

From Charts to Chips: How Artificial Intelligence is Healing Healthcare

Mr. Jagdish Kumar Vinjamuri

Principal Product Manager (Tech)

Aetna Inc. (A CVS Health Company)

Corresponding Author Email: vinjagdish@gmail.com

ABSTRACT—In healthcare, the shift is happening from old paper charts to innovative systems run by AI and large databases. This paper shows how AI is helping to modernize and improve patient care in the fields of diagnosis, analytical predictions, customized treatment and daily operations. AI is making it easier to identify health problems early and expect a decline in patients, able to support hospitals and their patients more effectively. It also covers the problems and difficulties involved in bringing AI into healthcare, including matters related to bias, privacy and the regulations in place. With medicine moving forward in this new digital era, working together with advanced technology should make care more accurate, efficient and caring.

Keywords: Artificial Intelligence, Healthcare, Diagnosis, Predictive Analytics, Personalized Medicine, Digital Transformation, AI Ethics, Healthcare Technology.

How to cite this article: Vinjamuri JK. From Charts to Chips: How Artificial Intelligence is Healing Healthcare. *Int J Drug Deliv Technol.* 2026;16(6s): 780-789; DOI: 10.25258/ijddt.16.6s.105

I. INTRODUCTION

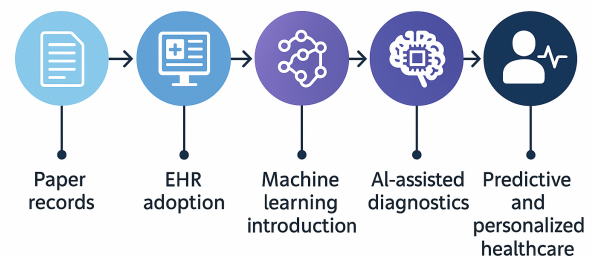
Clinical decisions and keeping records in healthcare have, for a long time, depended on people handling paperwork. They used written notes, kept physical charts in cabinets and the way people documented varied from one medical staff member to the next. Even though paper-based health records were the main way healthcare was delivered, they had difficulties scaling, connecting different systems and providing information promptly. Clinical choices depended a lot on what the doctor could remember, their experience and how easily they could get the patient's records which sometimes led to inconsistent care or missing parts of a treatment plan (Short life & Cimino, 2014). There was an effort to move information to electronic health records (EHRs), but these digital systems faced setbacks, like splitting data into silos, making the information difficult for clinicians to use and causing clinicians to feel exhausted from all the paperwork (Shanafelt et al., 2016).

Lately, the healthcare sector has seen important changes because of the integration of artificial intelligence (AI). AI which involves computers replicating human intelligence, has proved to be very useful in processing, examining and learning from mammoth healthcare data sets. In contrast to previous tools, AI finds hidden trends in lots of data, helps foresee various health outcomes, makes administrative tasks more efficient and helps clinicians during the decision-making process (Topol,

2019). By using machine learning in radiology and natural language processing on clinical documentation, AI is helping shift the way healthcare is carried out, offered and perceived.

This paper is meant to take a close look at AI's effects on the changing landscape of healthcare. Where AI was at first implemented mostly for paperwork and scheduling, today's work involves using AI to treat patients. This change creates a mix of chances for improvement and obstacles such as better diagnosis along with ethical, accountable and trust issues.

HEALTHCARE EVOLUTION TIMELINE



This paper will examine the evolution in this way. The idea is to introduce the change from traditional chart methods to recently invented, data-centered AI systems. Following that, it reviews important fields within healthcare that AI is changing such as diagnostics, predictive analytics, personalized medicine and operations. It explains the ethical and regulatory points that are important for ensuring a safe and fair adoption of

From Charts to Chips: How Artificial Intelligence is Healing Healthcare

technology. This paper ends by thinking about how AI will develop in healthcare and the teamwork necessary for human clinicians and machines to achieve the best results. Thanks to this structure, this paper explains how, with the help of AI, healthcare can be improved overall and systemic issues in healthcare can be addressed.

Table I:

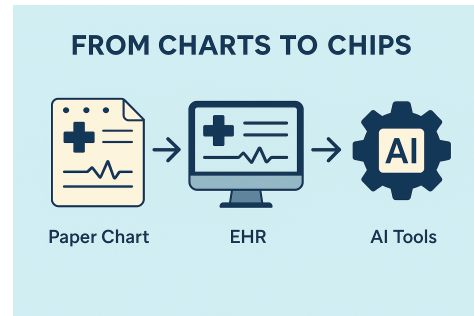
Item	Traditional Healthcare	AI-Driven Healthcare
Data Storage	Paper charts	Electronic and cloud-based
Diagnostic Decision-Making	Clinician judgment only	Clinician + AI support
Workflow	Manual and fragmented	Automated and integrated
Patient Engagement	Periodic, reactive	Continuous, proactive

II. THE EVOLUTION FROM CHARTS TO CHIPS

Healthcare moved from being analog to digital because paper-based methods have many limitations. Until about the end of the 20th century, patient records were recorded by hand and kept in hard copies which made it hard to access records promptly or keep track of care consistently. These drawings could be misunderstood, lost or contain mistakes which was why they did not support the expansion or quality improvement of healthcare. Clinical decisions used to be based simply on doctors' memory or handwritten notes which worked well until medicine needed more specialized care (Blumenthal & Tavenner, 2010).

The development of electronic health records (EHRs) in the late 20th and early 21st centuries greatly helped to improve how healthcare is documented. Because of the HITECH Act which was launched in 2009 to encourage the shift to EHRs, digital record-keeping was introduced at a fast pace in the United States (Adler-Milstein & Jha, 2017). With EHRs, records were kept in a single place, updates happened instantly and data could be sent between institutions. Although EHRs were designed to help, the early versions usually resulted in clinicians facing more data, unchangeable interface issues and more paperwork (Downing et al., 2018). These digital systems did not have smart features and worked mainly as databases, reducing their help in handling clinical insights.

With more digital data available due to EHRs, imaging, genetics and wearables, healthcare started using data for healthcare decisions. While digital transformation is considered, this model especially highlights getting useful information from vast and mixed databases. It is in this situation that artificial intelligence (AI) has come to be very important. Using advanced computing methods, AI in healthcare helps to analyze detailed medical information, notice recurring patterns and support doctors with more accurate and immediate answers (Jiang et al., 2017).



It is because of key technologies in AI that such an advancement was achieved. ML which is a part of AI, teaches algorithms to become better using data and without being directly programmed. In medicine, ML supports activities such as figuring out about illnesses, dividing cases by risk and improving treatments. For example such models can use old patient records to anticipate events like heart attacks and new readmissions (Esteva et al., 2019). AI systems now use natural language processing (NLP) to gain valuable data from documents such as physician notes and discharge summaries which were previously not used much in digital systems. When NLP changes free-text stories into structured data, it makes clinical documentation more useful for detailed analysis (Wu et al., 2020). Computer vision, another important area in AI, lets machines analyze medical images like X-rays, MRIs and CT scans as skillfully as human radiologists (Litjens et al., 2017). All of these technologies demonstrate that while earlier, they were just for documentation, now they take an active part in supporting decisions and insight. Changing from charts to chips means moving from storing data without using it to making health data work actively for us.

Table II:

Era	Technology Used	Impact on Care

From Charts to Chips: How Artificial Intelligence is Healing Healthcare

Pre-Digital	Handwritten notes	Limited access, slow decisions
Digital Records	EHRs	Improved storage, faster access
AI Integration	ML, NLP, Computer Vision	Enhanced precision and insight

III. KEY APPLICATIONS OF AI IN HEALTHCARE

A. Diagnostics and Medical Imaging

Artificial intelligence is used most widely in healthcare for diagnostics, mainly related to radiology and pathology. Deep learning AI systems have the power to look at medical images at speeds and with the accuracy similar to that seen in human experts. In radiology, CNNs have been trained to spot problems such as lung nodules, breast cancer and brain hemorrhages with a high level of accuracy (McKinney et al., 2020). In addition, pathologists now rely on AI to detect cell irregularities, assess cancer from images and help them diagnose specific diseases at the microscope level (Komura & Ishikawa, 2018).

With these AI systems, doctors can both diagnose better and work more quickly when reading complex images. A number of AI models are now approved by regulators to be used in clinical care. As an illustration, the FDA-approved IDx-DR is able to detect signs of diabetic retinopathy from images alone, without a specialist and this system helps with diagnosis and treatment much earlier, especially in regions that have a shortage of specialists (Abramoff et al., 2018).

B. Predictive Analytics and Preventive Care

Along with diagnostics, AI makes predictions about disease progression and provides opportunities for early care. Using patient records from the past and present helps predictive analytics find patients who are likely to develop certain health issues or suffer negative consequences. As an illustration, using EHR data, AI models can anticipate possible hospital readmissions, the start of sepsis or worsening health in people with heart failure or chronic obstructive pulmonary disease (Churpek et al., 2016).

Thanks to risk stratification models, doctors can give priority to patients who need urgent care and use resources in the best way. In managing chronic diseases, more and more AI is used together with wearable devices and remote monitoring solutions. Such tools regularly

monitor blood glucose and heart rate levels and use artificial intelligence to catch early warning signs of instability to help patients and doctors take relevant actions (Saria et al., 2018). This ensures that patients get better outcomes which also helps keep health costs lower by preventing long-term complications and visits to the hospital.

C. Clinical Decision Support Systems (CDSS)

With advanced AI, clinical decision support systems (CDSS) are revolutionizing how doctors and other healthcare personnel plan diagnosis and care. AI uses patients' data and compares it to extensive medical information to suggest which conditions might be present which treatment options to use and when to consider possible contraindications or interactions from medications (Sutton et al., 2020). They are designed to enhance our skills rather than take over what people do. Integrating CDSS with EHR is a major progress. If AI tools are integrated into the usual process, they review patient records in real time and provide helpful information during consultations. Doing this keeps doctors from feeling overloaded and helps decrease the chances of them missing important points because they are too tired. According to research, using such systems can make diagnoses more accurate, help doctors follow clinical guidelines and result in more favorable patient outcomes (Sendak et al., 2020).

D. Personalized Medicine and Treatment Optimization

The rise of AI is speeding up the process of personalized medicine, in which care is adjusted based on each patient's genes, biology and routines. With AI, it is possible to look at genomic sequences, proteomic data and patient information to come up with personalized treatments. In the field of oncology, AI can look at tumor genetic results to help choose the best treatment for an individual, preventing unnecessary treatments and their side effects (Kourou et al., 2015).

Pharmacogenomics is helped a lot by machine learning which can foresee both harmful reactions and appropriate dosages in patients, depending on their genes. Because of this, medications can be prescribed more accurately and safely, mainly when patients have multiple or rare diseases. AI also takes part in identifying new drugs, exploring preliminary results and adjusting clinical trial programs, all of which can decrease the time needed to lead a discovery to the market (Vamathevan et al., 2019).

E. Administrative Efficiency and Automation

From Charts to Chips: How Artificial Intelligence is Healing Healthcare

Besides helping with care, AI is making important progress in managing the administrative issues that create burdens for healthcare systems. Billing, making appointments, processing claims and verifying insurance are now managed with automated tools using AI. These healthcare applications ease administrative tasks for staff, so they can give more attention to patients (Jiang et al., 2017).

AI plays a major role in documenting patient visits and their records. With natural language processing, AI-powered tools and digital scribes create neat notes from doctor-patient conversations and this takes less time and results in improved record-keeping. To address clinician burnout which is getting worse because of the burden of documentation, more healthcare professionals are turning to Nuance's Dragon Medical One and Suki AI solutions (Shanafelt & Noseworthy, 2017). Routinized tasks completed by AI make healthcare services more environmentally friendly and boost the efficacy of the system.

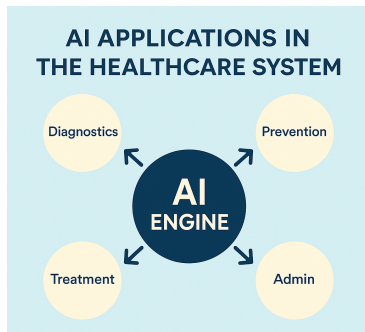


Table III:

Application Area	AI Functionality	Example Tool/Use Case
Diagnostics	Image analysis, anomaly detection	Skin cancer recognition AI
Predictive Analytics	Disease forecasting, risk scoring	Heart failure prediction model
CDSS	Real-time clinical guidance	IBM Watson for Oncology
Personalized Medicine	Genomic-based treatment suggestions	AI in pharmacogenomics

Admin Automation	Billing, transcription, scheduling	AI voice assistant for doctors
------------------	------------------------------------	--------------------------------

IV. BENEFITS OF AI IN HEALTHCARE

Using artificial intelligence in healthcare has led to better outcomes, improved how healthcare services are run and more engagement with patients. When AI becomes a bigger part of everyday operations in hospitals and administration, its transformative power becomes very clear.

AI greatly improves how accurately and consistently health conditions are diagnosed. The problem of making a wrong diagnosis in medicine has existed for a long time and results in missed treatment, excessive tests and negative outcomes for patients. AI exceeds human capabilities in finding diseased areas that might go unnoticed if only the human eye is used in medical imaging and pathology. As an example, deep learning models examine massive collections of mammograms and do as well at detecting breast cancer as radiologists, showing fewer inaccurate results (McKinney et al., 2020). Because of these AI tools, clinical judgment is strengthened and outfit differences are minimized, so caregivers agree more on their diagnoses.

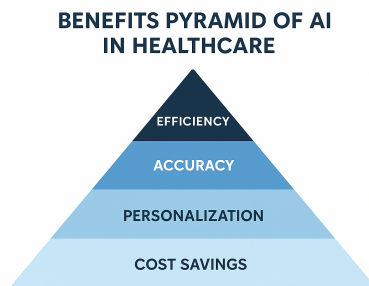
Another core benefit is enhanced workflow efficiency. The medical field is well known for its complicated administration and for having a flood of data which can cause workers to become exhausted and affect efficiency. AI takes over many routine duties like paperwork, billing and planning appointments. AI tools that help in scribing and structuring patient chats allow clinicians to reduce their administrative work, so they spend more time talking to their patients (Shanafelt & Noseworthy, 2017). In addition, when AI algorithms are connected to electronic health records, they can detect unusually high lab values, warn about possible reactions to certain medicines and suggest which steps to follow next, making the thinking process easier for providers (Sutton et al., 2020).

When it comes to financial reasons, the use of AI tech may help cut costs and prevent patients from having to return to the hospital. Thanks to predictive models, medical teams can find patients who might need early help, so any serious issues are caught and prevented ahead of time. Let's say an AI system goes over patients' medical records and current vital measurements to anticipate sepsis. Doing so means treatment for the life-threatening condition can begin sooner, thus lowering

From Charts to Chips: How Artificial Intelligence is Healing Healthcare

risks and costs to the health system (Churpek et al., 2016). Likewise, technologies that help with medicine and team care cut down on the number of repeat hospital admissions seen in patients with heart failure and diabetes (Saria et al., 2018).

Lastly, AI promotes patient empowerment through personalized care. Traditional ways of treating patients with medicine tend to rely on general data for everyone which may not give the desired outcome. AI can help make medical treatments and decisions more customized by checking genetic, behavioral and environmental details about each patient. It is now possible to use AI to pair patients with therapies that really target their tumors and this has resulted in better outcomes and less negative side effects (Kourou et al., 2015). Apart from this, AI-assisted health apps and virtual assistants let patients easily review their health problems, treatment schedules and ways to improve their lifestyle. It encourages patients to participate more in their treatment, stick to their therapy and feel satisfied with their care which is needed for good health over time.



To review, AI has positive impacts on clinical matters, how the business runs, its budget and patient experiences. Since AI enhances accuracy, addresses inefficiencies, cuts expenses and keeps the patient at the center, it is more than technology—it leads to big improvements in healthcare.

Table IV:

Benefit	Description	Evidence/Metric
Accuracy	More precise diagnoses	94% accuracy in some imaging AI
Efficiency	Reduced paperwork, faster workflows	30% less time on documentation
Cost Reduction	Lowered readmission and error rates	Estimated \$100B savings globally

Personalization	Tailored treatment plans	Improved patient satisfaction scores
-----------------	--------------------------	--------------------------------------

V. CHALLENGES AND ETHICAL CONSIDERATIONS

Even though artificial intelligence is set to transform healthcare, many challenges and ethical matters come with it. Healthcare AI systems must handle security and fairness in algorithms so patients are not endangered and current imbalances are not increased.

A lot of people are most worried about keeping their data private and secure. The effective use of AI requires a lot of data on health which may contain private medical information. Because computers are involved, the danger that someone might break into your private details is getting stronger. Information collected from different places such as wearables and EHRs, exposes healthcare records to the chance of being stolen or illegally accessed by others (Jiang et al., 2017). Steps to protect data such as new methods of disguising it and better storage systems, are being taken, though people could still be identified or their data abused. Good data management, sticking to privacy laws like HIPAA and GDPR and strong encryption practices matter a lot in healthcare (Shen et al., 2021).

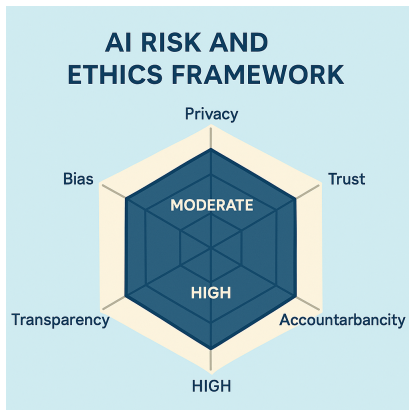
Racial and gender biases in AI algorithms might bring about unequal outcomes. Empirical information in healthcare helps AI systems and that data may consist of bias and inequity. If an algorithm is made using one type of data, it might work less effectively with other populations. Therefore, there is a chance that people from minority or minority groups may receive incorrect diagnoses, be suggested different medical approaches based on being a woman, man or belong to an ethnic group or miss out on the care they qualify for (Obermeyer et al., 2019). Algorithms such as this can influence healthcare in a negative way and support unequal treatment in society. It is important for developers to collect information in an inclusive manner to prevent bias and to always check that the models treat everyone equally.

Transparency, simply explaining why things happen and feeling trust in AI are very much related to these other issues. Most advanced AI models built on deep learning, tend to predict things that are difficult to explain. Because AI's reasoning is often unclear, people may find it difficult to fully trust or depend on it in a medical setting (Ribeiro et al., 2016). Using Explainable AI (XAI) which

From Charts to Chips: How Artificial Intelligence is Healing Healthcare

provides simpler explanations, makes it easier for clinicians to believe in and deal with the model's outcomes. Being open about decisions is important morally; clinicians and patients should understand the reasons for critical therapies.

Legal and regulatory rules introduce many barriers to healthcare. The FDA and other agencies in the U.S. are gradually developing regulations to approve AI medical devices, yet because new technology moves fast, those regulations are usually behind (Topol, 2019). There are major questions about responsibilities once AI is launched, ensuring mistakes are avoided and dealing with the results if things go wrong. Working together is very important for policymakers, leaders in healthcare and those working in the field.



Physician hesitation and problems with training are also important issues. Even though AI helps doctors by handling certain tasks, its effects depend on how much they can trust and work with the technology. A small number of healthcare workers are concerned that using AI could result in job loss, less independence or make their jobs more computer-reliant. Courses teaching about AI, working with data or ethical issues are often absent in training for medical workers (Mesko et al., 2018). The problem needs to be addressed by introducing AI rules into the curriculum of medical and continuing education. When clinicians have a good understanding of AI tools, they will trust them, decide to use them and take advantage of all their benefits.

Generally, AI looks promising for healthcare, though getting it implemented can be difficult. Responsible AI in medicine relies on dealing with ethics, making sure everyone can use it, keeping patient data safe and offering suitable training for caregivers.

Table V:

Challenge	Description	Potential Mitigation Strategy
Data Privacy	Patient data breaches, misuse	Encryption, secure access
Algorithmic Bias	Biased outputs based on skewed data	Diverse training datasets
Explainability	“Black box” decision-making	Use of explainable AI (XAI)
Regulation	Unclear legal frameworks	Adaptive regulatory policies
Physician Acceptance	Fear of AI replacing roles	Training and collaboration

VI. CASE STUDIES AND REAL-WORLD IMPLEMENTATIONS

More and more, leading hospitals globally are turning the theory of AI in healthcare into practical use. They illustrate what AI can do well and the obstacles faced as well as the lessons gathered in practice. Analyzing them reveals how AI should be applied in multiple healthcare settings.

An important example is the Mayo Clinic which is known for its use of AI to boost diagnostic quality and patient management. Mayo Clinic is using AI technology such as machine learning, to identify early signs of heart conditions by studying electronic cardiograms and patients' histories (Johnson et al., 2018). The team, together with AI vendors, produces tools that predict heart failure exacerbations which helps clinicians spot affected patients before the condition becomes severe to provide timely care and manage admissions. The changes these processes introduced can be clearly seen in improved medical results and better operations which confirms that AI complements, rather than supersedes, human skills in healthcare.

IBM Watson Health is important because it has played a key role in developing AI for oncology, genomics and help with healthcare decisions. Using natural language processing, Watson examines a lot of medical data and patient information, giving oncologists unique suggestions supported by updated research and each individual's characteristics (Jiang et al., 2017). Though Watson Health has faced accusations about

From Charts to Chips: How Artificial Intelligence is Healing Healthcare

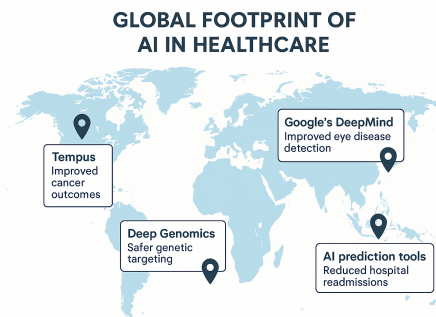
underfulfilling its promises, it is still an important achievement in AI medicine and has helped advance more useful AI for the clinic (Topol, 2019). Based on Watson's success, it is clear that aligning AI technology with practical clinical procedures and frequently revising algorithms according to everyday results is very important.

The National Health Service (NHS) AI Labs focus on overcoming healthcare problems with the help of AI. Thanks to NHS AI Labs, AI makes it possible to diagnose more accurately, streamlines tasks for doctors in the office and helps those who are ill take better care of themselves (NHS AI Lab, 2023). AI helped discover cases of diabetic retinopathy in retinal scans faster than human doctors did. Because of the program, earlier diagnosis was possible for many and people requiring a specialist were referred more promptly (NHS Digital, 2022). By looking at these cases, we can see that AI can greatly improve health care.

AI is used in more rural areas because healthcare and knowledge about it aren't as easy to find. Artificial intelligence is used in some African countries and South Asia through apps and remote means to handle matters related to infections, nutrition and women's health (Rajpurkar et al., 2022). Most people can use smartphones thanks to their cameras, sensors and machine learning which work with hardware that uses very little battery power. Even if internet is slow and data is scarce, these provide useful evidence that AI helps offer healthcare to more patients, equalize the situation and support those who are on the job.

These ideas can be found in all of these different locations. It takes the effort of technology providers, clinicians and administration to ensure that using AI is uncomplicated when taking care of patients. Often review and update your policies and clarify for patients and doctors what AI contributes to medical decisions. If data privacy and equity are main parts of the strategy, it will last and win people's trust.

As cited by both Mayo Clinic and NHS, AI makes a big difference in medicine and also comes across different hurdles. To improve in the future, they use team efforts, handle obstacles and put their patients first.



VII. THE FUTURE OF AI-DRIVEN HEALTHCARE

AI will probably bring more changes and updates to healthcare in the future compared to the effects we see now. Healthcare managers now depend on artificial intelligence to help with faster patient monitoring and to perform virtual training for doctors and nurses.

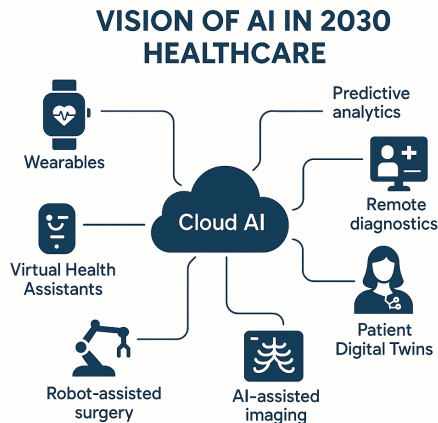
Nowadays, smartwatches and biosensors are getting more sophisticated to record a person's heart rate, blood glucose levels, oxygen saturation in the body and electrocardiograms (Piwiek et al., 2016). If they're linked to AI programs, they can observe subtle differences that might suggest a health issue or emergency which leads to prompt notifications for both the user and doctor. Receiving health recommendations based on continuous data improves both preventive care and the management of diseases that persist, so healthcare is overall improved (Shah & Milstein, 2021).

Healthcare now uses digital twins as a cutting-edge development. Lots of data about a patient, from their genetic makeup to behavior habits, are used to create a digital twin which can simulate alternative responses to multiple expected treatments (Bruynseels et al., 2018). Clinicians may utilize AI-aided technology to rehearse treatments on digital simulations which helps them fine-tune their methods and avoid too many side effects. Making digital twins is one of the ways medicine is now able to help patients differently based on what they need. AI is likely to contribute more to healthcare by combining with doctors' expertise, to assist in decision-making but not to devalue the doctor's role. AI is able to process a lot of specific data, enhancing what doctors and nurses already know. Using AI this way encourages clinicians to be more responsible, makes treatment humane by having AI and people work as a team and also builds trust (Jiang et al., 2017). Rather than feel threatened, medical staff can use AI to treat patients with more care, comfort and time savings.

By the future, healthcare will rely on AI, mainly focusing on patients' experiences and the outcomes they achieve.

From Charts to Chips: How Artificial Intelligence is Healing Healthcare

All this information from wearables, electronic health records, genomics and sensors will be shared on equal, accessible platforms among care providers and their patients. Because of connectivity, individuals can be part of decision-making, constantly see important health news and use adaptable plans that handle any new changes in health. Such virtual health assistants guide patients in handling their health by connecting doctor meetings to advice on new habits and medication, as well as supporting mental health (Topol, 2019).



By having such an ecosystem, it would be possible to monitor population health by analyzing confidential data and noticing new health concerns, waste reductions and programs that are tailored for local communities. If AI technology is more understandable, ethical and transparent, each individual could get better healthcare, health inequality would decline and the health of many would improve.

In essence, AI in healthcare aims to help human healthcare professionals improve and extend what they do. The future of healthcare will look after each person's needs and try to prevent health issues with the help of AI, digital twins and data.

Table VI:

Future Trend	Description	Expected Benefit
Wearable AI Devices	Real-time monitoring and alerts	Continuous care, early detection
AI-Patient Interaction	Virtual assistants and chatbots	Better access and engagement
Digital Twins	Virtual replicas for simulation and planning	Personalized treatment modeling

Federated Learning	Data sharing without privacy compromise	Broader AI training, better privacy
--------------------	---	-------------------------------------

VIII. CONCLUSION

Healthcare now relies on AI for advanced data analysis instead of the traditional manual processes. Switching to digital processes in AI has improved how doctors diagnose patients, help them with personalized care and made clinics work better. Healthcare providers now give more efficient and focused care since AI technology assists with predictive analytics, medical imaging, clinical support and automation. They underline the fact that AI is an important partner that makes life easier for doctors and extends healthcare options.

While advancing with tech, healthcare must consider what is most ethical and what benefits patients the most. Attending to privacy, removing algorithmic bias, ensuring fairness and keeping processes open is the first step to responsible AI. AI will support patients only if we keep focusing on challenges, make sure all doctors are involved and join efforts among the members of the AI community. If everyone, both patients and healthcare professionals, believe that AI is truly ethical, many more will use it.

If we are active and dedicated, we can improve our healthcare system to be smarter, safer and kinder. The current trend in healthcare is to use technology, personal methods and teamwork, all of which should improve how healthy people and groups become. The purpose, once more, is to let doctors concentrate on caring, making good decisions and practicing medicine, because AI handles the bulk of data and time-consuming tasks.

Reaching this goal requires technology, medical care, policies at the national level and the way doctors interact with patients to cooperate closely. Using AI wisely will contribute to healthcare being more efficient, fair and caring—advancing new ideas and ethical rules that work for people worldwide.

REFERENCES

1. Abramoff, M. D., Lavin, P. T., Birch, M., Shah, N., & Folk, J. C. (2018). Pivotal trial of an autonomous AI-based diagnostic system for detection of diabetic retinopathy in primary care offices. *NPJ Digital Medicine*, 1(1), 1–8. <https://doi.org/10.1038/s41746-018-0040-6>
2. Adler-Milstein, J., & Jha, A. K. (2017). HITECH Act drove large gains in hospital electronic health record adoption. *Health*

From Charts to Chips: How Artificial Intelligence is Healing Healthcare

- Affairs*, 36(8), 1416–1422.
<https://doi.org/10.1377/hlthaff.2016.1651>
3. Blumenthal, D., & Tavenner, M. (2010). The "meaningful use" regulation for electronic health records. *New England Journal of Medicine*, 363(6), 501–504.
<https://doi.org/10.1056/NEJMp1006114>
 4. Bruynseels, K., Santoni de Sio, F., & van den Hoven, J. (2018). Digital twins in health care: Ethical implications of an emerging engineering paradigm. *Frontiers in Genetics*, 9, 31.
<https://doi.org/10.3389/fgene.2018.00031>
 5. Churpek, M. M., Yuen, T. C., Winslow, C., Meltzer, D. O., & Edelson, D. P. (2016). Multicenter development and validation of a risk stratification tool for ward patients. *American Journal of Respiratory and Critical Care Medicine*, 190(6), 649–655.
<https://doi.org/10.1164/rccm.201406-1022OC>
 6. Downing, N. L., Bates, D. W., & Longhurst, C. A. (2018). Physician burnout in the electronic health record era: Are we ignoring the real cause? *Annals of Internal Medicine*, 169(1), 50–51.
<https://doi.org/10.7326/M18-0139>
 7. Esteva, A., Robicquet, A., Ramsundar, B., Kuleshov, V., DePristo, M., Chou, K., ... & Dean, J. (2019). A guide to deep learning in healthcare. *Nature Medicine*, 25(1), 24–29.
<https://doi.org/10.1038/s41591-018-0316-z>
 8. Jiang, F., Jiang, Y., Zhi, H., Dong, Y., Li, H., Ma, S., ... & Wang, Y. (2017). Artificial intelligence in healthcare: Past, present and future. *Stroke and Vascular Neurology*, 2(4), 230–243.
<https://doi.org/10.1136/svn-2017-000101>
 9. Johnson, K. W., Torres Soto, J., Glicksberg, B. S., Shameer, K., Miotto, R., Ali, M., ... & Dudley, J. T. (2018). Artificial intelligence in cardiology. *Journal of the American College of Cardiology*, 71(23), 2668–2679.
<https://doi.org/10.1016/j.jacc.2018.03.521>
 10. Komura, D., & Ishikawa, S. (2018). Machine learning methods for histopathological image analysis. *Computational and Structural Biotechnology Journal*, 16, 34–42.
<https://doi.org/10.1016/j.csbj.2018.01.001>
 11. Kourou, K., Exarchos, T. P., Exarchos, K. P., Karamouzis, M. V., & Fotiadis, D. I. (2015). Machine learning applications in cancer prognosis and prediction. *Computational and Structural Biotechnology Journal*, 13, 8–17.
<https://doi.org/10.1016/j.csbj.2014.11.005>
 12. Litjens, G., Kooi, T., Bejnordi, B. E., Setio, A. A. A., Ciompi, F., Ghafoorian, M., ... & Sánchez, C. I. (2017). A survey on deep learning in medical image analysis. *Medical Image Analysis*, 42, 60–88.
<https://doi.org/10.1016/j.media.2017.07.005>
 13. McKinney, S. M., Sieniek, M., Godbole, V., Godwin, J., Antropova, N., Ashraffian, H., ... & Suleyman, M. (2020). International evaluation of an AI system for breast cancer screening. *Nature*, 577(7788), 89–94.
<https://doi.org/10.1038/s41586-019-1799-6>
 14. Mesko, B., Hetényi, G., & Györfy, Z. (2018). Will artificial intelligence solve the human resource crisis in healthcare? *BMC Health Services Research*, 18, 545.
<https://doi.org/10.1186/s12913-018-3359-4>
 15. NHS AI Lab. (2023). NHS AI Lab: Driving innovation in healthcare AI. Retrieved from <https://www.nhs.uk/ai-lab>
 16. NHS Digital. (2022). Diabetic retinopathy screening programme: Use of AI in early detection. Retrieved from <https://digital.nhs.uk/diabetic-retinopathy-screening>
 17. Obermeyer, Z., Powers, B., Vogeli, C., & Mullainathan, S. (2019). Dissecting racial bias in an algorithm used to manage the health of populations. *Science*, 366(6464), 447–453.
<https://doi.org/10.1126/science.aax2342>
 18. Piwek, L., Ellis, D. A., Andrews, S., & Joinson, A. (2016). The rise of consumer health wearables: Promises and barriers. *PLOS Medicine*, 13(2), e1001953.
<https://doi.org/10.1371/journal.pmed.1001953>
 19. Rajpurkar, P., Hannun, A. Y., Haghpanahi, M., Bourn, C., & Ng, A. Y. (2022). AI in global health: Opportunities and challenges. *Nature Medicine*, 28(2), 230–237.
<https://doi.org/10.1038/s41591-022-01777-3>
 20. Ribeiro, M. T., Singh, S., & Guestrin, C. (2016). "Why should I trust you?": Explaining the predictions of any classifier. *Proceedings of the 22nd ACM SIGKDD International Conference on Knowledge Discovery and Data Mining*, 1135–1144.
<https://doi.org/10.1145/2939672.2939778>

From Charts to Chips: How Artificial Intelligence is Healing Healthcare

21. Saria, S., Butte, A., & Sheikh, A. (2018). Better medicine through machine learning: What's real, and what's artificial? *PLOS Medicine*, *15*(12), e1002721. <https://doi.org/10.1371/journal.pmed.1002721>
22. Sendak, M. P., D'Arcy, J., Kashyap, S., Gao, M., Nichols, M., Corey, K., ... & Balu, S. (2020). A path for translation of machine learning products into healthcare delivery. *EMJ Innovations*, *4*(1), 44–49.
23. Shanafelt, T. D., Dyrbye, L. N., Sinsky, C., Hasan, O., Satele, D., Sloan, J., & West, C. P. (2016). Relationship between clerical burden and characteristics of the electronic environment with physician burnout and professional satisfaction. *Mayo Clinic Proceedings*, *91*(7), 836–848. <https://doi.org/10.1016/j.mayocp.2016.05.007>
24. Shanafelt, T. D., & Noseworthy, J. H. (2017). Executive leadership and physician well-being: Nine organizational strategies to promote engagement and reduce burnout. *Mayo Clinic Proceedings*, *92*(1), 129–146. <https://doi.org/10.1016/j.mayocp.2016.10.004>
25. Shah, N., & Milstein, A. (2021). Wearable technology and AI: Transforming chronic disease management. *Journal of Medical Internet Research*, *23*(3), e24300. <https://doi.org/10.2196/24300>
26. Shen, J., Zhang, C. J. P., Jiang, B., Chen, J., Song, J., Liu, Z., ... & Fang, P. (2021). Artificial intelligence versus clinicians in disease diagnosis: Systematic review. *JMIR Medical Informatics*, *9*(3), e23827. <https://doi.org/10.2196/23827>
27. Shortliffe, E. H., & Cimino, J. J. (Eds.). (2014). *Biomedical informatics: Computer applications in health care and biomedicine* (4th ed.). Springer. <https://doi.org/10.1007/978-1-4471-4474-8>
28. Sutton, R. T., Pincock, D., Baumgart, D. C., Sadowski, D. C., Fedorak, R. N., & Kroeker, K. I. (2020). An overview of clinical decision support systems: Benefits, risks, and strategies for success. *NPJ Digital Medicine*, *3*(1), 1–10. <https://doi.org/10.1038/s41746-020-0221-y>
29. Topol, E. (2019). *Deep Medicine: How Artificial Intelligence Can Make Healthcare Human Again*. Basic Books.
30. Vamathevan, J., Clark, D., Czdrowski, P., Dunham, I., Ferran, E., Lee, G., ... & Bender, A. (2019). Applications of machine learning in drug discovery and development. *Nature Reviews Drug Discovery*, *18*(6), 463–477. <https://doi.org/10.1038/s41573-019-0024-5>
31. Wu, S., Roberts, K., Datta, S., Du, J., Ji, Z., Si, Y., ... & Xu, H. (2020). Deep learning in clinical natural language processing: A methodical review. *Journal of the American Medical Informatics Association*, *27*(3), 457–470. <https://doi.org/10.1093/jamia/ocz200>