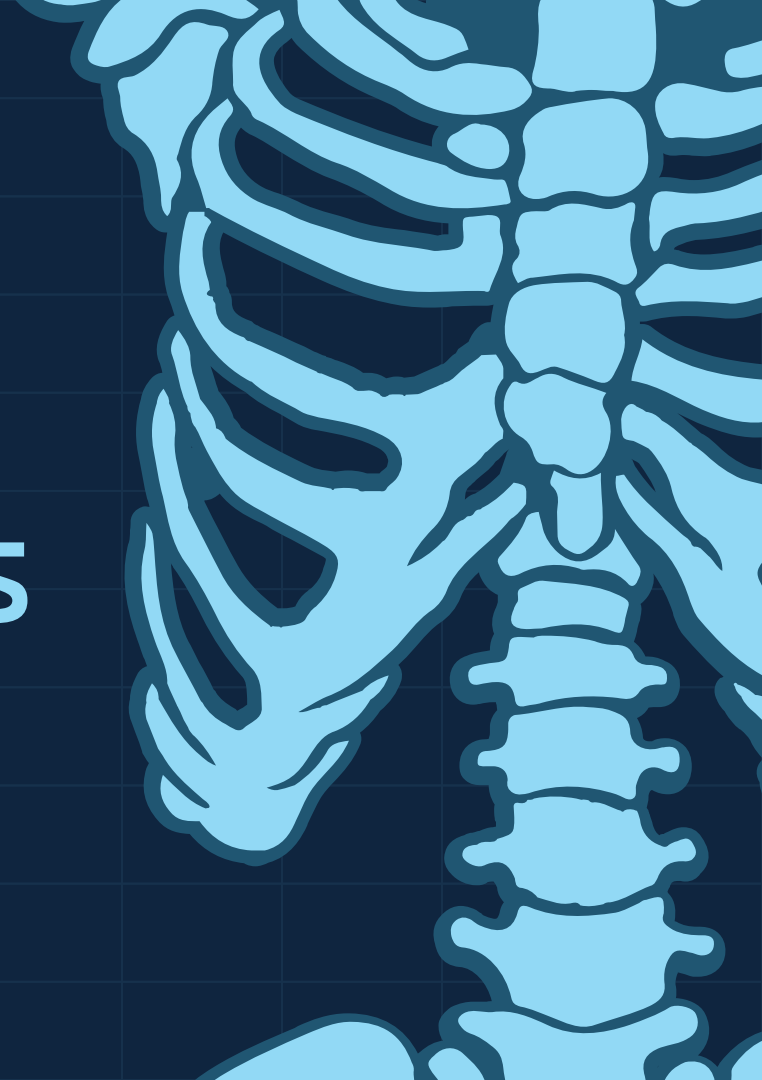
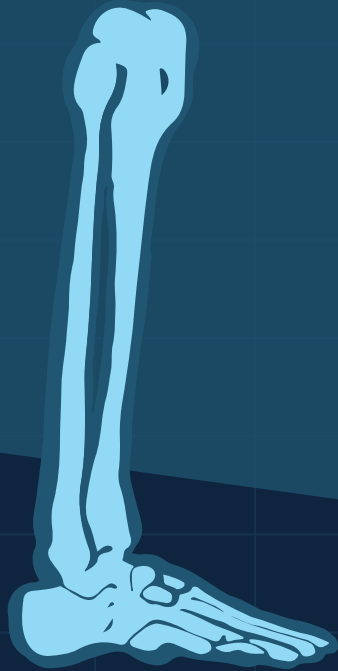


Detection of bone fractures

Applied machine learning project

10cm





Introduction

One of the most important problems in orthopedics is undiagnosed or misdiagnosed bone fractures. Our model predicts whether there is a fracture present in a x-ray photo, and provides a bounding box to locate the fracture. This could be used as a tool for surgeons to speed up the examination and to improve accuracy.

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We discuss the insights
we gained related to the
project

Preprocessing

Little work



Our dataset

The Bone Fracture Detection dataset already divided data in test/train/validate

The ratio was: 3631 train / 348 / 169 test

87,5% train / 8,4 val / 4,1% test



Preprocessing

Our model, YOLOv11, could use any type of image, regardless of their format



Augmentation

We augmented the data images to be flipped horizontally and vertically, rotated and darken or lighten the value within a range.

Our models

Baseline model

- Sliding-window CNN

Final model

- YOLOv11



Final model

YoloU11

- Developed by Ultralytics
- Computer vision tasks
- User friendly
- Oriented Bounding Box
- Confidence score



Final model

Hyperparameter tuning, regularization

- Built-in method
- Train and validate on different hyperparameters
- E.g. Initial learning rate and Weight decay
- 10 times for 50 epochs -> Time consuming

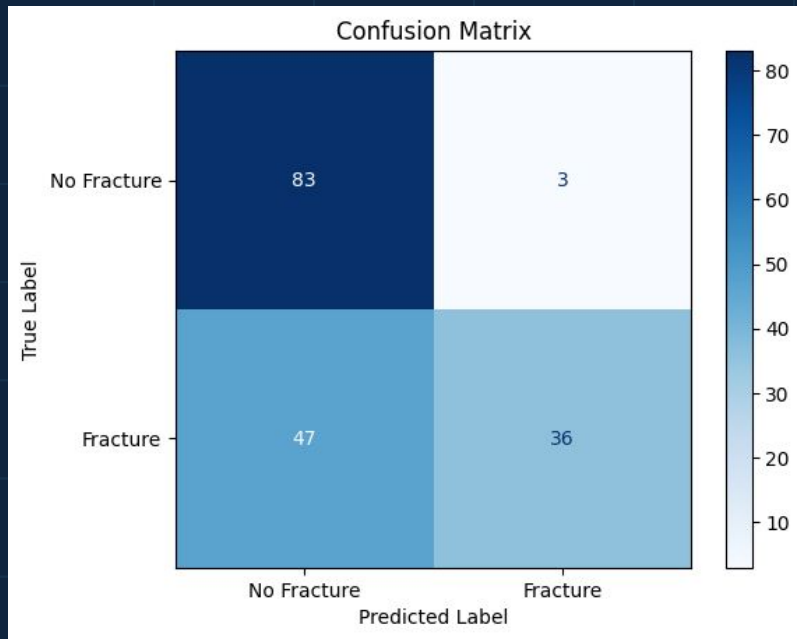
Performance

Metrics

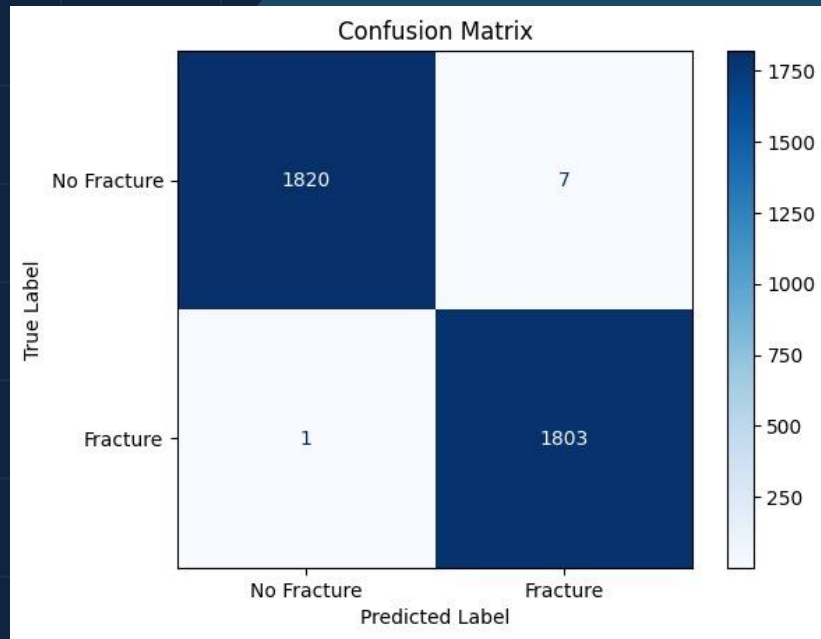
- IoU metric
- If selecting whole screen is better than bounding box prediction

Overfitting

Test data



Training data



Professionality



Readme

Clear instructions



Dependency
management

Installation

Expert feedback

To ensure that our model has novelty and can be professionally employed, we designed a questionnaire and asked orthopedic surgeons to evaluate our model



Their feedback



Evaluation of model

assessment

False positives/ false
negatives



Systematic errors

Obvious fractures are
detected, difficult/
subtle fractures not



Bounding box

Location and size
accurate



Reason for model misunderstandings

Bad/ not enough data
Low quality/ not
centered on place of
interest



Their feedback



Not helpful

Should be improved

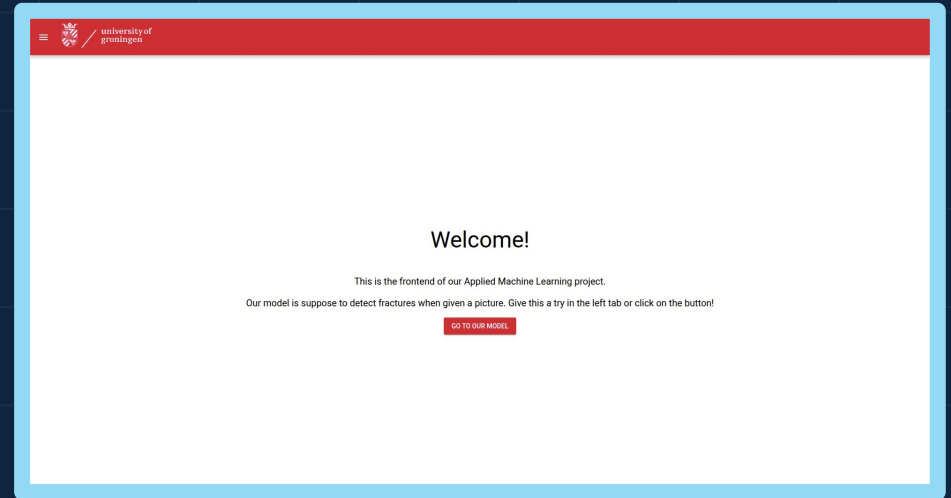


Screening tool

For young/
inexperienced doctors
(in ER)

front-end

To boost our grade, we created a front end for the model. This ensures that the model is user-friendly for doctors that aren't familiar with the back-end



Conclusion

Insights gained

1. Understanding the process of developing a ML model
2. Importance of experts
3. Relevance of such a tool

Future improvements

1. Data
2. Reduce overfitting