriculum mapping becomes increasingly complex in competency-based education (CBE) frameworks, where programs must align hundreds of CLOs with accreditation standards, competency domains, and longitudinal assessment data (25). As curricular structures expand to incorporate digital health competencies, interprofessional education, systems-based practice, and AI literacy, traditional review mechanisms may struggle to detect redundancy, gaps, or uneven distribution of competencies (6,28,29). Human-dependent review processes are also vulnerable to cognitive bias and inconsistency, particularly when handling large datasets generated by learning management systems (LMS) and assessment platforms (30).

AI-assisted curriculum review addresses many of these constraints by introducing automation, large-scale data integration, and continuous analytics into educational governance (19,28). Natural language processing (NLP) techniques can systematically analyze syllabi, curricular documents, and assessment descriptions to detect alignment gaps and content overlap (4,19,31). Machine learning algorithms can examine longitudinal student performance data to identify underperforming modules, hidden competency deficits, and patterns of assessment inconsistency (27,30). Predictive analytics further extend this capability by forecasting emerging competency requirements based on evolving healthcare technologies and workforce trends (7,12,32).

AI-powered dashboards enhance transparency by visualizing learning outcome coverage, competency progression, and assessment alignment in real time (28,30). Such systems transform curriculum review from a periodic, retrospective exercise into a dynamic process of continuous quality improvement (25). Data-driven curriculum intelligence frameworks have demonstrated potential to improve objectivity, scalability, and responsiveness in educational oversight (19,26,33).

However, AI does not replace the interpretive and ethical responsibilities of educators. Human oversight remains essential for contextual interpretation, cultural sensitivity, and pedagogical judgment (34). Algorithms can identify patterns, but faculty determine their educational significance. Consequently, the most effective model is a hybrid human–AI governance approach in which AI performs large-scale data processing while educators validate findings and guide curricular action (35,36).

The transition from manual to AI-assisted curriculum review therefore represents not a displacement of academic expertise, but a redefinition of faculty roles—from data collectors to data interpreters and strategic decision-makers. By combining analytical precision with professional judgment, institutions can modernize curriculum governance in alignment with the evolving demands of healthcare systems (33,37).

AI-Driven Data Mining and Predictive Forecasting in Curriculum Analysis

Artificial intelligence (AI) has significantly expanded the analytical capacity of curriculum evaluation by enabling large-scale data mining, pattern recognition, and predictive modeling in health professions education (HPE) (7,25,28). Modern HPE programs generate substantial volumes of structured and unstructured data, including student performance metrics, assessment blueprints, curricular documents, learning management system (LMS) activity logs, clinical evaluation records, and accreditation mapping reports. Traditional review processes, which rely primarily on manual aggregation and faculty interpretation, are often constrained by time, cognitive load, and limited analytical scalability (3,31). AI introduces an advanced analytical layer capable of synthesizing complex datasets to generate actionable educational insights (Table 1).

AI-Driven Data Mining

Data mining techniques enable transition from descriptive curriculum review to diagnostic and pattern-based evaluation (7,28). In HPE, AI-powered systems can analyze extensive curricular repositories—including syllabi, course outlines, learning outcome matrices, and assessment descriptions—to identify redundancy, vertical and horizontal misalignment, and competency gaps (19,26). Natural language processing (NLP) algorithms facilitate automated mapping of course learning outcomes (CLOs) to program-level competencies and accreditation standards, enhancing consistency and reducing human error (4,19).

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Through semantic analysis and frequency mapping, NLP systems can detect underrepresentation of critical domains such as professionalism, communication skills, digital health literacy, and ethical reasoning (6,35). This automated alignment process supports more objective curriculum mapping compared to traditional manual reviews (25).

Beyond document analysis, AI-based data mining can examine student engagement and behavioral analytics derived from LMS platforms. Variables such as login frequency, time-on-task, quiz attempts, and interaction with digital resources can reveal patterns of disengagement or cognitive overload (3,31). Machine learning models can identify clusters of students at risk of underperformance, enabling early academic intervention and targeted pedagogical refinement (27,30). These capabilities extend curriculum evaluation from structural review to performance-informed optimization.

Table 1. Comparison of Manual and AI-Based Curriculum Review Approaches

	Parameter	Manual Curriculum Review	AI-Based Curriculum Review
1	Nature of Review	Periodic, retrospective	Continuous, real-time
2	Data Handling	Fragmented, manually aggregated data	Automated, integrated data analytics
3	Accuracy	Dependent on subjective human judgment	Data-driven, objective, and consistent
4	Time Efficiency	Time-consuming and labor-intensive	Fast, automated, and scalable
5	Bias Risk	High, due to human interpretation	Lower, though algorithmic bias must be monitored
6	Predictive Capacity	Lacking	Strong predictive forecasting of emerging competencies
7	Curriculum Mapping	Manual and often inconsistent	Automated using natural language processing (NLP)

8	Faculty Role	Evaluator and decision-maker	Data interpreter and AI collaborator
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Note: Manual reviews rely heavily on faculty experience and retrospective evaluation, while AI-based reviews promote continuous monitoring, data integration, and predictive insight generation.

Predictive Forecasting for Proactive Curriculum Reform

While data mining provides insight into current curricular alignment, predictive analytics introduces a forward-looking dimension to curriculum governance (32). Machine learning models trained on longitudinal academic data can forecast competency attainment trajectories and identify emerging skill deficits before they manifest in assessment outcomes (27,32).

Predictive forecasting can also incorporate external data sources, such as technological innovation trends, workforce projections, and healthcare system transformations (33). This allows institutions to anticipate the integration of competencies related to telehealth, AI literacy, digital diagnostics, precision medicine, and systems-based care (6,35). By aligning curriculum evolution with anticipated professional demands, institutions shift from reactive modification to proactive reform.

Additionally, predictive models support institutional planning by forecasting enrollment pressures, identifying potential clinical training bottlenecks, and optimizing faculty allocation (28). Such data-informed forecasting enhances strategic academic governance and resource efficiency.

Real-Time Analytics and Continuous Quality Improvement

A defining advantage of AI-enabled curriculum systems is their capacity for real-time monitoring and continuous feedback (25,28). Learning analytics dashboards integrate assessment results, competency mapping data, and engagement metrics into visualized performance indicators accessible to curriculum committees and academic leaders (30). These dashboards can dynamically display coverage of competency domains, assessment alignment trends, and longitudinal student progression.

“Curriculum intelligence” systems automatically flag inconsistencies, outdated modules, or underperforming content areas based on predefined analytical thresholds (19,26). This transforms curriculum review from an episodic accreditation-driven exercise into an ongoing cycle of quality improvement (25,37). Continuous analytics enhance

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institutional agility and ensure responsiveness to evolving educational and healthcare landscapes.

Challenges and Ethical Considerations

Despite its analytical advantages, AI-driven curriculum forecasting introduces significant ethical and operational challenges (Figure 1). Educational datasets contain sensitive student information, necessitating rigorous governance structures, anonymization protocols, and secure data storage systems (2,13). Institutions must ensure compliance with ethical standards and maintain transparency regarding data usage.

Algorithmic bias represents another critical concern. Predictive models trained on incomplete or historically biased datasets may reinforce inequities in performance assessment or competency tracking (13,31). Continuous validation, auditing, and adoption of explainable AI (XAI) approaches are therefore essential to maintain fairness and interpretability (13). Faculty readiness also influences effective implementation. Educators must develop sufficient AI literacy to interpret analytic outputs critically and avoid overreliance on algorithmic recommendations (6,10). AI systems should function as decision-support tools rather than autonomous decision-makers, preserving human oversight and pedagogical judgment (36).



Figure 1: Challenges & Ethical issues

AI-Integrated Curriculum Review Framework

The integration of artificial intelligence (AI) into curriculum governance represents a structural transformation in health professions education (HPE),

shifting oversight from periodic, manually driven evaluation to continuous, data-informed quality management (25,37). Building on advances in learning analytics, curriculum intelligence, and predictive modeling (19,28,32), an AI-Integrated Curriculum Review Framework can be conceptualized as a cyclical, multilayered system composed of four operational layers—data acquisition, analysis and interpretation, decision and action, and evaluation and feedback—underpinned by cross-cutting ethical governance principles.

Together, these components form a dynamic model that supports continuous curriculum alignment, competency tracking, and strategic educational planning.

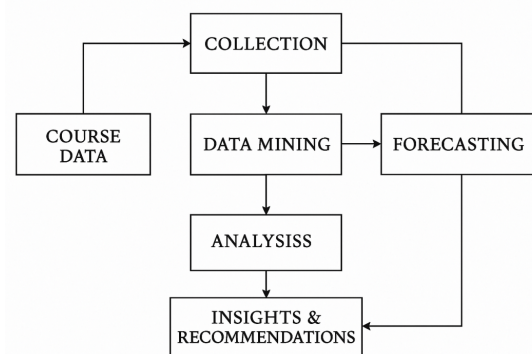


Figure 2: Data flow in AI based curriculum analysis

1. Data Acquisition Layer

The foundation of the framework lies in systematic, multimodal data collection across institutional systems. AI-enabled platforms aggregate structured and unstructured data from learning management systems (LMS), assessment platforms, student information systems, accreditation repositories, and faculty evaluation databases (3,25,28). These datasets include course learning outcomes (CLOs), program learning outcomes (PLOs), assessment scores, attendance logs, clinical evaluation metrics, and digital engagement indicators.

Natural language processing (NLP) tools expand this layer by extracting semantic meaning from unstructured documents such as syllabi, curriculum maps, policy documents, meeting minutes, and accreditation reports (4,19). Automated data mining enhances scalability and reduces human error in data compilation (7,28). Through centralized integration, institutions create a unified curricular intelligence database capable of supporting longitudinal and cross-sectional analyses.

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However, robust data governance is essential at this stage. Ethical safeguards—including anonymization, encryption, secure storage protocols, and transparent consent mechanisms—must be embedded within system architecture to maintain trust and regulatory compliance (2,13).

2. Analysis and Interpretation Layer

Following data aggregation, AI algorithms perform structured analytical processes to uncover patterns, inconsistencies, and predictive signals (19,28). Machine learning and NLP models can map CLOs to PLOs and accreditation competencies, identifying redundancy, misalignment, and underrepresentation of critical domains such as communication skills, professionalism, digital health literacy, and AI ethics (6,35).

Advanced visualization dashboards translate complex analytical outputs into interpretable formats, enabling curriculum committees to assess competency distribution, assessment alignment, and longitudinal performance trends in real time (25,30). Learning analytics further facilitate monitoring of instructional impact by correlating teaching methods, assessment strategies, and student outcomes (3,31).

Predictive analytics enhance this layer by forecasting future competency needs based on historical performance data and evolving healthcare trends (32,33). For example, institutions can anticipate increased demand for telemedicine competencies, AI literacy, and digital diagnostics integration (6,35). This forward-looking analysis transforms curriculum review from reactive correction to anticipatory reform.

3. Decision and Action Layer

In this layer, AI functions as an analytical partner rather than an autonomous decision-maker (36). Curriculum committees, academic leaders, and faculty interpret AI-generated insights within the context of institutional mission, accreditation standards, cultural considerations, and pedagogical philosophy.

For instance, if analytics reveal limited coverage of clinical reasoning or ethical decision-making competencies, faculty may redesign assessments, integrate case-based learning modules, or revise competency frameworks (19,25). Human oversight ensures that curricular modifications remain educationally meaningful and ethically aligned.

This collaborative human–AI interaction redefines faculty roles—from manual data reviewers to strategic interpreters and educational architects (36,37). Rather

than replacing academic expertise, AI augments decision-making precision and transparency.

4. Evaluation and Feedback Layer

The evaluation and feedback layer operationalizes continuous quality improvement (25). AI-powered dashboards provide real-time monitoring of competency attainment, student engagement patterns, and module effectiveness (28,30). Automated alerts can flag performance anomalies, assessment misalignment, or outdated content requiring review (19).

Longitudinal tracking supports adaptive curriculum cycles in which implemented changes are evaluated for impact before subsequent modifications are introduced (27,32). This iterative loop strengthens institutional agility and promotes evidence-based curriculum governance.

By embedding feedback within an ongoing analytic system, curriculum oversight transitions from episodic accreditation-driven audits to sustained performance-informed refinement (25,37).

5. Ethical and Governance Dimensions (Cross-Cutting Layer)

Ethical governance underpins all operational layers of the framework. Institutions must ensure algorithmic transparency, mitigate bias, and maintain accountability in AI-supported decision-making (2,13). Predictive models should undergo regular validation and auditing to prevent inequitable outcomes or misinterpretation of performance data (13,31).

Faculty AI literacy is equally critical. Educators must possess sufficient understanding of analytic methodologies to interpret outputs critically and avoid algorithmic determinism (6,10). AI systems should serve as decision-support mechanisms, preserving human authority and contextual judgment (36). When supported by responsible governance and faculty engagement, the AI-Integrated Curriculum Review Framework enhances transparency, objectivity, scalability, and responsiveness in HPE curriculum management (25,33).

Conceptual Significance

Collectively, this framework reframes curriculum review as a continuous intelligence-driven ecosystem rather than a periodic administrative requirement. By integrating automated mapping, predictive forecasting, real-time dashboards, and ethical oversight, institutions can align educational design

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with rapidly evolving healthcare systems while maintaining academic integrity and human-centered decision-making.

Challenges, Ethical Considerations, and Faculty Readiness

The integration of artificial intelligence (AI) into curriculum review and design presents substantial opportunities for precision, scalability, and continuous quality improvement in health professions education (HPE) (25,28). However, successful implementation depends on addressing ethical, institutional, and human factors that influence trust, accountability, and sustainability. Without deliberate governance, AI-driven systems risk reinforcing inequities, undermining faculty confidence, and compromising institutional integrity.

1. Data Privacy and Security

AI-enabled curriculum intelligence systems rely on large-scale aggregation of student performance data, assessment analytics, clinical evaluation metrics, and engagement indicators (3,25). These datasets often contain sensitive personal and academic information. Inadequate safeguards may expose institutions to ethical breaches, regulatory violations, and erosion of stakeholder trust.

Robust data governance frameworks must therefore include anonymization protocols, encryption standards, secure server architecture, access control policies, and transparent data-use documentation (2,13). Clear communication with students and faculty regarding how data are collected, analyzed, and protected is essential to maintain confidence in AI-supported decision systems. Ethical data stewardship should be embedded at the design stage rather than applied retrospectively.

2. Algorithmic Bias and Interpretability

AI systems are inherently shaped by the data on which they are trained. If historical educational datasets reflect inequities or incomplete representation, predictive models may perpetuate bias in performance evaluation or competency forecasting (13,31). This risk is particularly significant in multicultural, multidisciplinary HPE contexts where learner diversity is substantial.

Moreover, complex machine learning models may function as “black boxes,” limiting transparency in how recommendations are generated. Lack of interpretability can reduce faculty trust and hinder responsible curriculum decisions. To mitigate these risks, institutions should prioritize explainable AI

(XAI) approaches and conduct routine algorithmic audits to evaluate fairness, consistency, and reliability (13). Interpretability enhances accountability and preserves the credibility of AI-assisted governance.

3. Faculty Readiness and AI Literacy

Faculty engagement represents a decisive factor in the success of AI integration. Expertise in clinical practice and pedagogy does not automatically confer proficiency in data analytics or AI interpretation (6,10). Insufficient AI literacy may result in resistance, misinterpretation of outputs, or overreliance on algorithmic recommendations.

Institutions should invest in structured AI literacy initiatives tailored to educators, emphasizing conceptual understanding rather than technical programming skills (6,35). Workshops, interdisciplinary collaboration with data scientists, and participatory system design processes can foster ownership and reduce apprehension (36). Evidence suggests that faculty readiness and institutional support significantly influence sustainable AI adoption in educational settings (10,24). By empowering educators to critically interpret AI-generated insights, institutions preserve human judgment while enhancing analytical capacity.

4. Ethical Governance and Accountability

AI-supported curriculum systems require clearly defined governance structures that delineate roles, responsibilities, and decision authority (2,36). Human oversight must remain central; AI should function as a decision-support mechanism rather than an autonomous policy driver.

Multidisciplinary governance committees—including educators, technologists, ethicists, and administrators—can oversee algorithm validation, data governance compliance, and strategic implementation (13). Transparent documentation of AI-assisted decisions enhances institutional accountability and protects against unintended consequences. Embedding ethical governance across all operational layers ensures that technological innovation aligns with professional standards and public trust.

5. Cultural and Organizational Adaptation

AI adoption entails cultural transformation within academic institutions. Faculty accustomed to traditional review processes may perceive AI as disruptive or unnecessary (37). Leadership must therefore frame AI not as a replacement for academic expertise but as an augmentative tool that enhances

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insight, efficiency, and strategic foresight (36). Phased implementation, pilot programs, iterative evaluation, and open communication can facilitate gradual adaptation (25). Organizational readiness—including infrastructure, training, and policy alignment—determines whether AI integration results in sustainable improvement or fragmented experimentation.

Conclusion and Future Directions

The integration of artificial intelligence into curriculum review marks a significant evolution in health professions education. Traditional manual review processes, although valuable, often lack the scalability and responsiveness needed to address rapidly evolving healthcare demands and expanding competency frameworks. AI-driven tools such as data mining, predictive analytics, and real-time dashboards enhance transparency, objectivity, and continuous quality improvement in curriculum governance. However, AI should function as a supportive tool rather than a replacement for human expertise. Faculty interpretation, ethical judgment, and contextual understanding remain essential for responsible curriculum decision-making.

Future research should focus on validating AI-based curriculum intelligence systems, assessing their long-term impact on learner outcomes, and developing standardized ethical frameworks for AI use in education. Collaborative efforts across institutions will be important to establish best practices and ensure equitable adoption. Responsible integration of AI can support the development of adaptive, data-informed curricula that prepare healthcare professionals for the evolving digital healthcare environment.

References

1. Alshammari S, Williams B, Aldossary S. Artificial intelligence applications in health professions education: Opportunities, challenges, and implications. *BMC Med Educ.* 2022;22(1):948.
2. Noronha A, Subramanian R. Ethical AI governance in medical and dental education: Balancing innovation with responsibility. *J Dent Educ.* 2024;88(3):345–356.
3. Sandars J, Patel R. Using learning analytics to improve curriculum design and delivery: A guide for medical educators. *Med Teach.* 2020;42(8):910–918.
4. Zawacki-Richter O, Marín VI, Bond M, Gouverneur F. Systematic review of research on artificial intelligence applications in higher education. *Int J Educ Technol High Educ.* 2019;16:39.

5. AbdAlrazaq A, Alajlani M, Alhuwail D, Shah Z. Artificial intelligence in health education and practice: Embedding AI training into curricula. *Nurse Educ Today.* 2023;124:105664.
6. Ang CS, Liu X. Developing AI literacy in healthcare education: A framework for curriculum development. *J Technol Hum Serv.* 2025;43(1):34–50.
7. Feigerlova E, Toofaninejad E, Sadoughi F. Learning analytics in health professions education: Transforming data utilization and supporting curriculum design. *Teach High Educ.* 2025;30(4):499–516.
8. Kim Y, Lee J. Curriculum frameworks and educational programs in AI for medical education: A scoping review. *JMIR Med Educ.* 2024;10:e54793.
9. Chan S, Zary N, Lau S. The role of artificial intelligence in medical education: A review of current perspectives. *Med Teach.* 2020;42(7):789–796.
10. MacNeil M. Artificial intelligence in health professions education assessment: AMEE Guide No. 178. *Med Teach.* 2025;47(2):120–132.
11. Naamati-Schneider L, Shoal M. Developing AI literacy through ChatGPT-based learning in health professions education. *Comput Educ ArtifIntell.* 2025;6:100554.
12. Oliva-Córdova M, Gómez L. Application of learning analytics in medical education: Digital competencies and curriculum integration. *Comput Educ.* 2025;168:104201.
13. Quinn P, Coghlan S. Ready medical students for medical AI: The need to embed AI ethics education. *Med Educ Online.* 2021;26(1):1928013.
14. Toofaninejad E, Sadoughi F. Exploring the transformative potential of learning analytics in medical education. *BMC Med Educ.* 2025;25:84.
15. Yang J, Zhang B. Artificial intelligence in intelligent tutoring robots: A systematic review and design guidelines. *Int J ArtifIntell Educ.* 2019;29(4):560–579.
16. Zhou Y, Lu M. AI in medical education: A systematic review of the impact on student outcomes and curricular innovation. *J Educ Comput Res.* 2024;62(7):1804–1827.
17. Feigerlova E, Hani H, Hothersall-Davies E. A systematic review of the impact of artificial intelligence on educational outcomes in health professions education. *BMC Med Educ.* 2025;25:129.
18. Shankar, P. Artificial Intelligence in Health Professions Education. *Archives of Medicine and Health Sciences.* 2022;10(2):256–261,

Harnessing Artificial Intelligence for Curriculum Review and Design in Health Professions Education: A Paradigm Shift Toward Data-Driven Reform

- 19.Chen S, Zhang W. Curriculum intelligence: The next frontier in competency-based medical education. *Adv Health Sci Educ.* 2023;28(5):1127–1142.
- 20.Tolentino R. Curriculum frameworks and educational programs in AI for medical education: A scoping review. *JMIR Med Educ.* 2024;10:e54793.
- 21.Ng FYC, et al. Artificial intelligence education: An evidence-based curriculum for future clinicians and educators. *ArtifIntell Med Educ.* 2023;1(1):100012.
22. Gordon M, et al. A scoping review of artificial intelligence in medical education: BEME Guide No. 84. *Medical teacher.* 2024;46(4):446-470.
- 23.Gazquez-Garcia J, et al. AI in the health sector: Systematic review of key skills for healthcare professionals. *JMIR Med Educ.* 2025;6:e58161.
- 24.Ahsan, Z. Integrating artificial intelligence into medical education: a narrative systematic review of current applications, challenges, and future directions. *BMC Med Educ.*2025; 25:1187.
- 25.Ellaway R, Pusic M. Data-driven curriculum design and learning analytics in medical education. *Acad Med.* 2021;96(9):1240–1246.
- 26.Kumar A, Singh P. AI-enabled curriculum intelligence: Re-defining competency frameworks in dental and medical education. *J Dent Educ.* 2025;89(2):202–214.
- 27.Venkatesan P, Alotaibi F. Using machine learning for outcome-based curriculum evaluation in health professions education. *Adv Health Sci Educ.* 2024;29(6):1475–1490.
- 28.Hariri S, Mahmood K. Data-driven curriculum analytics: Leveraging AI for continuous improvement in medical and nursing education. *Teach Learn Med.* 2023;35(4):389–399.
- 29.Negi R, Deepti C, Komal M, Anushi M, Dinesh B, Padmini V. Artificial intelligence in simulation-based training for Health Professions Education: Navigating the rabbit hole. *Medical Journal Armed Forces India.* 2025; 81 (6):637-643.
- 30.Kim J, Park H, Yoo J. Artificial intelligence-based curriculum evaluation system for medical schools. *J Med Syst.* 2023;47(2):45.
- 31.Knight S, Shum B. Learning analytics and AI: Politics, pedagogy, and practices. *Br J Educ Technol.* 2018;49(3):489–497.
- 32.Luo J, Qin Y. Predictive analytics for competency forecasting in health professions education. *Comput Educ.* 2021;168:104201.
- 33.Meskó B, Topol E. The role of artificial intelligence in learning healthcare systems. *NPJ Digit Med.* 2019;2:38.
- 34.Mahbub M, Puspita H, Tamal J, Jyoti D , Samia T, Ping M, Winston L.Artificial intelligence in health professions education: A state-of-the-art meta-review.*MedRxiv* 2025;10(20):25338371.
- 35.Car J, Sheikh A. Digital health competencies in medical education: A consensus statement. *JAMA NetwOpen.* 2025;8(6):e2829788.
- 36.Sortes ,Rawekar A, Rathod S. Understanding AI in Healthcare: Perspectives of Future Healthcare Professionals. *Cureus* 2024; 16(8): e66285.
- 37.Hamdy H, Anderson M. From manual curriculum mapping to AI-assisted analytics: A paradigm shift in medical education quality assurance. *Med Educ Online.* 2020;25(1):1729846.