



AI-POWERED RADIOLOGY: INNOVATIONS AND CHALLENGES IN MEDICAL IMAGING

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Abstract

Artificial intelligence (AI) is revolutionizing radiology by enhancing diagnostic accuracy, optimizing workflows, and enabling personalized medicine. This review explores the evolution of AI in medical imaging, from early rule-based systems to contemporary deep learning applications, while examining both ground-breaking innovations and persistent challenges. Key advancements include AI's superior performance in detecting tumours, fractures, and hemorrhages; workflow improvements through automated segmentation and prioritized case triage; and cutting-edge techniques like low-dose imaging reconstruction and radio genomics. However, significant barriers remain, including data quality issues, "black box" algorithm limitations, clinical adoption resistance, and ethical concerns regarding bias and privacy. The future of AI in radiology points toward explainable AI (XAI) for transparent decision-making, federated learning for privacy-preserving collaboration, and integration with emerging technologies like augmented reality. Successful implementation will require addressing technical, regulatory, and socioeconomic challenges while maintaining human oversight. As AI continues to transform medical imaging, its ultimate measure of success will be its ability to improve patient outcomes across diverse healthcare settings while upholding the highest standards of safety, equity, and clinical relevance.

Keywords: Artificial Intelligence, Radiology, Deep Learning, Medical Imaging, Explainable AI

I. INTRODUCTION

The integration of artificial intelligence (AI) into radiology represents one of the most transformative advancements in modern medicine. Over the past decade, AI particularly machine learning (ML) and deep learning (DL)—has evolved from a theoretical concept to a practical tool reshaping how medical imaging is acquired, interpreted, and utilized in clinical decision-making. Radiology, as a cornerstone of diagnostics, has long relied on the expertise of trained professionals to analyse complex images, from X-rays and ultrasounds to MRIs and CT scans. However, the increasing volume of imaging studies, coupled with the demand for faster and more precise diagnoses, has exposed limitations in traditional radiological workflows. Enter AI: a disruptive force capable of enhancing accuracy, streamlining processes, and unlocking new possibilities in personalized medicine. The rise of AI-powered radiology is not merely an incremental improvement but a paradigm shift, redefining the roles of radiologists, improving patient outcomes, and presenting both unprecedented opportunities and formidable challenges.

Medical imaging is indispensable in modern healthcare, serving as the eyes of medicine by enabling non-invasive visualization of internal structures and pathologies. From detecting early-stage cancers to guiding life-saving interventions, imaging technologies have revolutionized diagnostics and treatment planning [1]. However, the growing complexity and volume of imaging data exacerbated by aging populations and the increasing prevalence of chronic diseases have strained radiology departments worldwide [2]. Radiologists face mounting workloads, leading to potential burnout and diagnostic errors. Moreover,



variability in interpretation among clinicians can impact patient care, particularly in time-sensitive conditions such as strokes or pulmonary embolisms. These challenges underscore the need for innovative solutions that augment rather than replace human expertise. AI, with its ability to process vast datasets, recognize patterns, and learn from experience, emerges as a powerful ally in addressing these pain points [3].

The primary objective of this review is to explore the multifaceted role of AI in radiology, examining its ground-breaking innovations, persistent challenges, and future trajectory. First, we will delve into how AI enhances diagnostic precision, from detecting subtle abnormalities in mammograms to quantifying tumour growth in oncology [4]. Next, we will analyse AI's impact on radiology workflows, including automated image analysis, triage systems that prioritize critical cases and AI-assisted reporting tools that reduce administrative burdens. Beyond efficiency, AI is also paving the way for advanced imaging techniques, such as generative adversarial networks (GANs) that enhance low-resolution scans or predict disease progression through longitudinal data analysis. However, the adoption of AI in radiology is not without hurdles [5]. Technical limitations, such as the "black box" nature of some algorithms and the need for large, diverse datasets, raise concerns about reliability and bias. Clinically, the integration of AI into routine practice faces resistance due to regulatory uncertainties, liability issues, and the need for robust validation [6]. Ethical dilemmas, including patient privacy and the potential for over-reliance on AI, further complicate its widespread implementation.

Looking ahead, the future of AI in radiology lies in striking a balance between innovation and responsibility. Explainable AI (XAI), which provides transparent decision-making processes, could bridge the trust gap between clinicians and algorithms [7]. Federated learning, a decentralized approach to training AI models, promises to improve generalizability while safeguarding patient data. Additionally, the convergence of AI with other emerging technologies—such as augmented reality for surgical planning or block chain for secure data sharing—could unlock new frontiers in precision medicine [8]. Ultimately, the success of AI-powered radiology hinges on collaboration among radiologists, data scientists, policymakers, and industry stakeholders to ensure that these tools are equitable, ethical, and aligned with patient needs [9].

This review aims to provide a comprehensive yet critical perspective on AI's role in radiology, highlighting its potential to revolutionize medical imaging while acknowledging the challenges that must be navigated. By examining current advancements and anticipating future trends, we hope to contribute to a nuanced understanding of how AI can be harnessed to improve diagnostic accuracy, operational efficiency, and, most importantly, patient care. As we stand at the intersection of technology and medicine, the question is no longer, whether AI will transform radiology, but how we can steer this transformation to benefit all stakeholders in the healthcare ecosystem.

II. THE EVOLUTION OF AI IN RADIOLOGY

The journey of artificial intelligence (AI) in radiology has been one of remarkable progression, evolving from rudimentary rule-based systems to sophisticated deep learning algorithms capable of transforming medical imaging [10]. The earliest applications of AI in radiology date back to the 1960s and 1970s, when computer-aided diagnosis (CAD) systems relied on predefined rules and statistical models to detect abnormalities in X-rays and mammograms. These early systems were limited by their reliance on handcrafted features and lacked the adaptability to handle the complexity and variability of real-world medical images [11]. Despite these constraints, they laid the groundwork for future innovations by demonstrating the potential of computational tools to assist radiologists in detecting diseases such as breast cancer and lung nodules.

The field took a significant leap forward in the 2000s with the advent of machine learning (ML), which introduced algorithms capable of learning from data rather than depending solely on explicit programming. Support vector machines (SVMs) and random forests enabled more accurate classification of imaging findings, but their performance was still constrained by the need for manual feature extraction [12]. The true revolution came with the rise of deep learning (DL) in the 2010s, fuelled by advances in neural networks, increased computational power, and the availability of large annotated datasets. Convolutional neural



networks (CNNs), in particular, proved exceptionally adept at analysing medical images, automatically learning hierarchical features from pixel-level data to identify patterns imperceptible to the human eye. This breakthrough marked a turning point, enabling AI systems to achieve and in some cases surpass—human-level performance in tasks such as detecting diabetic retinopathy in fundus images or identifying intracranial hemorrhages on CT scans [13].

Key milestones in AI-powered radiology highlight the rapid acceleration of this technology from research labs to clinical practice. In 2016, the U.S. Food and Drug Administration (FDA) cleared the first AI-based CAD system for detecting wrist fractures in X-rays, signalling regulatory acceptance of AI in radiology [14]. Since then, the number of FDA-approved AI tools has grown exponentially, encompassing applications across diverse imaging modalities and clinical scenarios. Notable examples include IDx-DR, the first autonomous AI system for diagnosing diabetic retinopathy, and Aidoc, which flags acute abnormalities such as pulmonary embolisms and cervical spine fractures in CT scans [15]. These tools have demonstrated not only diagnostic accuracy but also the ability to improve workflow efficiency by prioritizing urgent cases and reducing radiologists' workload. Beyond diagnostics, AI has expanded into image reconstruction, with algorithms like GE Healthcare's AIR Recon DL enhancing MRI quality while shortening scan times, and into predictive analytics, where AI models forecast disease progression or treatment response based on imaging biomarkers [16].

A defining trend in the evolution of AI in radiology is the shift from assistive to autonomous systems [17]. Early CAD tools served as "second readers," requiring radiologist oversight to confirm or reject AI-generated findings. While this approach reduced false negatives, it also introduced inefficiencies, as radiologists had to review every AI suggestion regardless of confidence level [18]. The latest generation of AI systems, however, is increasingly designed to operate autonomously in well-defined contexts. For instance, some AI triage tools automatically flag critical findings like large-vessel occlusions in stroke patients, enabling faster treatment without waiting for radiologist interpretation [19]. This autonomy raises important questions about the changing role of radiologists, who are transitioning from primary interpreters to supervisors of AI outputs, focusing on complex cases and integrating AI insights into comprehensive patient care.

Yet, this evolution has not been without challenges. The transition from rule-based to deep learning systems has introduced new complexities, such as the "black box" problem, where even developers cannot fully explain how an AI model arrives at its conclusions [20]. Additionally, the reliance on large, high-quality datasets for training has exposed biases in AI performance, particularly when algorithms are applied to populations underrepresented in training data. Despite these hurdles, the trajectory of AI in radiology points toward increasingly seamless integration into clinical workflows, with future systems likely to combine diagnostic, prognostic, and therapeutic capabilities [21]. As AI continues to evolve, its history in radiology serves as a testament to the transformative power of technology in medicine a journey from simple automation to intelligent partnership between human and machine.

III. INNOVATIONS IN AI-POWERED RADIOLOGY

A. Enhanced Diagnostic Accuracy

AI has significantly improved diagnostic precision in radiology, outperforming human experts in detecting various pathologies, including tumours, fractures, and hemorrhages. Deep learning algorithms, particularly convolutional neural networks (CNNs), excel at identifying subtle abnormalities in medical images that may be overlooked in manual reviews.

A landmark example is AI's success in mammography. In 2020, a study published in *Nature* demonstrated that an AI system developed by Google Health reduced false positives by 5.7% and false negatives by 9.4% compared to radiologists in breast cancer screening [22]. Similarly, AI models have shown remarkable accuracy in detecting lung nodules in CT scans, intracranial hemorrhages in head CTs, and fractures in X-rays. For instance, Aidoc's AI algorithm for triaging critical findings in emergency radiology has been shown to reduce time-to-diagnosis for life-threatening conditions like pulmonary embolisms and strokes.



These advancements highlight AI's potential to serve as a reliable second reader, minimizing diagnostic errors and improving early disease detection particularly in high-volume settings where radiologist fatigue can impact accuracy.

B. Workflow Optimization

Beyond diagnostics, AI is transforming radiology workflows by automating repetitive tasks, prioritizing urgent cases, and streamlining reporting.

C. Automated Image Segmentation

AI-powered segmentation tools, such as those used in brain MRI or lung CTs, can rapidly delineate anatomical structures and pathological regions. For example, U-Net architectures enable precise tumour volumetric in oncology, reducing the time radiologists spend on manual measurements [23].

D. Prioritization of Urgent Cases

AI triage systems analyse incoming imaging studies and flag critical findings (e.g., large-vessel occlusions in stroke patients) for immediate review. Hospitals using AI-driven prioritization, such as Viz.ai, have reported faster treatment initiation and improved patient outcomes [24].

E. AI-Driven Reporting & NLP

Natural language processing (NLP) models, like Open-AI's GPT-4 or specialized radiology report generators, convert structured imaging findings into coherent clinical reports. These tools reduce radiologists' administrative burden and minimize transcription errors [25].

F. Advanced Imaging Techniques

AI is pushing the boundaries of medical imaging by enhancing image quality, reducing scan times, and enabling novel diagnostic approaches.

Functional MRI (fMRI) benefits from AI in mapping brain activity and detecting early neurodegenerative changes. Similarly, AI improves PET-CT fusion by enhancing tumour metabolic activity visualization, aiding in cancer staging and treatment monitoring [26].

Deep learning models, such as those used in Siemens' *Deep Resolve*, enable high-quality imaging at reduced radiation doses. These algorithms reconstruct diagnostically viable images from low-dose CT or MRI scans, minimizing patient exposure without sacrificing clarity [27].

Generative adversarial networks (GANs) and diffusion models are revolutionizing image reconstruction. For example, GE Healthcare's *AIR Recon DL* uses AI to reduce MRI scan times by up to 50% while maintaining diagnostic quality.

G. Personalized Medicine

AI is enabling precision radiology by tailoring diagnostics and treatment strategies to individual patients.

AI models analyse imaging biomarkers to predict tumour aggressiveness and treatment response. For instance, IBM Watson's AI tools assess lung cancer progression risks based on CT radionics, helping oncologists personalize therapy plans [28]. Radio genomics explores correlations between imaging features and genetic mutations. AI-driven platforms, like those used in The Cancer Imaging Archive (TCIA), link MRI or CT patterns with genomic data, offering non-invasive insights into tumour biology. This approach is particularly impactful in glioblastoma and breast cancer research [29].

AI-powered radiology is reshaping diagnostics, workflow efficiency, imaging technology, and personalized medicine. From enhancing diagnostic accuracy to enabling faster, safer scans, these innovations promise to elevate patient care while addressing healthcare's growing demands. However, challenges like algorithm transparency and real-world validation remain critical areas for future development. As AI continues to evolve, its integration into radiology will further solidify its role as an indispensable tool in modern medicine.

IV. CHALLENGES & LIMITATIONS

Despite its transformative potential, AI-powered radiology faces significant technical barriers that hinder widespread implementation. One major challenge lies in data quality and availability—AI algorithms



require vast amounts of high quality, annotated medical images for training, yet such datasets are often fragmented across institutions, inconsistent in quality, or limited for rare conditions. Additionally, interoperability issues persist, as many AI tools struggle to integrate seamlessly with existing Picture Archiving and Communication Systems (PACS) and electronic health records (EHRs). Perhaps most concerning is the "black box" nature of many deep learning models, where even developers cannot fully explain how inputs are transformed into diagnostic outputs. This lack of transparency raises concerns about reliability, particularly when AI systems encounter edge cases or unfamiliar patient populations, potentially leading to misdiagnoses that are difficult to audit or correct.

The path to clinical adoption presents another layer of challenges, with radiologist scepticism remaining a key hurdle. Many clinicians question whether AI tools can truly match human expertise, especially in complex cases requiring contextual understanding and clinical judgment. Even when AI proves accurate, integrating it into existing workflows often disrupts established routines, requiring time-consuming adjustments that can temporarily decrease productivity rather than improve it. Liability concerns further complicate adoption—when an AI system makes an error, it remains unclear whether responsibility falls on the radiologist, hospital, or software developer. This legal ambiguity discourages healthcare systems from fully embracing AI, particularly in high-risk specialties like oncology or neuroradiology where diagnostic errors can have severe consequences.

Ethical and regulatory concerns add another dimension to the challenges facing AI in radiology. Studies have revealed that some AI models exhibit racial, gender, or socioeconomic biases, often because they were trained on datasets that underrepresented certain demographic groups. Such biases could exacerbate healthcare disparities if unaddressed. Patient privacy represents another critical issue, as AI systems typically require access to sensitive medical data, raising questions about data security and informed consent. Regulatory bodies like the FDA and EMA are still developing frameworks to evaluate AI-based medical devices, struggling to balance innovation with patient safety. The current approval processes, designed for static software, often prove inadequate for AI systems that continuously learn and evolve, potentially leading to regulatory gaps that could compromise patient care.

Finally, economic and infrastructure constraints limit AI's reach, particularly in low-resource settings. Implementing AI radiology tools requires substantial upfront investments in hardware, software, and IT support—costs that many hospitals, especially in developing countries, cannot afford. Even when institutions can purchase AI systems, ongoing expenses for maintenance, updates, and staff training create long-term financial burdens. Smaller clinics often lack the high-speed internet and advanced imaging equipment needed to support AI applications, widening the gap between well-resourced academic medical centres and community hospitals. These economic barriers threaten to create a two-tiered healthcare system where cutting-edge diagnostic tools are available only to privileged populations, potentially exacerbating global health inequities rather than alleviating them.

V. FUTURE DIRECTIONS

The future of AI in radiology lies in developing Explainable AI (XAI) systems that provide transparent, interpretable decision-making processes. While current deep learning models often function as "black boxes," XAI techniques—such as attention maps, saliency visualizations, and rule-extraction algorithms—will help radiologists understand how AI arrives at its conclusions, fostering trust and facilitating clinical adoption. This transparency is particularly crucial for high-stakes diagnoses, where clinicians must weigh AI recommendations against their own expertise. Additionally, federated learning is emerging as a solution to improve AI generalizability while addressing data privacy concerns. Instead of centralizing sensitive patient data, federated learning allows AI models to be trained across multiple institutions without sharing raw data, enhancing diversity in training datasets while maintaining compliance with regulations like HIPAA and GDPR. This approach could significantly reduce bias in AI systems while unlocking collaborative potential across global healthcare networks.



Looking ahead, the integration of AI with emerging technologies will further expand its clinical utility. Augmented reality (AR) and virtual reality (VR) systems, when combined with AI-powered imaging analysis, could revolutionize surgical planning by overlaying 3D tumour reconstructions or critical anatomical landmarks onto a surgeon's field of view in real time. Similarly, the convergence of AI with wearable devices and continuous monitoring tools may enable earlier detection of degenerative diseases through subtle imaging changes over time. Block chain technology could also play a role in securing patient data used for AI training while ensuring traceability and consent management. As these innovations mature, the focus must remain on human-AI collaboration—designing systems that augment radiologists' skills rather than replace them while addressing ethical, regulatory, and equity challenges to ensure benefits extend to all patient populations.

VI. CONCLUSION

The integration of artificial intelligence into radiology represents a paradigm shift in medical imaging, offering transformative potential to enhance diagnostic accuracy, streamline workflows, and personalize patient care. From its early roots in rule-based systems to today's sophisticated deep learning models, AI has demonstrated remarkable capabilities detecting tumours with superhuman precision, reducing scan times through advanced reconstruction, and predicting disease progression through radio genomics. These advancements are not merely incremental improvements but fundamental changes in how radiology is practiced, shifting the radiologist's role from manual interpreter to AI-augmented diagnostician. However, this evolution is not without challenges. Technical limitations, such as data interoperability and the "black box" problem, clinical adoption barriers, including radiologist scepticism and liability concerns, and ethical dilemmas surrounding bias and patient privacy must be carefully navigated to ensure AI's responsible implementation.

Looking ahead, the future of AI in radiology hinges on three key pillars: transparency, collaboration, and equitable access. Explainable AI (XAI) will be critical in building trust between clinicians and algorithms, while federated learning promises to improve model generalizability without compromising data privacy. The integration of AI with emerging technologies—such as augmented reality for surgical planning and block chain for secure data sharing—will further expand its clinical utility. Yet, as these innovations progress, the focus must remain on human-AI synergy, ensuring that AI serves as a tool to enhance rather than replace radiologist expertise. Moreover, addressing economic and infrastructural disparities will be essential to prevent AI from exacerbating healthcare inequalities. By fostering interdisciplinary collaboration among radiologists, engineers, policymakers, and ethicists, the medical community can steer AI toward its most impactful and equitable applications. Ultimately, AI-powered radiology is not technological advancement but about improving patient outcomes delivering faster, diagnoses that are more accurate and tailored treatments that benefit all populations worldwide. The journey has only just begun, and with thoughtful implementation, AI will undoubtedly redefine the future of medical imaging.

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