

Spark NLP for Healthcare Data Scientists

April 14-15, 2022

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Agenda

Day	Dur.	Topic	Host
Day-1	50 min	<ul style="list-style-type: none">- Intro to John Snow Labs and Spark NLP- Healthcare NLP in Spark NLP	Veysel
	50 min	<ul style="list-style-type: none">- Clinical Named Entity Recognition (<i>nb 1, 1.5 and 7</i>)	Veysel
	50 min	<ul style="list-style-type: none">- Clinical Assertion Status Model (<i>nb 2</i>)- Clinical Pretrained Pipelines (<i>nb 1, 1.5 and 7</i>)	Veysel
	50 min	<ul style="list-style-type: none">- Clinical Relation Extraction Model (<i>nb 10, 10.1, 10.2</i>)	Hasham
Day-2	50 min	<ul style="list-style-type: none">- Clinical Entity Resolution (<i>nb 3, 3.1, 13, 13.1</i>)	Veysel
	50 min	<ul style="list-style-type: none">- Clinical Entity Resolution (<i>nb 3, 3.1, 13, 13.1</i>)- Misc (<i>ADE, ChunkMerger, ChunkMapper, ChunkKeyPhraseExtractor, ChunkSentenceSplitter, Generic Clf, Gender Clf</i>) (<i>nb 8, 9, 18, 16, 21</i>)	Veysel
	50 min	<ul style="list-style-type: none">- De-Identification and Obfuscation of PHI (<i>nb 4</i>)	Hasham
	50 min	<ul style="list-style-type: none">- Spark OCR (<i>nb 5, 5.1, 5.2</i>)	Emre

Colab Notebooks

 Open in Colab

RUNNING CODE:

https://github.com/JohnSnowLabs/spark-nlp-workshop/blob/master/tutorials/Certification_Trainings/Healthcare

[How to set up Google Colab]

BOOKMARK:

<https://nlp.johnsnowlabs.com/models>
https://nlp.johnsnowlabs.com/docs/en/quickstart_spark-nlp.slack.com

Clinical Named Entity Recognition

- [1.Clinical_Named_Entity_Recognition_Model.ipynb](#)
- [1.2.Contextual_Parser_Rule_Based_NER.ipynb](#)
- [1.3.prepare_CoNLL_from_annotations_for_NER.ipynb](#)
- [1.4.Resume_MedicalNer_Model_Training.ipynb](#)
- [1.5.BertForTokenClassification_NER_SparkNLP_with_Transformers.ipynb](#)
- [7.Clinical_NER_Chunk_Merger.ipynb](#)
- [16.Adverse_Drug_Event_ADE_NER_and_Classifier.ipynb](#)

Clinical Assertion

- [2.Clinical_Assertion_Model.ipynb](#)
- [2.1.Scope_window_tuning_assertion_status_detection.ipynb](#)

Clinical Entity Resolution

- [3.Clinical_Entity_Resolvers.ipynb](#)
- [3.1.Calculate_Medicare_Risk_Adjustment_Score.ipynb](#)
- [3.2.Sentence_Entity_Resolvers_with_EntityChunkEmbeddings.ipynb](#)
- [13.Snomed_Entity_Resolver_Model_Training.ipynb](#)
- [13.1.Finetuning_Sentence_Entity_Resolver_Model.ipynb](#)
- [22.CPT_Entity_Resolver.ipynb](#)
- [24.Improved_Entity_Resolvers_in_SparkNLP_with_sBert.ipynb](#)
- [24.1.Improved_Entity_Resolution_with_SentenceChunkEmbeddings.ipynb](#)

spark-nlp==3.5.0
spark-nlp-jsl==3.5.0

 master spark-nlp-workshop / tutorials / Certification_Trainings / Healthcare /

[Go to file](#) [Add file](#) [...](#)

Clinical Relation Extraction

- [10.Clinical_Relation_Extraction.ipynb](#)
- [10.1.Clinical_Relation_Extraction_BodyParts_Models.ipynb](#)
- [10.2.Clinical_REL_Knowledge_Graph_with_Neo4j.ipynb](#)
- [10.3.ZeroShot_Clinical_Relation_Extraction.ipynb](#)

Clinical De-identification

- [4.Clinical_Deidentification.ipynb](#)
- [4.1.Clinical_Deidentification_in_German.ipynb](#)
- [4.2.Clinical_Deidentification_in_Spanish.ipynb](#)
- [4.3.Clinical_Deidentification_SparkNLP_vs_Cloud_Providers_Comparison.ipynb](#)
- [4.4.Clinical_Deidentification_SparkNLP_vs_SpaCy_Comparison.ipynb](#)
- [4.5.Clinical_Deidentification_in_French.ipynb](#)
- [4.6.Clinical_Deidentification_in_Italian.ipynb](#)

Optical Character Recognition with Spark OCR

- [5.Spark_OCR.ipynb](#)
- [5.1.Spark_OCR_Multi_Modals.ipynb](#)
- [5.2.Spark_OCR_Deidentification.ipynb](#)

Clinical Pipelines

- [11.Pretrained_Clinical_Pipelines.ipynb](#)
- [11.1.Healthcare_Code_Mapping.ipynb](#)
- [11.2.Pretrained_NER_Profiling_Pipelines.ipynb](#)

Classifiers

- [8.Generic_Classifier.ipynb](#)
- [21.Gender_Classifier.ipynb](#)

Normalizers

- [23.Drug_Normalizer.ipynb](#)
- [25.Date_Normalizer.ipynb](#)

Auxillary Notebooks

- [6.Clinical_Context_Spell_Checker.ipynb](#)
- [9.Chunk_Key_Phrase_Extraction.ipynb](#)
- [12.Named_Entity_Disambiguation.ipynb](#)
- [14.German_Healthcare_Models.ipynb](#)
- [15.German_Licensed_Models.ipynb](#)
- [17.Graph_builder_for_DL_models.ipynb](#)
- [18.Chunk_Sentence_Splitter.ipynb](#)
- [19.Financial_Contract_NER.ipynb](#)
- [20.SentenceDetectorDL_Healthcare.ipynb](#)
- [26.Chunk_Mapping.ipynb](#)

johnsnowlabs.com/spark-nlp-in-action/

Home Products Solutions Customers Company Learn Install Software Schedule a Call

Spark NLP: English

- Entity Mention & Intent
- Classify Documents
- Recognize Entities
- Detect Sentiment & Emotion
- Analyze Spelling & Grammar

Spark NLP: World Languages

- Identify & Translate Languages
- European Languages
- East Asian Languages
- Languages of India
- Middle Eastern Languages
- Languages of Africa

Spark NLP for Healthcare

- Recognize Clinical Entities
- Recognize Biomedical Entities
- De-Identification
- Resolve Entities to Codes
- Recognize Disease Symptoms
- Extract Relationships
- Split & Clean Medical Text
- Analyze non-English Medical Text

Spark OCR

- Extract Text from Documents
- Enhance Low-Quality Images
- Convert Tables & Structured Data
- Analyze non-English Medical Text

Spark NLP in Action

Spark NLP – English → Recognize Entities



Recognize entities in text

[Live Demo](#) [Create Notebook](#)



Recognize more entities in text

[Live Demo](#) [Create Notebook](#)



Detect Key Phrases

[Live Demo](#) [Create Notebook](#)



Find a text in document

[Live Demo](#) [Create Notebook](#)



Detect and normalize dates

[Live Demo](#) [Create Notebook](#)

http://nlp.johnsnowlabs.com/docs/en/licensed_install



Home Docs Learn Models Demo [Get Started](#) [Documentation](#)

Spark NLP for Healthcare

Getting Started
Installation
Annotators
Training
Models
Evaluation
Scalability API (Scalable)
Python API (Spacy)
Version Compatibility
Release Notes
Cluster Speed Benchmarks

Documentation > Spark NLP for Healthcare

Spark NLP for Healthcare

Getting started

Spark NLP for Healthcare is a commercial extension of Spark NLP for clinical and biomedical text mining. If you don't have a Spark NLP for Healthcare subscription yet, you can ask for a free trial by clicking on the button below.

[Try Now](#)

Spark NLP for Healthcare provides healthcare-specific annotators, pipelines, models, and embeddings for:

- Clinical entity recognition
- Clinical Entity Linking
- Entity normalization
- Attention Status Detection
- De-identification
- Relative Entropy
- Named Clinical Entity Extraction

After you are going to use any premained NER model, you don't need to install licensed library. As long as you have the AWS keys and license keys in your environment, you will be able to use licensed NER models with Spark NLP public library. For the other licensed premained models like AssertionOrC, DeIdentification, EntityResolvers and Relation Extraction models, you will need to install Spark NLP Enterprise as well.

The library offers access to several clinical and biomedical transformers: JS_BERT_Clinical, BioBERT, CliniceBert, Glue-Med, Glue-ICD-10. It also includes over 50 pre-trained healthcare models, that can recognize the following entities (any many more):

- Clinical - support Signs, Symptoms, Treatments, Procedures, Tests, Labs, Sections
- Drugs - support Name, Dosage, Strength, Route, Duration, Frequency

Getting started
Install Spark NLP for Healthcare
Setup AWS CLI Credentials for Amazon S3
AWS Lambda Function
Start Spark NLP for Healthcare Session from Python
Spark NLP for Healthcare Cheat Sheet
Install Spark NLP for Healthcare Databricks
Install Spark NLP for Healthcare GCP Functions
Google Colab Notebook

The screenshot shows the homepage of the John Snow Labs NLP Models Hub. The header features the John Snow LABS logo and navigation links for Home, Docs, Learn, Models, Demo, and Support. A prominent search bar at the top right allows users to "Upload Your Model!" or search for specific models and pipelines. Below the search bar, a large banner reads "NLP Models Hub" with the subtitle "A place for sharing and discovering Spark NLP models and pipelines". The main content area displays a grid of supported NLP models, each with a "Supported" badge, a thumbnail, a title, and a brief description. The models listed include Sentence Entity Resolver for UMLS CUI Codes (Clinical Drug), Sentence Entity Resolver for UMLS CUI Codes (Disease or Symptom), Sentence Entity Resolver for RxNorm (Abbrev, Base, Cased, mtl embeddings), Longformer Token Classification Base - NER CoNLL, Longformer Token Classification Base - NER CoNLL, and Sentence Entity Resolver for RxNorm (NQG). Each model entry includes a "View Model" button and a "View Pipeline" button.

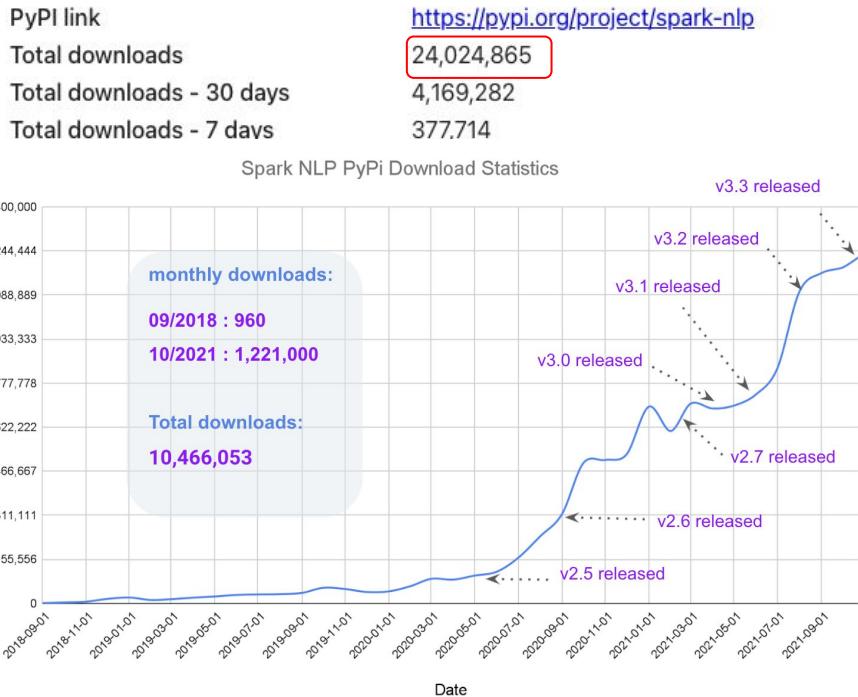
The screenshot shows a browser window displaying the `sparknlp_jsl.annimator` module from the `nlp.johnsnowlabs.com` website. The page includes a search bar, navigation links for 'Getting Started' and 'API Reference', and a table of contents for the `sparknlp_jsl.annimator` class. The main content area contains detailed descriptions for each method, such as `train`, `assertionDIBApproach`, `assertionDIBModel`, `assertionFilterer`, `assertionLogRegApproach`, `assertionLogRegModel`, `averageEmbeddings`, `bertSentenceChunkEmbeddings`, `chunk2Tokens`, `chunkConverter`, `chunkFilterer`, `chunkMergemodel`, `chunkNerModel`, `contextualPaserApproach`, `contextualPaserModel`, `dataNormalizer`, `deidentification`, `deidentificationModel`, `documentOpregClassif`, `documentOpregClassif`, `drugNormalizer`, `genericClassifierApproach`, `genericClassifierModel`, `objTagger`, `medicalAapproach`, and `medicalBcherModel`. Each method description includes parameters, returns, and examples.

Part - I

- ❖ Overview and key concepts in Spark NLP
- ❖ NLP basics & review
- ❖ Common medical NLP use cases
- ❖ Clinical named entity recognition

Introducing Spark NLP

Daily ~ 50K
Monthly ~ 4.2M



- Spark NLP is an open-source natural language processing library, built on top of Apache Spark and Spark ML. (initial release: Oct 2017)
 - A single unified solution for all your NLP needs
 - Take advantage of transfer learning and implementing the latest and greatest SOTA algorithms and models in NLP research
 - The most widely used NLP library in industry (3 yrs in a row)
 - Delivering a mission-critical, enterprise grade NLP library (used by multiple Fortune 500)
 - Full-time development team (a new release every other week)

Spark NLP for Healthcare

Spark NLP for Healthcare provides

- accurate,
- scalable,
- private,
- tunable,
- modular

software library that helps healthcare & pharma organizations build longitudinal patient records and knowledge graphs on real-world EHR data.

Clinical Entity Recognition	Clinical Entity Linking	Assertion Status	Relation Extraction						
<p>40 units DOSAGE of insulin glargine DRUG at night FREQUENCY</p>	<p>Suspect diabetes SNOMED-CT: 473127005 Lisinopril 10 MG RxNorm: 316151 Hyponatremia ICD-10: E87.1</p>	<p>Fever and sore throat → PRESENT No stomach pain → ABSENT Father with Alzheimer → FAMILY</p>							
Algorithms		Content							
<p>Extract Knowledge</p> <ul style="list-style-type: none"> • Entity Linker • Entity Disambiguator • Document Classifier • Contextual Parser 		<p>De-identify text</p> <ul style="list-style-type: none"> • Structured Data • Unstructured Text • Obfuscator • Generalizer 							
<p>Split Text</p> <ul style="list-style-type: none"> • Sentence Detector • Deep Sentence Detector • Tokenizer • nGram Generator 		<p>Clean Medical Text</p> <ul style="list-style-type: none"> • Spell Checking • Spell Correction • Normalizer • Stopword Cleaner 							
<p>Clinical Grammar</p> <ul style="list-style-type: none"> • Stemmer • Lemmatizer • Part of Speech Tagger • Dependency Parser 		<p>Find in Text</p> <ul style="list-style-type: none"> • Text Matcher • Regex Matcher • Date Matcher • Chunker 							
Trainable & Tunable	Scalable to a Cluster	Fast Inference	Hardware Optimized						
			 						
Community									
Get Started		View Documentation							
<p>600+ Pretrained Models</p> <table border="1"> <tr> <td>Clinical: Signs, Symptoms, Treatments, Procedures, Tests, Labs, Sections</td> <td>Anatomy: Organ, Subdivision, Cell, Structure Organism, Tissue, Gene, Chemical</td> </tr> <tr> <td>Drugs: Name, Dosage, Strength, Route, Duration, Frequency Poisons, Adverse Effects</td> <td>Demographics: Age, Gender, Height, Weight, Race, Ethnicity, Marital Status, Vital Signs</td> </tr> <tr> <td>Risk Factors: Smoking, Obesity, Diabetes, Hypertension, Substance Abuse</td> <td>Sensitive Data: Patient Name, Address, Phone, Email, Dates, Providers, Identifiers</td> </tr> </table>				Clinical: Signs, Symptoms, Treatments, Procedures, Tests, Labs, Sections	Anatomy: Organ, Subdivision, Cell, Structure Organism, Tissue, Gene, Chemical	Drugs: Name, Dosage, Strength, Route, Duration, Frequency Poisons, Adverse Effects	Demographics: Age, Gender, Height, Weight, Race, Ethnicity, Marital Status, Vital Signs	Risk Factors: Smoking, Obesity, Diabetes, Hypertension, Substance Abuse	Sensitive Data: Patient Name, Address, Phone, Email, Dates, Providers, Identifiers
Clinical: Signs, Symptoms, Treatments, Procedures, Tests, Labs, Sections	Anatomy: Organ, Subdivision, Cell, Structure Organism, Tissue, Gene, Chemical								
Drugs: Name, Dosage, Strength, Route, Duration, Frequency Poisons, Adverse Effects	Demographics: Age, Gender, Height, Weight, Race, Ethnicity, Marital Status, Vital Signs								
Risk Factors: Smoking, Obesity, Diabetes, Hypertension, Substance Abuse	Sensitive Data: Patient Name, Address, Phone, Email, Dates, Providers, Identifiers								

Academic Activities & Benchmarks



Preparing for the Next Pandemic: Transfer Learning from Existing Diseases via Hierarchical Multi-Modal BERT Models to Predict COVID-19 Outcomes

Khushbu Agarwal¹, Sutanay Choudhury^{1*}, Sindhu Tipirneni², Pritam Mukherjee³, Colby Ham¹, Suzanne Tamang¹, Matthew Baker⁴, Siyi Tang⁵, Veysel Kocaman⁷, Olivier Gevaert^{1,5}, Robert Rallo¹, and Chandan K Reddy¹

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American Medical
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Tracking the Evolution of COVID-19 via Temporal Comorbidity Analysis from Multi-Modal Data

Sutanay Choudhury¹, Khushbu Agarwal¹, Colby Ham¹, Pritam Mukherjee², Siyi Tang³, Sindhu Tipirneni³, Chandan Reddy⁴, Suzanne Tamang², Robert Rallo¹, Veysel Kocaman⁷,
¹Pacific Northwest National Laboratory; ²Stanford University; ³Virginia Tech;

John Snow Labs

Introduction

We aim to characterize the evolution in the effectiveness of treatment for different patient groups over the course of the COVID-19 pandemic. In contrast to most existing studies¹, we study the evolution of patient trajectories based on unique sets of frequent comorbid conditions discovered from the data. Further, we study the association between frequent co-morbid conditions to the length of stay (LOS) as a measure of treatment efficacy, for poor COVID-19 related outcomes.

Journal of Biomedical Semantics

SOFTWARE

Accurate Clinical and Biomedical Named Entity Recognition at Scale

Veysel Kocaman* and David Talby

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Scientific Document Understanding (SDU) at AAAI

Deeper Clinical Document Understanding Using Relation Extraction

Hasham Ul Haq, Veysel Kocaman, David Talby

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Abstract

The surging amount of biomedical literature & digital clinical records presents a growing need for text mining techniques that can not only identify but also semantically enrich

publications and literature are growing rapidly, there still lacks structured knowledge that can be easily processed by computer programs. Relation Extraction becomes even more pertinent in biomedical research as it can provide the criti-



New State-of-the-art (SOTA) Benchmarks



- ✓ 6 academic publications & events and 1 patent application, 20+ medium blogposts
- ✓ new SOTA benchmarks on Clinical NER challenges (i2b2 2010 Clinical, i2b2 2014 Deid, n2c2 2018 Medication)
- ✓ new SOTA benchmarks on Adverse Drug Reaction NER datasets (ADE, CADEC, SMM4H)
- ✓ new SOTA benchmarks on Adverse Drug Reaction classification datasets (ADR, CADEC)
- ✓ new SOTA benchmarks on Clinical Relation Extraction datasets (i2b2, temporal, ADE, Posology, PGR – 5 out of 7)



Health
Intelligence
(W3PHIAI-22)
at AAAI

Mining Adverse Drug Reactions from Unstructured Mediums at Scale

Hasham Ul Haq, Veysel Kocaman, David Talby

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{hasham, veysel, david}@johnsnowlabs.com

ADR's has been estimated to cost \$156 billion each year in the United States alone (van Der Hoof et al. 2006).

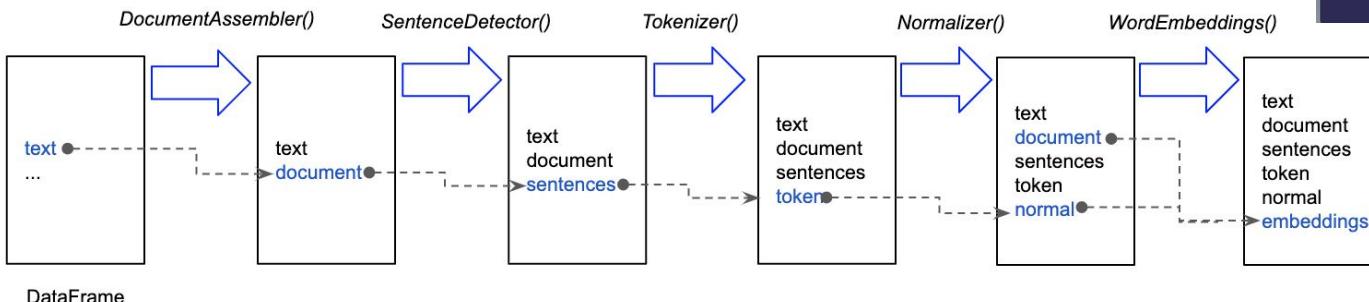
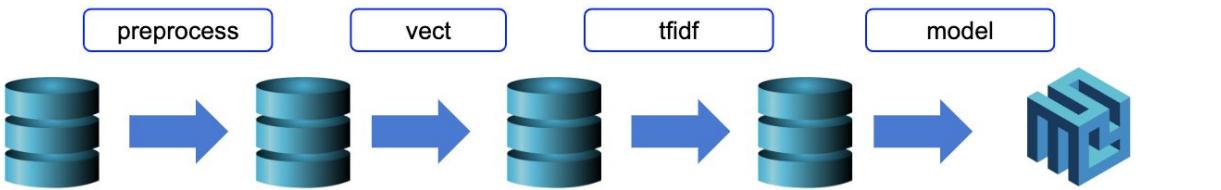
Finding all ADR's of a drug before it is marketed is not practical for several reasons. First, the number of human subjects going through clinical trials is often too small to detect rare ADR's. Second, many clinical trials are short-lasting while some ADR's take time to manifest. Third,

TRUSTED BY



Introducing Spark NLP

Pipeline of annotators



```
from pyspark.ml import Pipeline
document_assembler = DocumentAssembler()\
    .setInputCol("text")\
    .setOutputCol("document")
sentenceDetector = SentenceDetector()\
    .setInputCols(["document"])\
    .setOutputCol("sentences")
tokenizer = Tokenizer() \
    .setInputCols(["sentences"]) \
    .setOutputCol("token")
normalizer = Normalizer()\
    .setInputCols(["token"])\
    .setOutputCol("normal")
word_embeddings=WordEmbeddingsModel.pretrained()\
    .setInputCols(["document","normal"])\ 
    .setOutputCol("embeddings")
nlpPipeline = Pipeline(stages=[document_assembler,
    sentenceDetector,
    tokenizer,
    normalizer,
    word_embeddings,
    ])
nlpPipeline.fit(df).transform(df)
```

Introducing Spark NLP



Faster inference

```
from sparknlp.base import LightPipeline  
LightPipeline(someTrainedPipeline).annotate(someStringOrArray)
```

Spark is like a [locomotive](#) racing a [bicycle](#). The [bike](#) will win if the load is light, it is quicker to accelerate and more agile, but with a heavy load the [locomotive](#) might take a while to get up to speed, but [it's](#) going to be faster in the end.

LightPipelines are Spark ML pipelines converted into a single machine but multithreaded task, becoming more than 10x times faster for smaller amounts of data (small is relative, but 50k sentences is roughly a good maximum).

Spark NLP in Healthcare

Clean & structured data



Raw & unstructured data



Healthcare data



- Less than **50% of the structured data** and less than **1% of the unstructured data** is being leveraged for decision making in companies (HBR). This is even worse in healthcare.
- NLP is ultra domain specific, so train your own models.

Why is language understanding hard?

Human Language is:

- Nuanced
- Fuzzy
- Contextual
- Medium specific
- Domain specific

Healthcare specific needs:

1. Core Annotators

Part of speech, spell checking, ...

2. Vocabulary

Ontologies, relationships, word embeddings, ...

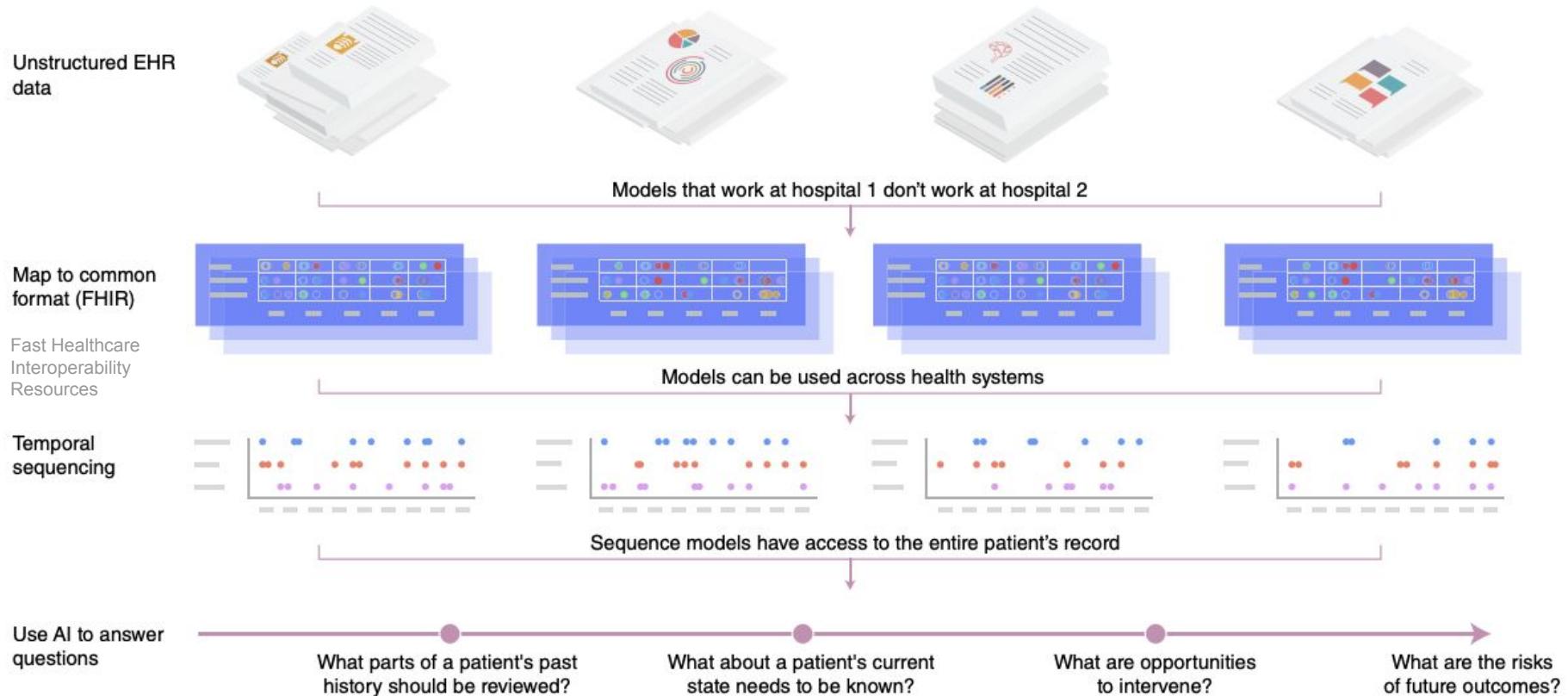
3. ML & DL Models

Named entity recognition, entity resolution, ...

ED Triage Notes
states started last night, upper abd, took alka seltzer approx 0500, no relief. nausea no vomiting
Since yesterday 10/10 "constant Tylenol 1 hr ago. +nausea. diaphoretic. Mid abd radiates to back
Generalized abd radiating to lower x 3 days accompanied by dark stools. Now with bloody stool this am. Denies dizzy, sob, fatigue. Visiting from Japan on business."



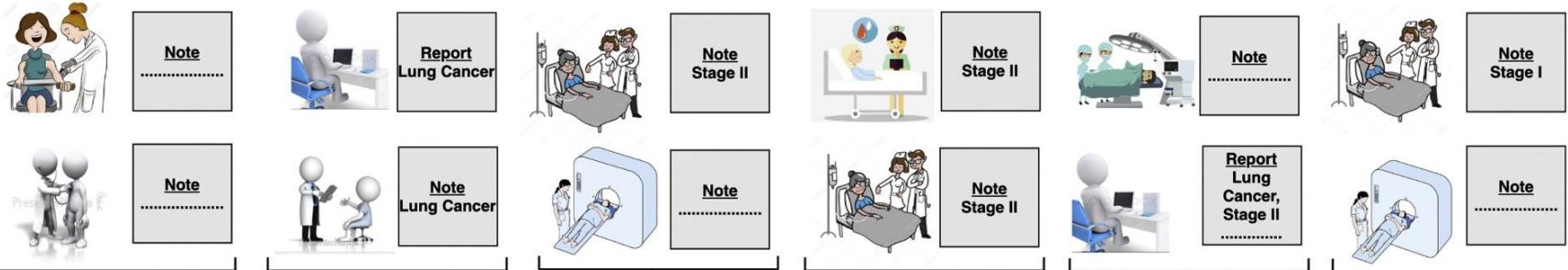
Features	
Type of Pain	Symptoms
Intensity of Pain	Onset of symptoms
Body part of region	Attempted home remedy



“Systems used to generate health data are designed for operations, not to organize data effectively for research or analytics.”

Putting the clinical facts on a timeline

Natural History



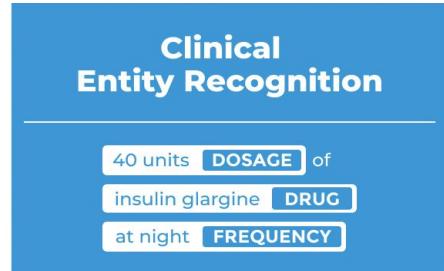
Medical Timeline

Lung Cancer
Diagnosis

Tumor Stage II

Tumor Stage I

NLP in Healthcare



Clinical Entity Linking

Suspect diabetes SNOMED-CT: 473127005

Lisinopril 10 MG RxNorm: 316151

Pyponatremia ICD-10: E87.1

Assertion Status

Fever and sore throat → PRESENT

No stomach pain → ABSENT

Father with Alzheimer → FAMILY

De-Identification

Ora **NAME**, a **25 AGE** yo
cashier **PROFESSION** from
Morocco **LOCATION**

Relation Extraction

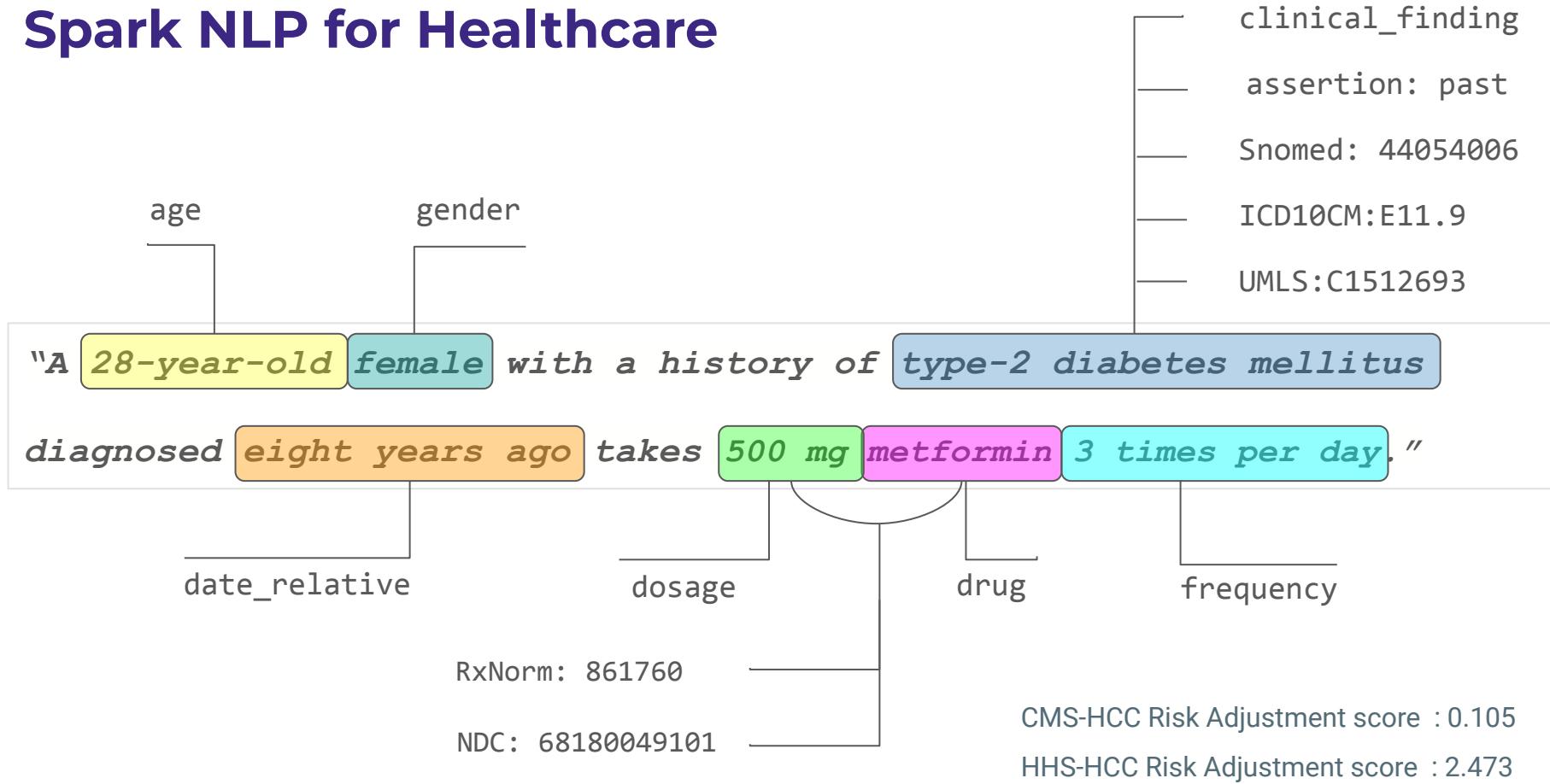
AFTER

Admitted for nausea due to chemo

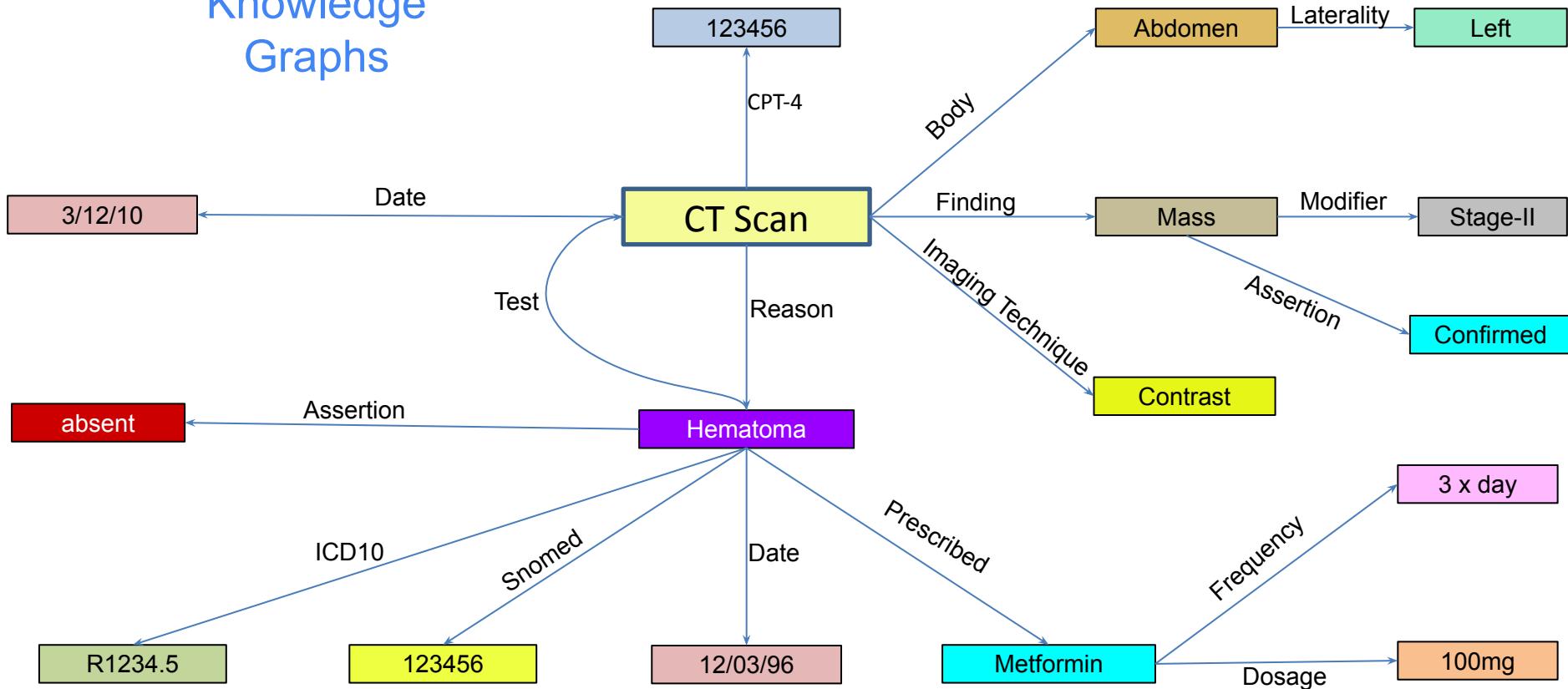
Occurrence Symptom Treatment

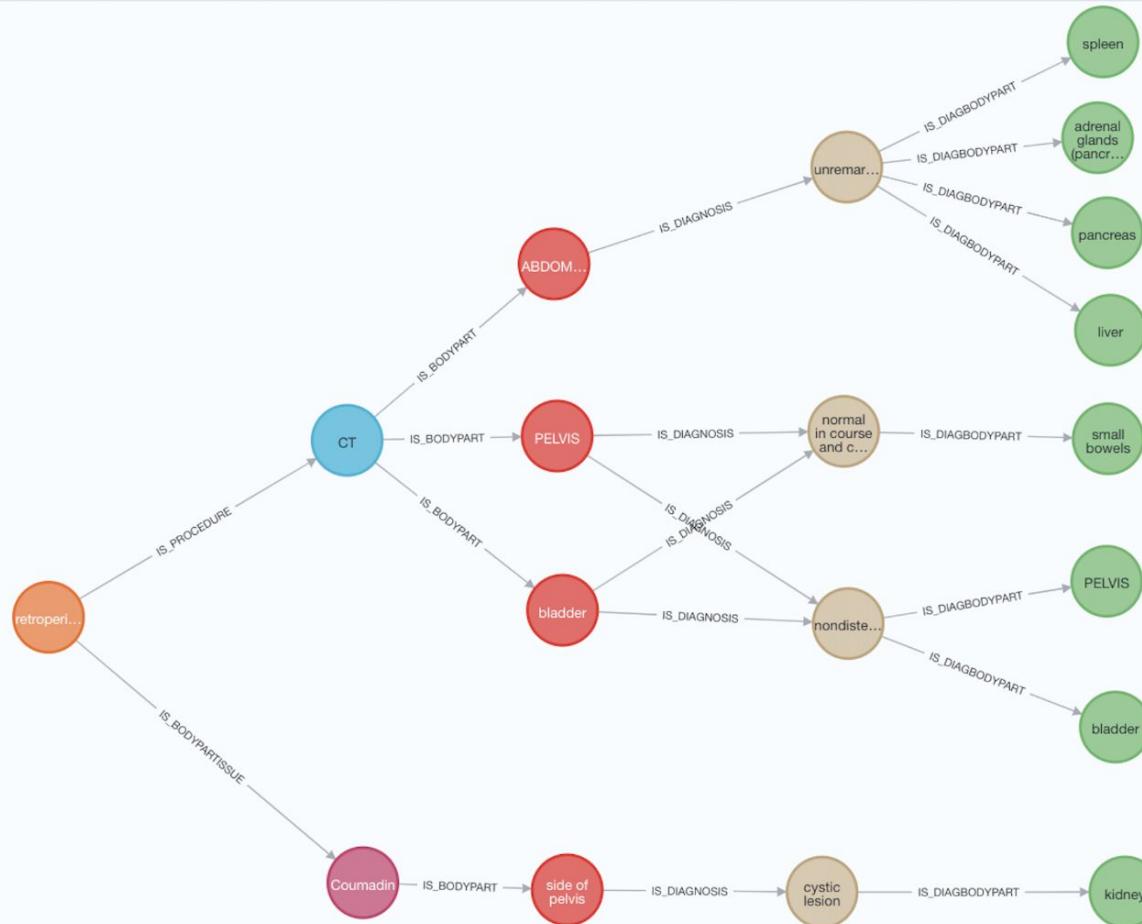
CAUSED BY

Spark NLP for Healthcare



Knowledge Graphs





REASON FOR EXAM: Evaluate for retroperitoneal hematoma on the right side of pelvis, the patient has been following, is currently on Coumadin.

CT ABDOMEN: There is no evidence for a retroperitoneal hematoma.

The liver, spleen, adrenal glands, and pancreas are unremarkable.

Within the superior pole of the left kidney, there is a 3.9 cm cystic lesion.

A 3.3 cm cystic lesion is also seen within the inferior pole of the left kidney.

No calcifications are noted. The kidneys are small bilaterally.

CT PELVIS: Evaluation of the bladder is limited due to the presence of a Foley catheter, the bladder is nondistended.

The large and small bowels are normal in course and caliber. There is no obstruction.

Spark NLP for Healthcare

Named Entity Recognition

ICD10 Resolver

Snomed Resolver

UMLS Resolver

Assertion Status Detection

Risk Adj. Module

RxNorm Resolver

Relationship Extraction

clinical_finding

Snomed: 44054006

ICD10CM:E11.9

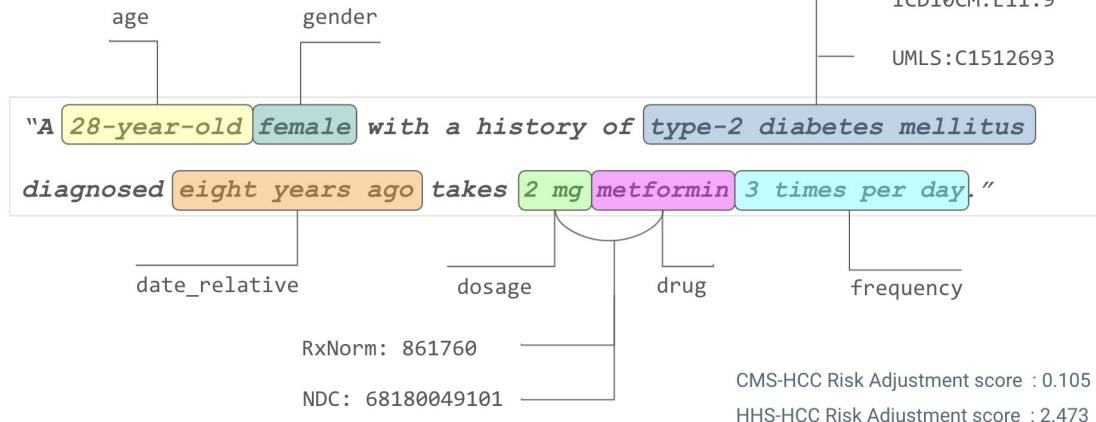
UMLS:C1512693

Sentence Splitter

Tokenizer

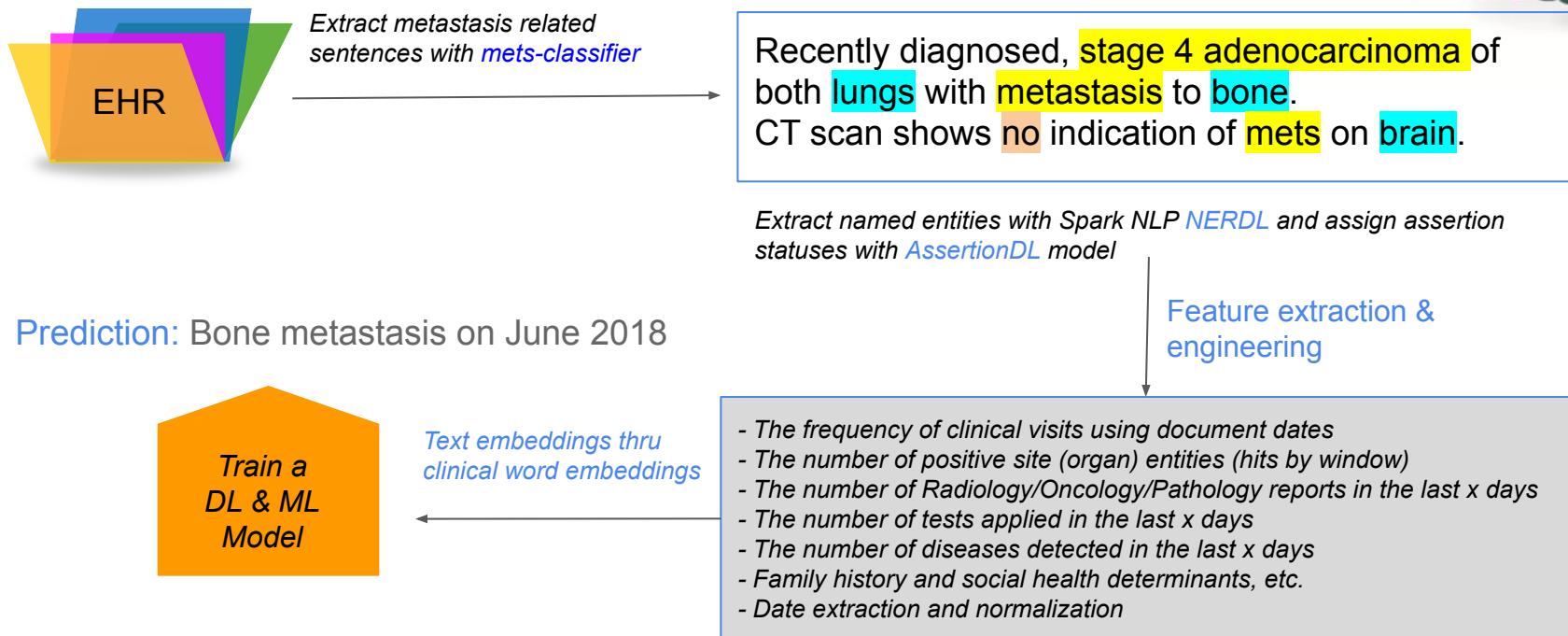
Bert Embeddings

sBert
Embeddings



NLP in Healthcare

Case: Predicting if a patient would develop a metastasis on certain sites.



Clinical Named Entity Recognition (NER)

- Extract structured data from free text
- Automate record keeping & abstraction process
- Feeding downstream tasks
- Features for ML models

Clinical Entity Recognition	Clinical Entity Linking	Assertion Status	Relation Extraction						
40 units DOSAGE of insulin glargine DRUG at night FREQUENCY	Suspect diabetes SNOMED-CT: A73122005 Lisinopril 10 MG RxNorm: 316151 Hyponatremia ICD-10: E87.1	Fever and sore throat → PRESENT No stomach pain → ABSENT Father with Alzheimer → FAMILY	AFTER Admitted Occurrence for nausea Symptom due to chemo Treatment CAUSED BY						
Algorithms		Content							
Extract Knowledge		Medical Transformers	Linked Medical Terminologies						
<ul style="list-style-type: none">Entity LinkerEntity DisambiguatorDocument ClassifierContextual Parser		<ul style="list-style-type: none">Structured DataUnstructured TextObfuscatorGeneralizer	<ul style="list-style-type: none">SNOMED-CT CPTICD-10-CM RxNormICD-10-PCS ICD-O LOINC						
Split Text		Clean Medical Text	75+ Pretrained Models						
<ul style="list-style-type: none">Sentence DetectorDeep Sentence DetectorTokenizernGram Generator		<ul style="list-style-type: none">Spell CheckingSpell CorrectionNormalizerStopword Cleaner	<table border="1"><tr><td>Clinical: Signs, Symptoms, Treatments, Procedures, Tests, Labs, Sections</td><td>Anatomy: Organ, Subdivision, Cell, Structure, Organism, Tissue, Gene, Chemical</td></tr><tr><td>Drugs: Name, Dosage, Strength, Route, Duration, Frequency, Poisons, Adverse Effects</td><td>Demographics: Age, Gender, Height, Weight, Race, Ethnicity, Marital Status, Vital Signs</td></tr><tr><td>Risk Factors: Smoking, Obesity, Diabetes, Hypertension, Substance Abuse</td><td>Sensitive Data: Patient Name, Address, Phone, Email, Dates, Providers, Identifiers</td></tr></table>	Clinical: Signs, Symptoms, Treatments, Procedures, Tests, Labs, Sections	Anatomy: Organ, Subdivision, Cell, Structure, Organism, Tissue, Gene, Chemical	Drugs: Name, Dosage, Strength, Route, Duration, Frequency, Poisons, Adverse Effects	Demographics: Age, Gender, Height, Weight, Race, Ethnicity, Marital Status, Vital Signs	Risk Factors: Smoking, Obesity, Diabetes, Hypertension, Substance Abuse	Sensitive Data: Patient Name, Address, Phone, Email, Dates, Providers, Identifiers
Clinical: Signs, Symptoms, Treatments, Procedures, Tests, Labs, Sections	Anatomy: Organ, Subdivision, Cell, Structure, Organism, Tissue, Gene, Chemical								
Drugs: Name, Dosage, Strength, Route, Duration, Frequency, Poisons, Adverse Effects	Demographics: Age, Gender, Height, Weight, Race, Ethnicity, Marital Status, Vital Signs								
Risk Factors: Smoking, Obesity, Diabetes, Hypertension, Substance Abuse	Sensitive Data: Patient Name, Address, Phone, Email, Dates, Providers, Identifiers								
Clinical Grammar		Find in Text	Trainable & Tunable Scalable to a Cluster Fast Inference Hardware Optimized Community						
<ul style="list-style-type: none">StemmerLemmatizerPart of Speech TaggerDependency Parser		<ul style="list-style-type: none">Text MatcherRegex MatcherDate MatcherChunker	 Apache Spark ML Pipelines LightPipeline intel NVIDIA NLP SUMMIT						

Pretrained NER Models

- Clinical NER Models

index	model_name	index	model_name	index	model_name	index	model_name
1	jsl_ner_wip_clinical	17	ner_chexpert	33	ner_deid_subentity (German)	49	ner_jsl_greedy
2	jsl_ner_wip_greedy_clinical	18	ner_clinical	34	ner_diseases_large	50	ner_jsl_slim
3	jsl_ner_wip_modifier_clinical	19	ner_clinical_icdem	35	ner_drugs	51	ner_measurements_clinical
4	jsl_rd_ner_wip_greedy_clinical	20	ner_clinical_large	36	ner_drugs_greedy	52	ner_medmentions_coarse
5	ner_ade_clinical	21	ner_clinical_large_en	37	ner_drugs_large	53	ner_posology
6	ner_ade_clinicalalbert	22	ner_deid_augmented	38	ner_events_admission_clinical	54	ner_posology_experimental
7	ner_ade_healthcare	23	ner_deid_enriched	39	ner_events_clinical	55	ner_posology_greedy
8	ner_anatomy	24	ner_deid_generic_augmented	40	ner_events_healthcare	56	ner_posology_healthcare
9	ner_anatomy_coarse	25	ner_deid_generic (German)	41	ner_genetic_variants	57	ner_posology_large
10	ner_bacterial_species	26	ner_deid_large	42	ner_healthcare	58	ner_posology_small
11	ner_bionlp	27	ner_deid_sd	43	ner_human_phenotype_gene_clinical	59	ner_profiling_clinical
12	ner_cancer_genetics	28	ner_deid_sd_large	44	ner_human_phenotype_go_clinical	60	ner_radiology
13	ner_cellular	29	ner_deid_subentity_augmented	45	ner_jsl	61	ner_radiology_wip_clinical
14	ner_chemicals	30	ner_deid_synthetic	46	ner_jsl_enriched	62	ner_risk_factors
15	ner_chemprot_clinical	31	ner_deidentify_dl	47	ner_nihss	63	ner biomarker
16	ner_abbreviation_clinical	32	ner_deid_subentity_augmented_i2b2	48	ner_diseases	64	ner_drugprot_clinical

- BioBert NER Models

index	model_name	index	model_name	index	model_name	index	model_name
1	jsl_ner_wip_greedy_biobert	7	ner_cellular_biobert	13	ner_events_biobert	18	ner_jsl_greedy_biobert
2	jsl_rd_ner_wip_greedy_biobert	8	ner_chemprot_biobert	14	ner_human_phenotype_gene_biobert	19	ner_posology_biobert
3	ner_ade_biobert	9	ner_clinical_biobert	15	ner_human_phenotype_go_biobert	20	ner_posology_large_biobert
4	ner_anatomy_biobert	10	ner_deid_biobert	16	ner_jsl_biobert	21	ner_profiling_biobert
5	ner_anatomy_coarse_biobert	11	ner_deid_enriched_biobert	17	ner_jsl_enriched_biobert	22	ner_risk_factors_biobert
6	ner_bionlp_biobert	12	ner_diseases_biobert				

- BertForTokenClassification Clinical NER models

model_name
1 bert_token_classifier_ner_ade
2 bert_token_classifier_ner_clinical
3 bert_token_classifier_ner_deid
4 bert_token_classifier_ner_drugs
5 bert_token_classifier_ner_jsl
6 bert_token_classifier_ner_jsl_slim
7 bert_token_classifier_ner_bionlp
8 bert_token_classifier_ner_bacteria
9 bert_token_classifier_ner_anatomy
10 bert_token_classifier_ner_cellular
11 bert_token_classifier_ner_chemprot
12 bert_token_classifier_ner_chemicals
13 bert_token_classifier_drug_development_trials

Approach	embeddings	# of models
BiLSTM-CNN-Char	Clinical (glove)	70+
BiLSTM-CNN-Char	Biobert	20+
Bert for Token Cls.	Biobert	10+
Total		100+

NER JSL

Let's show an example of `ner_js1` model that has about 80 clinical entity labels by changing just only the model name.

Entities

Injury_or_Poisoning	Direction	Test	Admission_Discharge	Death_Entity
Relationship_Status	Duration	Respiration	Hyperlipidemia	Birth_Entity
Age	Labour_Delivery	Family_History_Header	BMI	Temperature
Alcohol	Kidney_Disease	Oncological	Medical_History_Header	Cerebrovascular_Disease
Oxygen_Therapy	O2_Saturation	Psychological_Condition	Heart_Disease	Employment
Obesity	Disease_Syndrome_Disorder	Pregnancy	ImagingFindings	Procedure
Medical_Device	Race_Ethnicity	Section_Header	Symptom	Treatment
Substance	Route	Drug_Ingredient	Blood_Pressure	Diet
External_body_part_or_region	LDL	VS_Finding	Allergen	EKG_Findings
Imaging_Technique	Triglycerides	RelativeTime	Gender	Pulse
Social_History_Header	Substance_Quantity	Diabetes	Modifier	Internal_organ_or_component
Clinical_Dept	Form	Drug_BrandName	Strength	Fetus_NewBorn
RelativeDate	Height	Test_Result	Sexually_Active_or_Sexual_Orientation	Frequency
Time	Weight	Vaccine	Vital_Signs_Header	Communicable_Disease
Dosage	Overweight	Hypertension	HDL	Total_Cholesterol
Smoking	Date			

Attention (aka Bert) is all you need ?

ner model	embeddings_clinical (BLSTM-CNN-Char)		biobert (BLSTM-CNN-Char)		BertForTokenClassification (SOTA)	
	micro	macro	micro	macro	micro	macro
ner_jsl	0.878	0.814	0.862	0.711	0.88	0.71
ner_jsl_slim	0.87	0.766	0.86	0.778	0.89	0.75
ner_deid	0.94	0.77	0.93	0.77	0.75	0.63
ner_drug	0.964	0.964	0.912	0.911	1	0.98
ner_ade	0.84	0.807	0.839	0.819	0.89	0.84

* On average, the GLoVe embeddings are 30% faster during training compared to BERT embeddings, and more than 5x faster during inference, while being on-par in terms of F1 score.

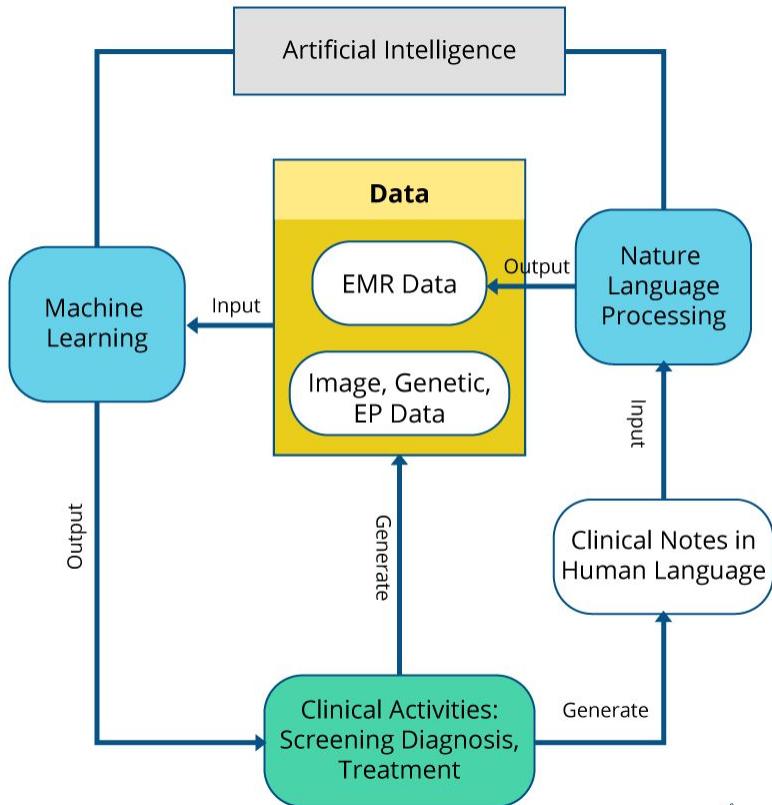
NLP in Healthcare

"Mother with a lung cancer, a patient is diagnosed as breast cancer in 1991 and then admitted to Mayo Clinic in Oct 2000, went under chemo for 6 months, discharged in April 2001 with a prescription of 2 mg metformin 3 times per day."

Named Entities

Mother with a lung cancer **ONCOLOGICAL** , a pregnant **PREGNANCY** patient is diagnosed as breast cancer **ONCOLOGICAL** in **1991 DATE** and then admitted **ADMISSION_DISCHARGE** to Mayo Clinic **CLINICAL_DEPT** in Oct **2000 DATE** , went under chemo **TREATMENT** for 6 months **DURATION** , discharged **ADMISSION_DISCHARGE** in **April 2001 DATE** with a prescription of **2 mg STRENGTH** metformin **DRUG_INGREDIENT** **3 times per day FREQUENCY** .

Clinical Named Entity Recognition (NER)



The patient was prescribed 1 capsule of Advil for 5 days . He was seen by the endocrinology service and she was discharged on 40 units of insulin glargine at night , 12 units of insulin lispro with meals , and metformin 1000 mg two times a day . It was determined that all SGLT2 inhibitors should be discontinued indefinitely fro 3 months .

Color codes:FREQUENCY, DOSAGE, DURATION, DRUG, FORM, STRENGTH, **Posology NER**

No findings in urinary system , skin color is normal , brain CT and cranial checks are clear . Swollen fingers and eyes . Extensive stage small cell lung cancer . Chemotherapy with carboplatin and etoposide . Left scapular pain status post CT scan of the thorax .

Color codes:Organ, Organism_subdivision, Organism_substance, PathologicalFormation, Anatomical_system, **Anatomy NER**

A . Record date : 2093-01-13 , David Hale , M.D . , Name : Hendrickson , Ora MR . # 7194334 Date : 01/13/93 PCP : Oliveira , 25 years-old , Record date : 2079-11-09 . Cocke County Baptist Hospital . 0295 Keats Street

Color codes:STREET, DOCTOR, AGE, HOSPITAL, PATIENT, DATE, MEDICALRECORD, **PHI NER**

Clinical Named Entities – Spark NLP vs Others

Spark NLP

Google	Azure	AWS
PROBLEM	DIAGNOSIS SYMPTOM_OR_SIGN ALLERGEN	MEDICAL_CONDITION_DX_NA MEDICAL_CONDITION_SIGN MEDICAL_CONDITION_SYMPTOM
PROCEDURE	TREATMENT_NAME	PROCEDURE_NAME TREATMENT_NAME
MEDICINE	MEDICATION_CLASS MEDICATION_NAME	MEDICATION_BRAND_NAME MEDICATION_GENERIC_NAME
ANATOMICAL_STRUCTURE	BODY_STRUCTURE	SYSTEM_ORGAN_SITE
LABORATORY_DATA BODY_MEASUREMENT	EXAMINATION_NAME	TEST_NAME
SEVERITY	CONDITION_QUALIFIER CONDITION_SCALE	MEDICAL_CONDITION_ACUITY
MED_DOSE MED_TOTALDOSE MED_STRENGTH MED_UNIT	DOSAGE	MEDICATION_DOSAGE MEDICATION_STRENGTH MEDICATION_RATE
MED_FREQUENCY	FREQUENCY	MEDICATION_FREQUENCY
MED_FORM	MEDICATION_FORM	MEDICATION_FORM
MED_ROUTE	MEDICATION_ROUTE	MEDICATION_ROUTE_OR_MODE
MED_DURATION	TIME	MEDICATION_DURATION
LAB_VALUE MED_VALUE	MEASUREMENT_VALUE	TEST_VALUE
LAB_UNIT BM_UNIT	MEASUREMENT_UNIT	TEST_UNIT



Symptom, Disease_Syndrome_Disorder, Heart_Disease, VS_Finding, Communicable_Disease, Hypertension, Diabetes, Kidney_Disease, Cerebrovascular_Disease, Injury_or_Poisoning, Psychological_Condition, Total_Cholesterol, Hyperlipidemia, Obesity, Oncological, Pregnancy, EKG_Findings, Death_Entity, ImagingFindings, Female_Reproductive_Status, Fetus_NewBorn, Pregnancy_Delivery_Puerperium, Overweight, Puerperium



Test, Test_Result, Treatment, Pulse, Imaging_Technique, Labour_Delivery, Temperature, Blood_Pressure, Oxygen_Therapy, Weight, LDL, O2_Saturation, BMI, Vaccine, Respiration, Triglycerides

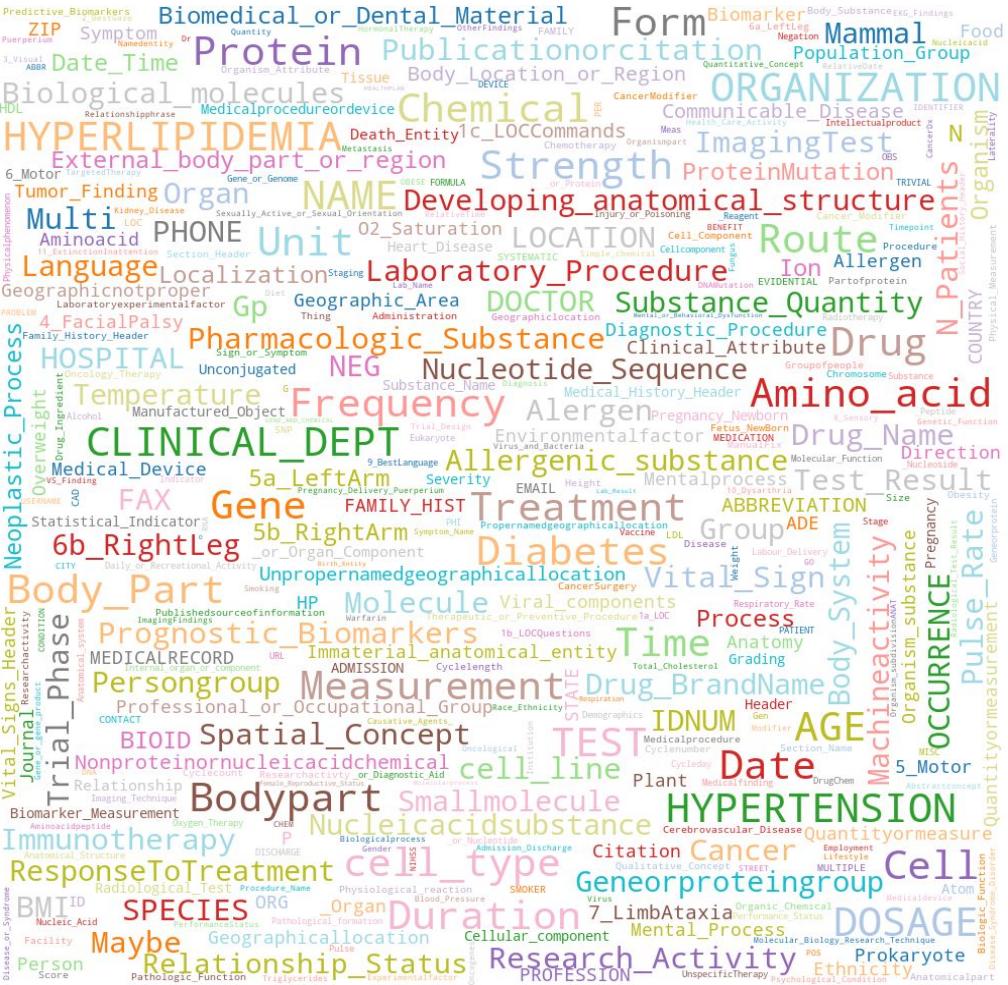
Mother with a lung cancer ONCOLOGICAL , a pregnant PREGNANCY patient is diagnosed as breast cancer ONCOLOGICAL in 1991 DATE and then admitted ADMISSION_DISCHARGE to Mayo Clinic CLINICAL_DEPT in Oct 2000 DATE , went under chemo TREATMENT for 6 months DURATION , discharged ADMISSION_DISCHARGE in April 2001 DATE with a prescription of 2 mg STRENGTH metformin DRUG_INGREDIENT 3 times per day FREQUENCY .

Clinical Named Entities

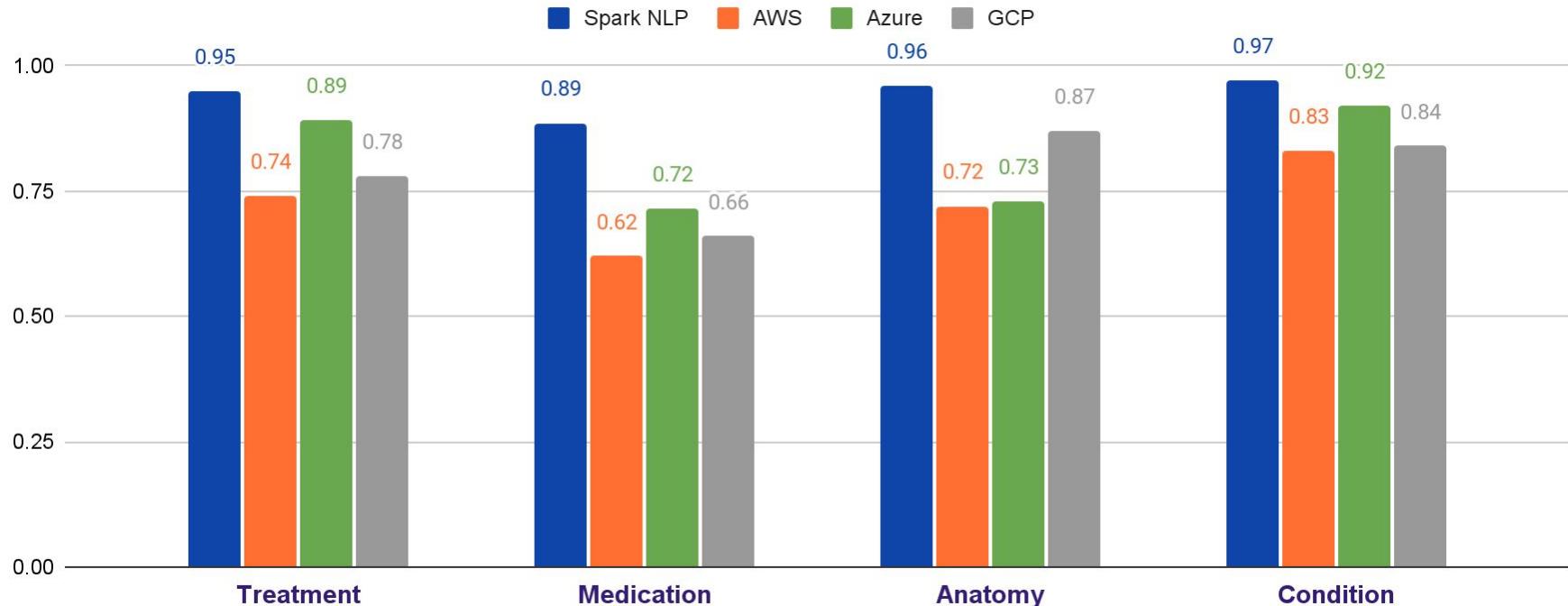
Spark NLP vs Others

Google	Azure	AWS
PROBLEM	DIAGNOSIS SYMPTOM_OR_SIGN ALLERGEN	MEDICAL_CONDITION_DX_NA MEDICAL_CONDITION_SIGN MEDICAL_CONDITION_SYMPTOM
PROCEDURE	TREATMENT_NAME	PROCEDURE_NAME TREATMENT_NAME
MEDICINE	MEDICATION_CLASS MEDICATION_NAME	MEDICATION_BRAND_NAME MEDICATION_GENERIC_NAME
ANATOMICAL_STRUCTURE	BODY_STRUCTURE	SYSTEM_ORGAN_SITE
LABORATORY_DATA BODY_MEASUREMENT	EXAMINATION_NAME	TEST_NAME
SEVERITY	CONDITION_QUALIFIER CONDITION_SCALE	MEDICAL_CONDITION_ACUITY
MED_DOSE MED_TOTALDOSE MED_STRENGTH MED_UNIT	DOSAGE	MEDICATION_DOSAGE MEDICATION_STRENGTH MEDICATION_RATE
MED_FREQUENCY	FREQUENCY	MEDICATION_FREQUENCY
MED_FORM	MEDICATION_FORM	MEDICATION_FORM
MED_ROUTE	MEDICATION_ROUTE	MEDICATION_ROUTE_OR_MODE
MED_DURATION	TIME	MEDICATION_DURATION
LAB_VALUE MED_VALUE	MEASUREMENT_VALUE	TEST_VALUE
LAB_UNIT BM_UNIT	MEASUREMENT_UNIT	TEST_UNIT

400+ entities from 100+ models



NER Benchmarks



Spark NLP vs AWS vs GCP vs Academic

		Spark NLP	Competition Best	Last Best
Clinical Concept Extraction	2010 i2b2/VA	0.876	0.852	0.862
De-Identification	2014 n2c2	0.961	0.936	0.955
Medication Extraction	2018 n2c2	0.899	0.896	0.896

Entity	Sample	Spark NLP Clinical Models			AWS Medical Comprehend			GCP Healthcare API		
		Precision	Recall	F1	Precision	Recall	F1	Precision	Recall	F1
Problem	4891	0.726	0.585	0.648	0.539	0.478	0.507	0.850	0.516	0.642
Test	5903	0.782	0.662	0.717	0.594	0.703	0.644	0.576	0.461	0.512
Drug	10284	0.946	0.882	0.913	0.815	0.910	0.860	0.962	0.885	0.922
Avg. F1				0.759			0.670			0.692

Biomedical Named Entity Recognition

Spark NLP vs Spacy vs Stanza

Dataset	Entities	Spark - Biomedical	Spark - GloVe 6B	Stanza	SciSpacy
NBCI-Disease	Disease	89.13	87.19	87.49	81.65
BC5CDR	Chemical, Disease	89.73	88.32	88.08	83.92
BC4CHEMD	Chemical	93.72	92.32	89.65	84.55
Linnaeus	Species	86.26	85.51	88.27	81.74
Species800	Species	80.91	79.22	76.35	74.06
JNLPBA	5 types in cellular	81.29	79.78	76.09	73.21
AnatEM	Anatomy	89.13	87.74	88.18	84.14
BioNLP13-CG	16 types in Cancer Genetics	85.58	84.3	84.34	77.6

Benchmarks on BioMedical NER Datasets

NER Architecture

Char-CNN-BiLSTM

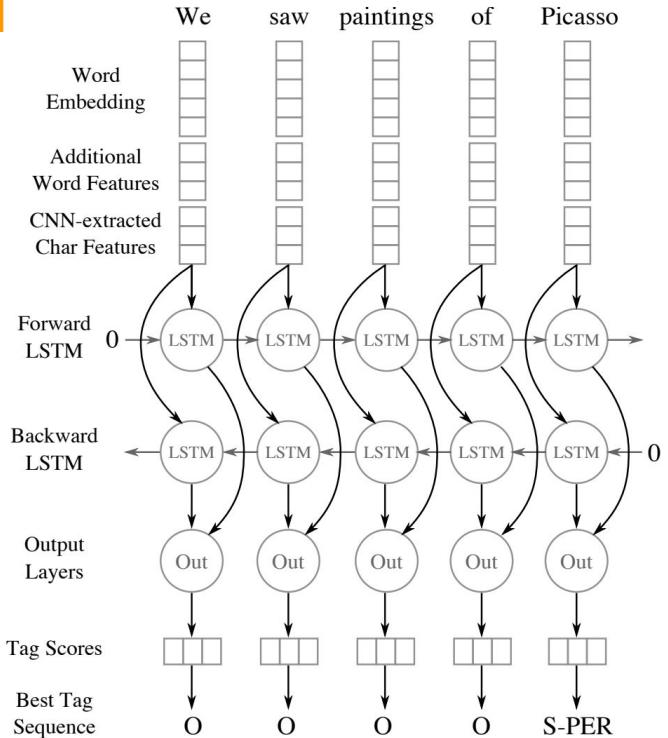
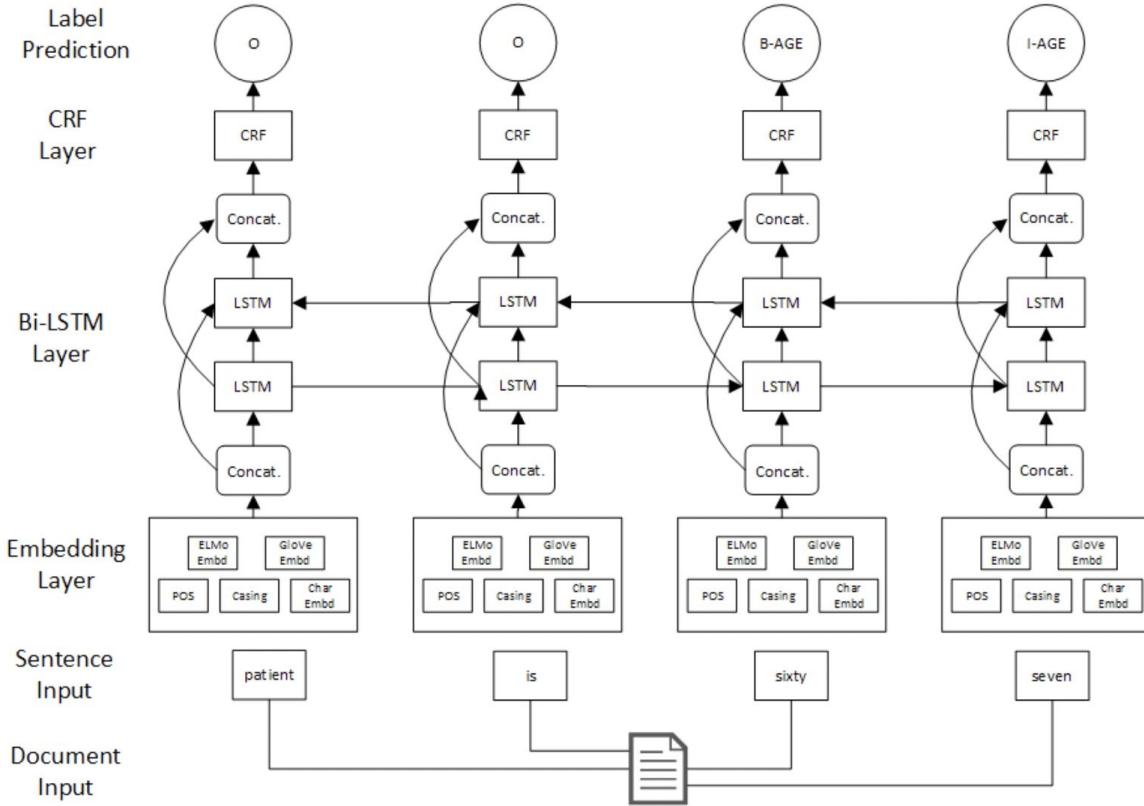


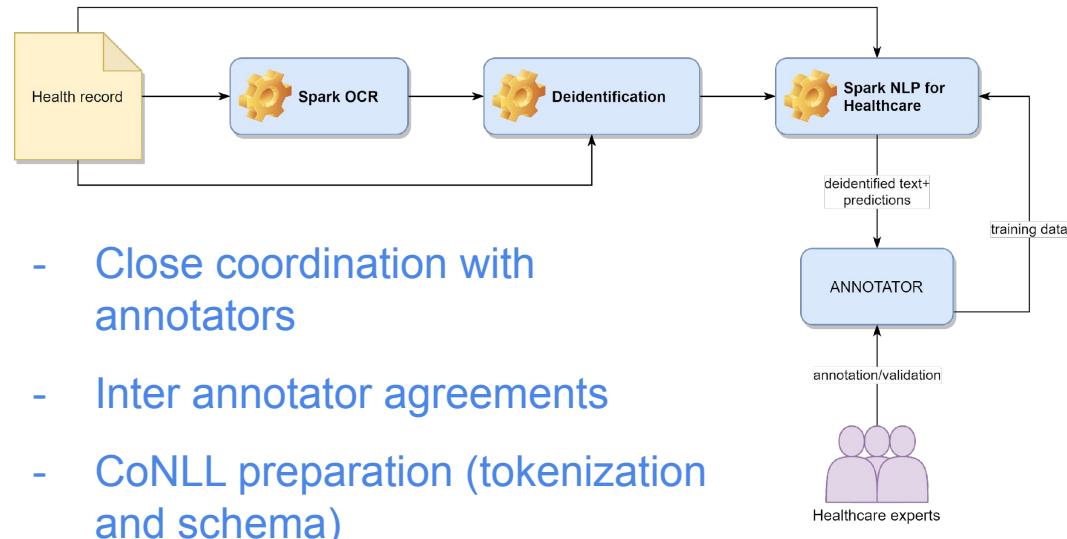
Figure 1: The (unrolled) BLSTM for tagging named entities. Multiple tables look up word-level feature vectors. The CNN (Figure 2) extracts a fixed length feature vector from character-level features. For each word, these vectors are concatenated and fed to the BLSTM network and then to the output layers (Figure 1).

John	B-PER
Smith	I-PER
lives	O
in	O
New	B-LOC
York	I-LOC

John Smith \Rightarrow PERSON
 New York \Rightarrow LOCATION

word	POS_tag	chunk_tag	NER_tag
She	PRP	O	B-person
presented	VBD	B-VP	O
with	IN	B-VP	O
left	JJ	B-NP	B-problem
upper	JJ	I-NP	I-problem
quadrant	NN	I-NP	I-problem
pain	NN	I-NP	I-problem
as	RB	O	O
well	RB	O	O
as	IN	B-VP	O
nausea	NN	B-NP	B-problem

NER in Healthcare



- Close coordination with annotators
- Inter annotator agreements
- CoNLL preparation (tokenization and schema)

She returns today for ongoing evaluation of her EGFR mutated, stage 4 lung cancer with metastasis to her L2 vertebrae and her lungs bilaterally.

Bone negative for metastatic disease.

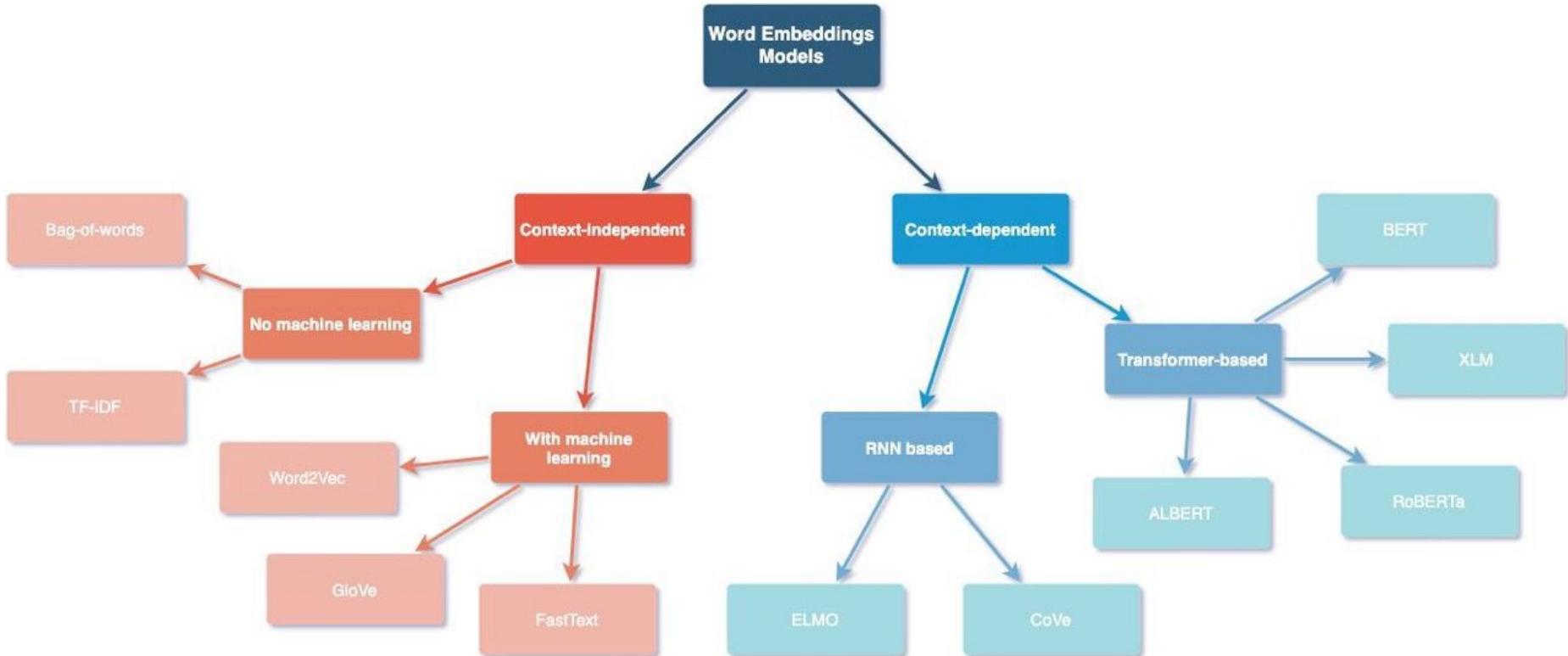
Patient denies any family history of cancer.

NER-DL in Spark NLP

Char-CNN-BiLSTM

	F1 : Tokens	F2 : Casing	F3 : POS	F4 : Char CNN	Labels
The					O
company					O
XYZ					Company
Private					Company
Limited					Company
works					O
in					O
the					O
health					Activity
sector					Activity
in					O
Europe					Location

Clinical Word/Sentence Embeddings



Clinical Word/Sentence Embeddings

Clinical Glove
(200d)

PubMed + PMC

ICDO Glove
(200d)

PubMed + ICD10
UMLS + MIMIC III

Sent BERT

BioBert finetuned on
NLI and MedNLI

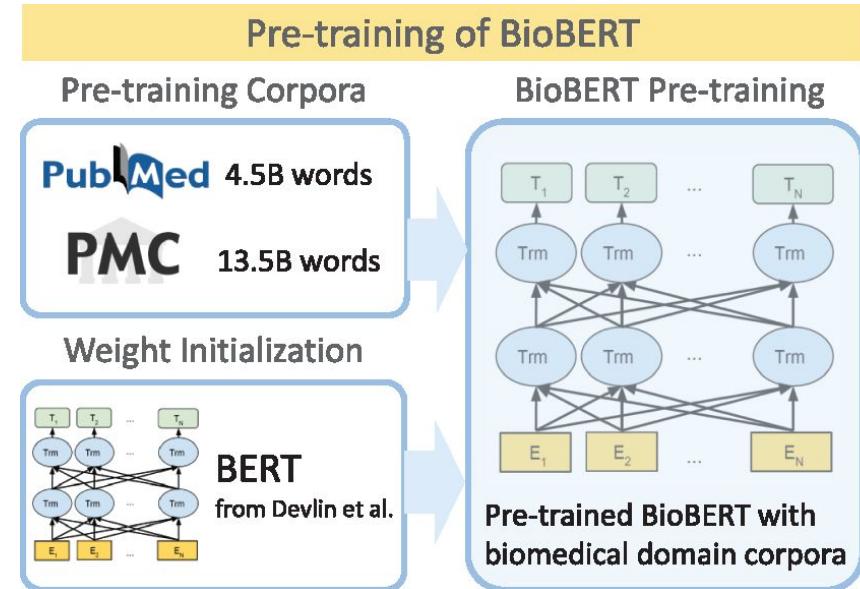
Bio/Clinical BERT

Fine tuned Pubmed + PMC + Discharge summaries



PubMed abstracts and PMC full-text articles

<https://www.nlm.nih.gov/bsd/difference.html>



Part - II

- ❖ Assertion Status detection

Assertion Status Detection

"Mother with a lung cancer, a patient is diagnosed as breast cancer in 1991 and then admitted to Mayo Clinic in Oct 2000, went under chemo for 6 months, discharged in April 2001 with a prescription of 2 mg metformin 3x per day. No sign of gynecological disorder but she suffers from acute cramps if she doesn't take her drug."

Chunk	Entity	Assertion
lung cancer	Oncological	Family
breast cancer	Oncological	Past
chemo	Treatment	Past
gynecological disorder	Disorder	Absent
acute cramps	Disorder	Conditional

```
clinical_assertion = AssertionDLModel\  
    .pretrained("assertion_dl", "en", "clinical/models")\  
    .setInputCols(["sentence", "ner_chunk", "embeddings"]) \  
    .setOutputCol("assertion")
```

Classify the assertions made on given medical concepts as being

- present,
- absent,
- possible,
- conditionally present under certain circumstances,
- hypothetically present at some future point, mentioned in the patient report but associated with someone else.

Assertion Status Detection

- The deep neural network architecture for assertion status detection in Spark NLP is based on a Bi-LSTM framework, and is a modified version of the architecture proposed by Federico Fancellu, Adam Lopez and Bonnie Webber ([Neural Networks For Negation Scope Detection](#)).
- In the proposed implementation, input units depend on the target tokens (a named entity) and the neighboring words that are explicitly encoded as a sequence using word embeddings.
- Similar to paper mentioned above, it is observed that that 95% of the scope tokens (neighboring words) fall in a window of 9 tokens to the left and 15 to the right of the target tokens in the same dataset. Therefore, the same window size was implemented,
- following parameters were used: learning rate 0.0012, dropout 0.05, batch size 64 and a maximum sentence length 250.
- The model has been implemented within Spark NLP as an annotator called AssertionDLModel. After training 20 epoch and measuring accuracy on the official test set, this implementation exceeds the latest state-of-the-art accuracy benchmarks

Assertion Label	Spark NLP	Latest Best
Absent	0.944	0.937
Someone-else	0.904	0.869
Conditional	0.441	0.422
Hypothetical	0.862	0.890
Possible	0.680	0.630
Present	0.953	0.957
micro F1	0.939	0.934

Mother with a lung cancer,

AssertionDLModel

	model_name	Predicted Entities
1	assertion_dl	Present, Absent, Possible, Planned, Someoneelse, Past, Family, None, Hypothetical
2	assertion_dl_biobert	absent, present, conditional, associated_with_someone_else, hypothetical, possible
3	assertion_dl_healthcare	absent, present, conditional, associated_with_someone_else, hypothetical, possible
4	assertion_dl_large	hypothetical, present, absent, possible, conditional, associated_with_someone_else
5	assertion_dl_radiology	Confirmed, Suspected, Negative
6	assertion_jsl	Present, Absent, Possible, Planned, Someoneelse, Past, Family, None, Hypothetical
7	assertion_jsl_large	present, absent, possible, planned, someoneelse, past
8	assertion_ml	Hypothetical, Present, Absent, Possible, Conditional, Associated_with_someone_else

Part - III

- ❖ Entity Resolution (ICD1-, RxNorm, Snomed, etc.)

Entity Resolution in Spark NLP for Healthcare

This is a 52-year-old AGE inmate with a 5.5 MEASUREMENTS cm UNITS diameter nonfunctioning mass SYMPTOM in his GENDER right DIRECTION adrenal BODYPART shown by CT of IMAGINGTEST abdomen BODYPART . During the umbilical hernia repair PROCEDURE , the harmonic scalpel MEDICAL_DEVICE was utilised superiorly DIRECTION and laterally DIRECTION .

Entity Resolution

ICD10CM, Snomed, RxNorm, CPT-4, ICD10CPS, RxCUI, ICDO

Term	Vocab	Code	Explanation (ground truth)
CT	CPT-4	76497	Unlisted computed tomography procedure
CT of abdomen	CPT-4	74150	Computed tomography, abdomen; without contrast material

weighted Sentence Chunk Embeddings (after 3.2.0)

Term	Vocab	Code	Explanation (ground truth)
CT	CPT-4	74150	Computed tomography, abdomen; without contrast material

Clinical Entity Resolution

ICD10CM

- sbiobertresolve_icd10cm_augmented
- sbiobertresolve_icd10pcs
- sbiobertresolve_icd10cm_augmented_billable_hcc
- sbiobertresolve_icd10cm
- sbiobertresolve_icd10cm_slim_normalized
- sbiobertresolve_icd10cm_slim_billable_hcc
- sbertrresolve_icd10cm_slim_billable_hcc_med
- sbiobertresolve_icd10cm_generalised

CPT

- sbiobertresolve_cpt
- sbiobertresolve_cpt_procedures_augmented
- sbiobertresolve_cpt_augmented
- sbiobertresolve_cpt_procedures_measurements_augmented

Snomed

- sbiobertresolve_snomed_auxConcepts_int
- sbiobertresolve_snomed_findings
- sbiobertresolve_snomed_findings_int
- sbiobertresolve_snomed_auxConcepts
- sbertrsolve_snomed_bodyStructure_med
- sbiobertresolve_snomed_bodyStructure
- sbiobertresolve_snomed_findings_aux_concepts
- sbertrsolve_snomed_conditions

RxNorm

- sbiobertresolve_rxnorm
- demo_sbiobertresolve_rxnorm
- sbiobertresolve_rxnorm_dispo
- sbiobertresolve_rxnorm_disposition
- sbertrsolve_rxnorm_disposition
- sbiobertresolve_rxnorm_ndc

LOINC

- sbluebertresolve_loinc
- sbiobertresolve_loinc

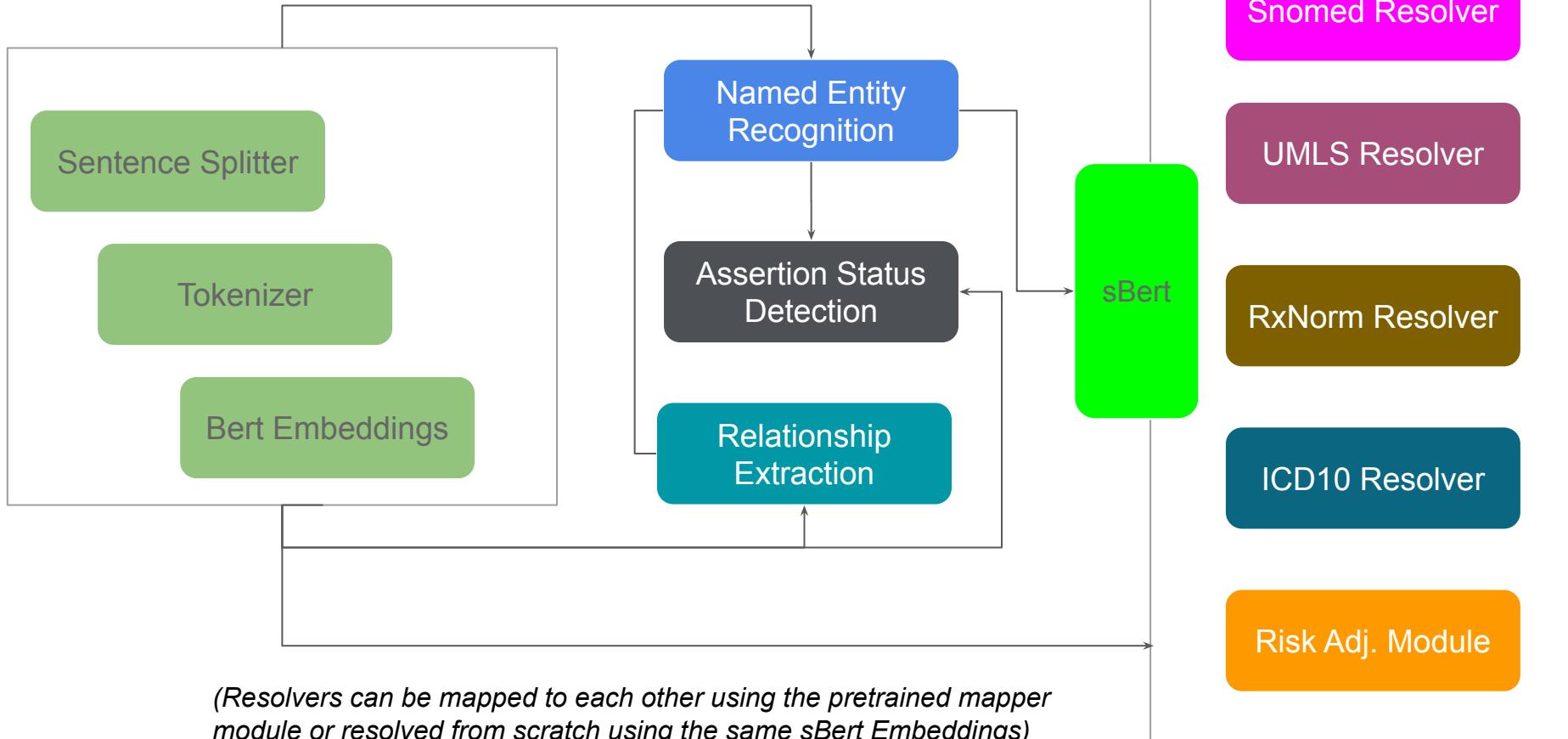
UMLS

- sbiobertresolve_umls_findings
- sbiobertresolve_umls_major_concepts
- sbiobertresolve_umls_disease_syndrome
- sbiobertresolve_umls_clinical_drugs

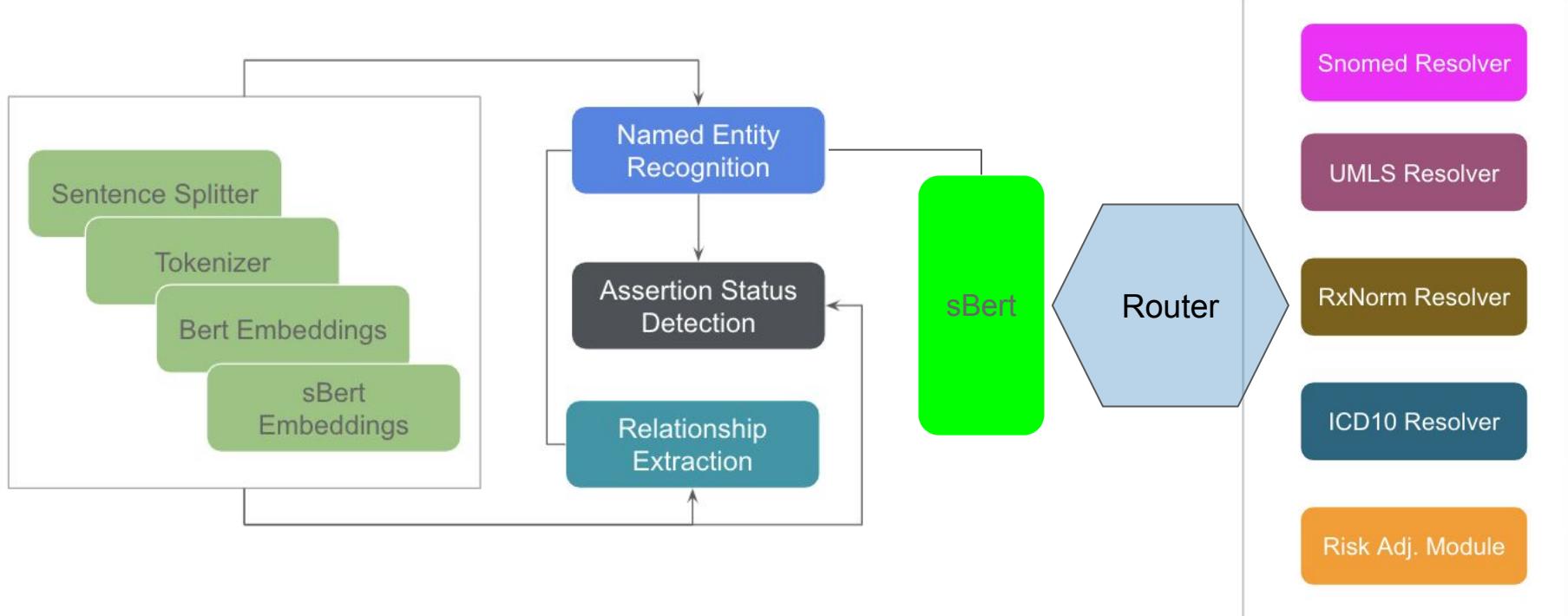
mapping

- icd10cm_snomed_mapping : ICD10 Codes to Snomed Codes
- snomed_icd10cm_mapping : Snomed Codes to ICD Codes
- icd10cm_umls_mapping : ICD Codes to UMLS Codes
- snomed_umls_mapping : Snomed Codes to UMLS Codes
- rxnorm_umls_mapping : RxNorm Codes to UMLS Codes
- mesh_umls_mapping : MeSH Codes to UMLS Codes
- rxnorm_mesh_mapping : RxNorm Codes to MeSH Codes

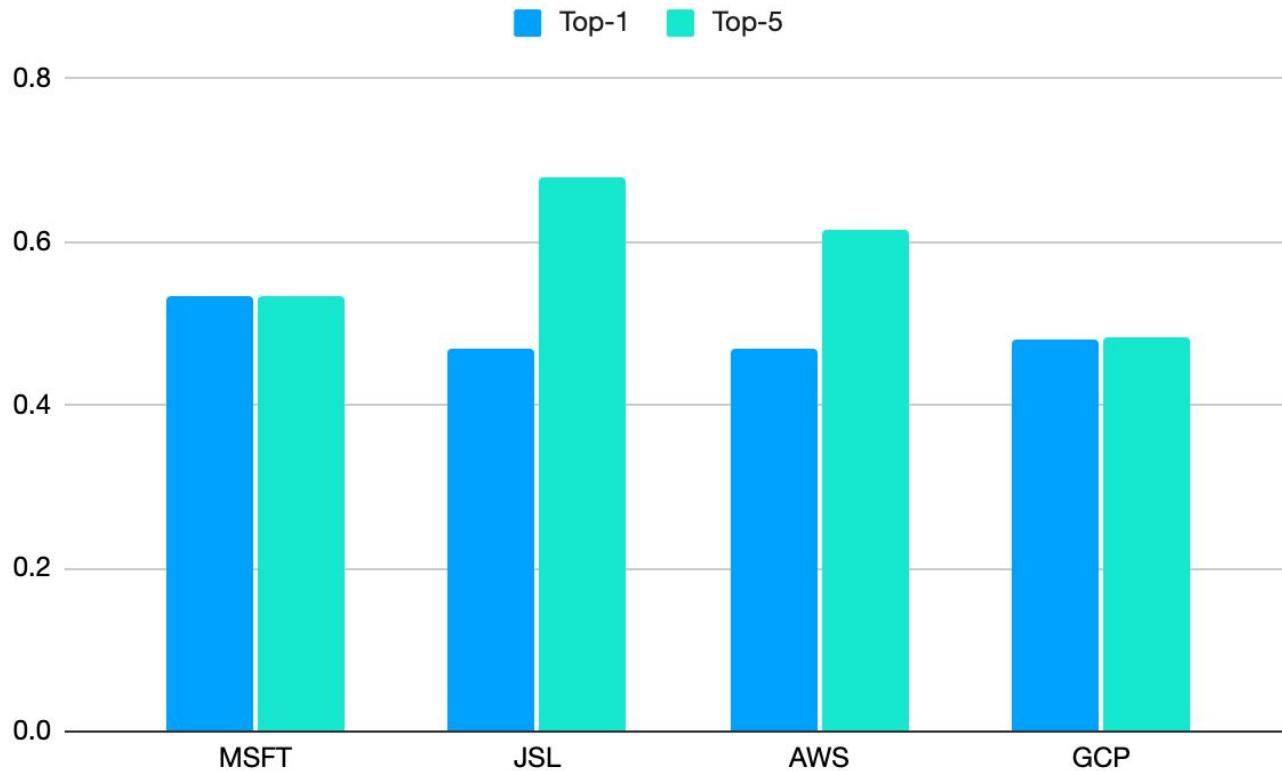
Clinical Entity Resolution



Clinical Entity Resolution



ICD10CM Benchmark Comparison

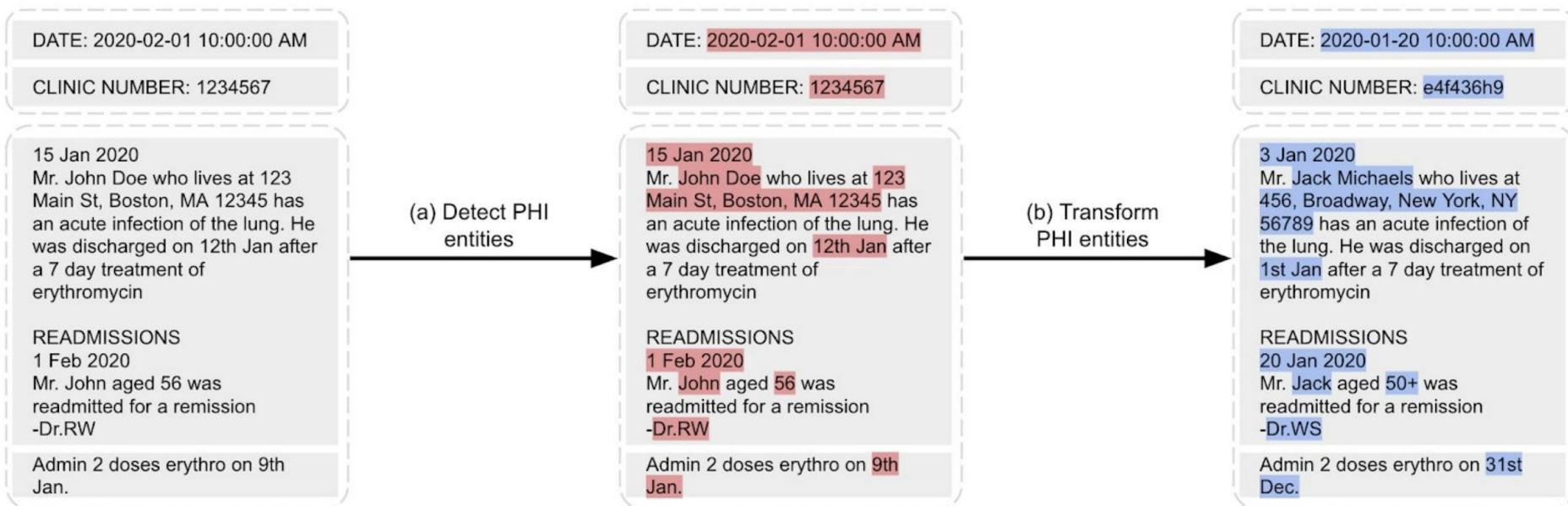


Part - IV

- ❖ De-Identification and Obfuscation of PHI data

De-Identification

* Identifies potential pieces of content with personal information about patients and remove them by replacing with semantic tags.



De-Identification

* Identifies potential pieces of content with personal information about patients and remove them by replacing with semantic tags.

Group Name	Included Entities
A (defined by the HIPAA Safe Harbor Implementation)	Age over 89, Phone/Fax numbers, Email addresses, Websites and URLs, IP Addresses, Dates, Social security numbers, Medical record numbers, Vehicle/Device numbers, Account/Certificate/License numbers, Health plan numbers, Biometric identifiers, Street addresses, City, Zip code, Employer names, Personal names of patients and family members
B	Group A, Doctor names, User IDs (of care providers), State
C	Group B, Hospital names, Country
D	Group C, Holidays, Days of the week, Occupations

De-Identification

- * Identifies potential pieces of content with personal information about patients and remove them by replacing with semantic tags.

```
A . Record date : 2093-01-13 , David Hale , M.D . , Name : Hendrickson , Ora MR . # 7194334  
Date : 01/13/93 PCP : Oliveira , 25 month years-old , Record date : 2079-11-09 . Cocke  
County Baptist Hospital . 0295 Keats Street
```

Color codes: DOCTOR, HOSPITAL, DATE, STREET, MEDICALRECORD, PATIENT,

Deidentified Text

```
['A .',  
 'Record date : <DATE> , <DOCTOR> , M.D .',  
 ', Name : <PATIENT> , <PATIENT> MR .',  
 '# <MEDICALRECORD> Date : <DATE> PCP : <DOCTOR> , 25  
month years-old , Record date : <DATE> .',  
 '<HOSPITAL> .',  
'<STREET>']
```

```
def get_deidentify_model():  
  
    custom_ner_converter = NerConverter()\  
        .setInputCols(["sentence", "token", "ner"])\\  
        .setOutputCol("ner_chunk")  
        #.setWhiteList(entity_types)  
  
    deidentify_pipeline = Pipeline(  
        stages = [  
            documentAssembler,  
            sentenceDetector,  
            tokenizer,  
            word_embeddings,  
            clinical_ner,  
            custom_ner_converter,  
            deidentification_rules  
        ])  
  
    empty_data = spark.createDataFrame([[""]]).toDF("text")  
  
    model_deidentify = deidentify_pipeline.fit(empty_data)  
  
    return model_deidentify
```

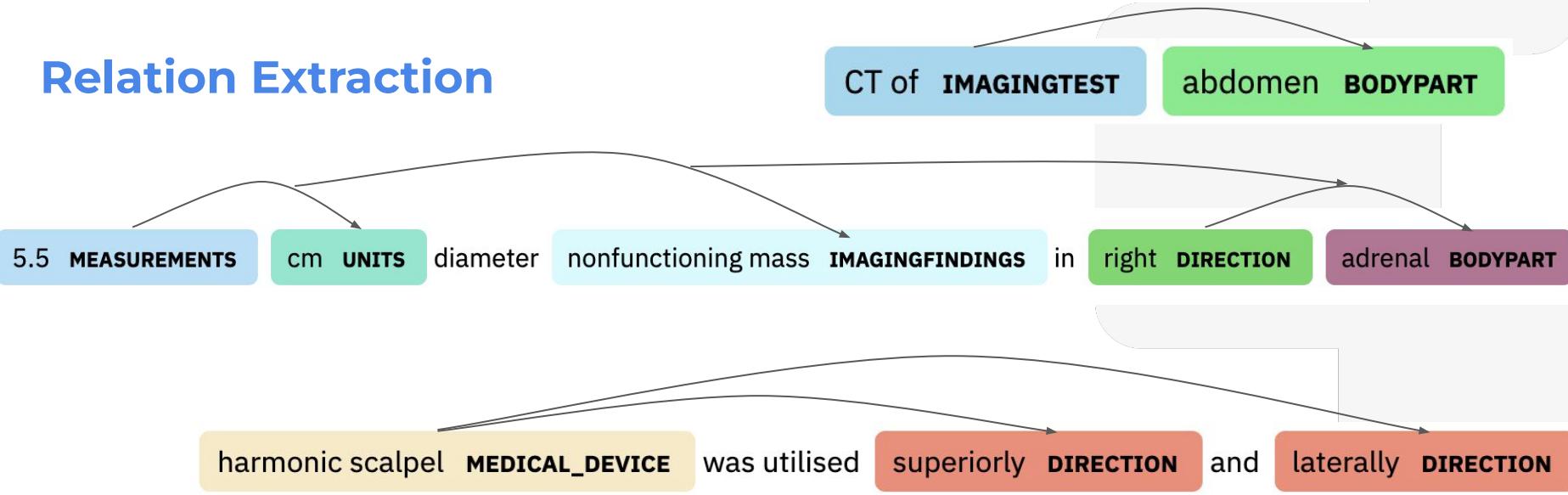
Part - V

- ❖ Relation Extraction

Clinical Relation Extraction

"This is a 52-year-old inmate with a 5.5 cm diameter nonfunctioning mass in his right adrenal shown by CT of abdomen. During the umbilical hernia repair, the harmonic scalpel was utilised superiorly and laterally."

Relation Extraction



Clinical Relation Extraction

model_name

0	re_ade_biobert
1	re_ade_clinical
2	re_bodypart_directions
3	re_bodypart_problem
4	re_bodypart_proceduretest
5	re_chemprot_clinical
6	re_clinical
7	re_date_clinical
8	re_drug_drug_interaction_clinical
9	re_human_phenotype_gene_clinical
10	re_temporal_events_clinical
11	re_temporal_events_enriched_clinical
12	re_test_problem_finding
13	re_test_result_date

14	redl_ade_biobert
15	redl_bodypart_direction_biobert
16	redl_bodypart_problem_biobert
17	redl_bodypart_procedure_test_biobert
18	redl_chemprot_biobert
19	redl_clinical_biobert
20	redl_date_clinical_biobert
21	redl_drug_drug_interaction_biobert
22	redl_human_phenotype_gene_biobert
23	redl_temporal_events_biobert

Relation	Recall	Precision	F1	SOTA
DRUG-ADE	0.66	1.00	0.80	0.76
DRUG-DOSAGE	0.89	1.00	0.94	0.91
DRUG-DURATION	0.75	1.00	0.85	0.92
DRUG-FORM	0.88	1.00	0.94	0.95*
DRUG-FREQUENCY	0.79	1.00	0.88	0.90
DRUG-REASON	0.60	1.00	0.75	0.70
DRUG-ROUTE	0.79	1.00	0.88	0.95*
DRUG-STRENGTH	0.95	1.00	0.98	0.97

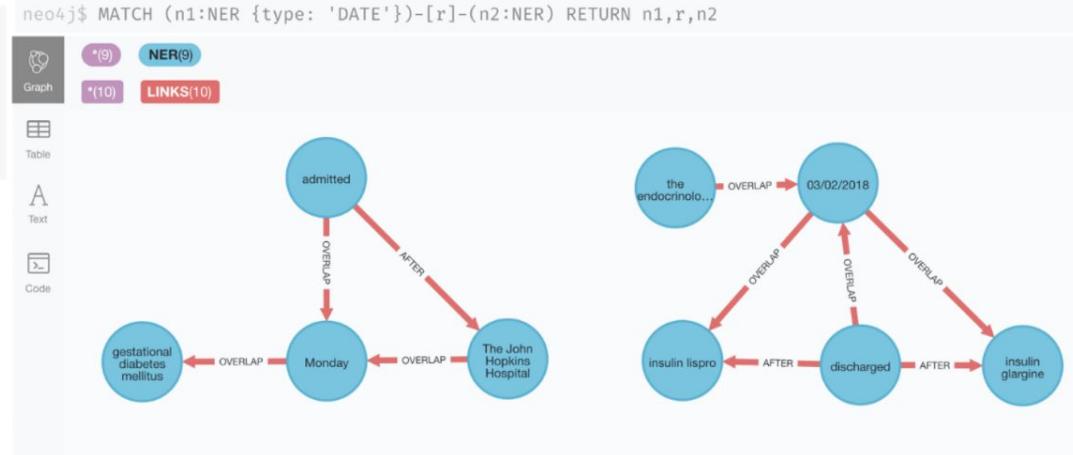
Relation	Recall	Precision	F1
OVERLAP	0.81	0.73	0.77
BEFORE	0.85	0.88	0.86
AFTER	0.38	0.46	0.43

Clinical Relation Extraction

She is admitted to The John Hopkins Hospital on Monday with a history of gestational diabetes mellitus diagnosed. She was seen by the endocrinology service and she was discharged on 03/02/2018 on 40 units of insulin glargin and 12 units of insulin lispro.

```
1 query = """
2 | MATCH (n1:NER {type: 'DATE'})-[r]-(n2:NER)
3 | RETURN n1.name AS date, r.relation AS relation, n2.name AS event
4 """
5
6 df = pd.DataFrame([dict(_) for _ in conn.query(query)])
7 df
```

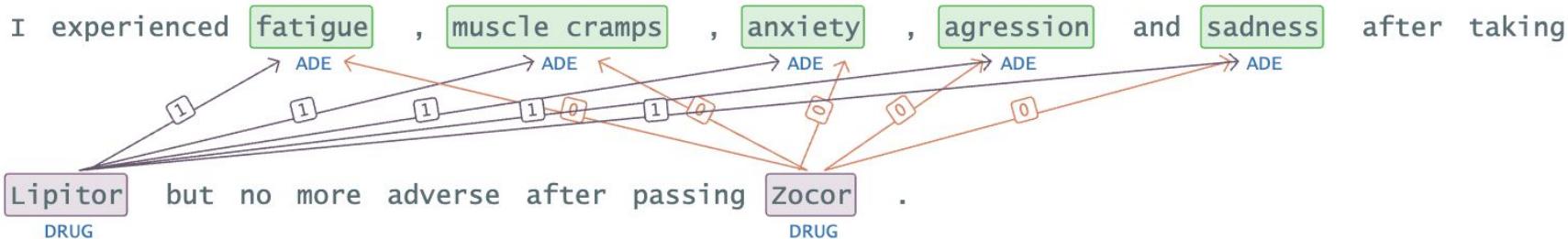
	date	relation	event
0	Monday	OVERLAP	gestational diabetes mellitus
1	Monday	OVERLAP	The John Hopkins Hospital
2	Monday	OVERLAP	admitted
3	03/02/2018	OVERLAP	insulin lispro
4	03/02/2018	OVERLAP	insulin glargin
5	03/02/2018	OVERLAP	discharged
6	03/02/2018	OVERLAP	the endocrinology service



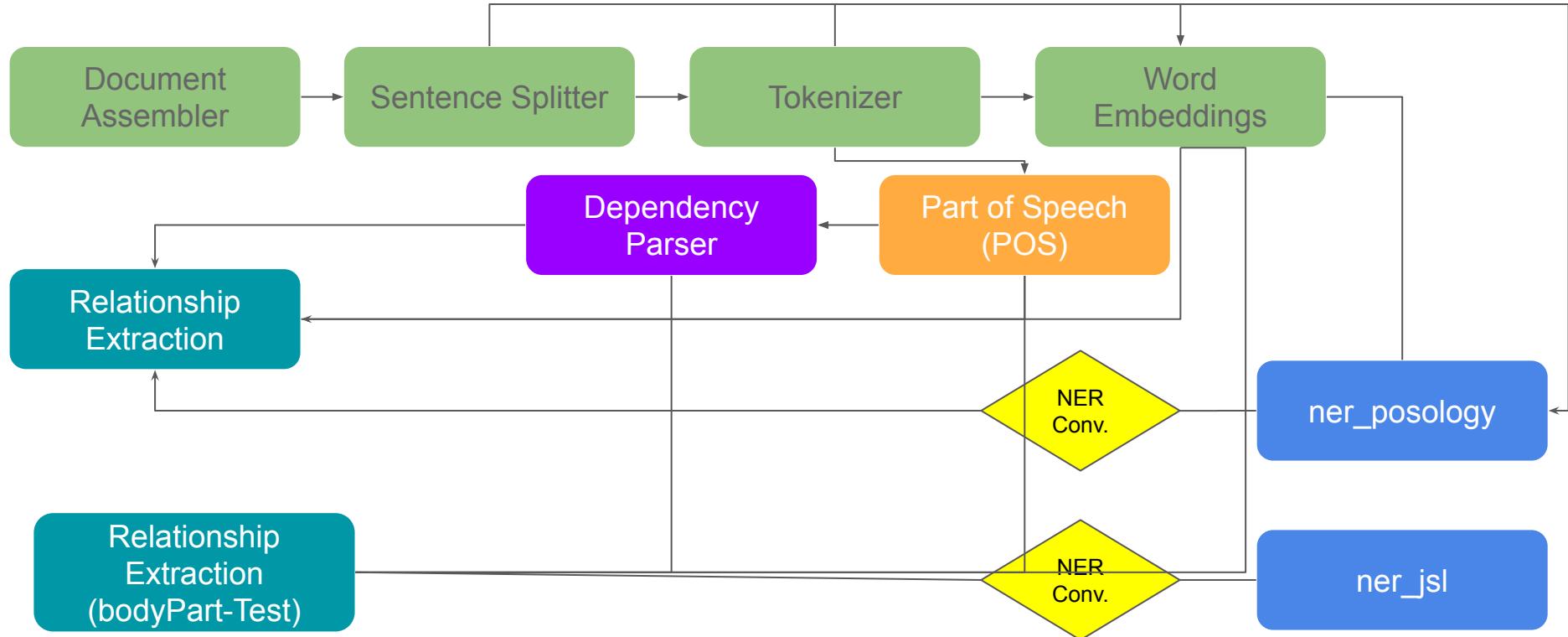
Clinical Relation Extraction

	relation	entity1	entity1_begin	entity1_end	chunk1	entity2	entity2_begin	entity2_end	chunk2	confidence
0	1	ADE	14	20	fatigue	DRUG	82	88	Lipitor	0.9996617
1	0	ADE	14	20	fatigue	DRUG	124	128	Zocor	0.9952187
2	1	ADE	23	35	muscle cramps	DRUG	82	88	Lipitor	0.9999827
3	0	ADE	23	35	muscle cramps	DRUG	124	128	Zocor	0.91462934
4	1	ADE	38	44	anxiety	DRUG	82	88	Lipitor	0.7636133
5	0	ADE	38	44	anxiety	DRUG	124	128	Zocor	0.9999691
6	1	ADE	47	55	agression	DRUG	82	88	Lipitor	0.99999833
7	0	ADE	47	55	agression	DRUG	124	128	Zocor	0.99781835
8	1	ADE	61	67	sadness	DRUG	82	88	Lipitor	1.0
9	0	ADE	61	67	sadness	DRUG	124	128	Zocor	0.9999572

I experienced fatigue, muscle cramps, anxiety, agression and sadness after taking Lipitor but no more adverse after passing Zocor.



Clinical Relation Extraction

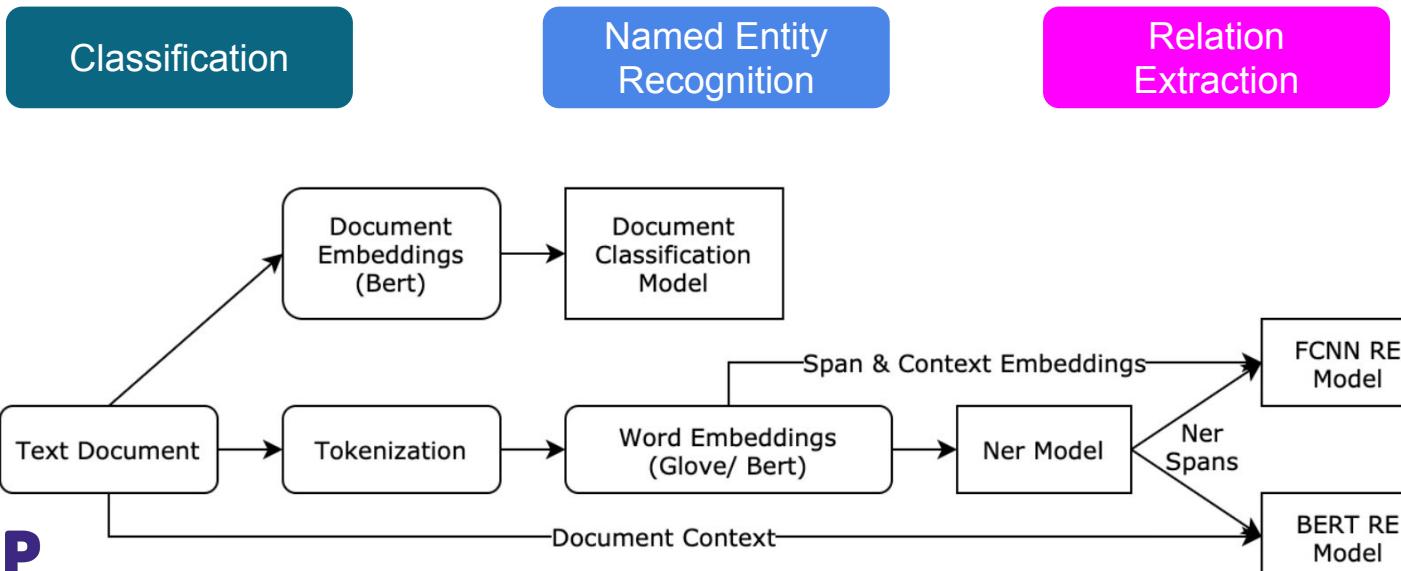


Part - VI

❖ Adverse Drug Reactions (ADR)

Adverse Drug Reactions (ADR)

Document	Class	ADE Entity	Drug Entity	relation
I feel a bit drowsy & have a little blurred vision after taking insulin.	ADE	drowsy blurred vision	insulin insulin	Positive Positive
@yho fluvastatin gave me cramps, but lipitor suits me!	ADE	cramps cramps	fluvastatin lipitor	Positive Negative
I just took advil and haven't had any gastric problems so far.	NEG	-	-	-



Adverse Drug Reactions (ADR) Benchmark



Dataset	GLoVe Embeddings						BERT Embeddings						SOTA	
	Precision		Recall		F1		Precision		Recall		F1		F1	
	strict	relax	strict	relax	strict	relax	strict	relax	strict	relax	strict	relax		
ADE	88.32	93.77	89.26	94.80	88.78	94.27	90.0	94.47	93.56	98.22	91.75	96.31	91.3	
	87.81	93.59	88.81	94.66	88.30	94.12	89.6	94.37	93.18	98.13	91.36	96.21		
CADEC	78.14	89.04	77.14	88.01	77.62	88.50	78.53	88.63	79.03	89.32	78.76	88.95	71.9	
	71.87	86.36	71.67	86.13	71.75	86.23	72.38	86.14	73.64	87.66	72.99	86.88		
SMM4H	81.43	90.33	72.17	78.51	76.01	83.41	78.5	86.76	75.23	82.42	76.73	84.41	67.81	
	83.66	91.34	71.31	77.86	76.99	84.06	79.13	87.09	74.33	81.81	76.65	84.36		

Table 2: NER metrics on benchmark datasets. For each dataset, macro and micro averaged scores are displayed on first and second row respectively. SOTA metrics for ADE, CADEC, and SMM4H are obtained from (Yan et al. 2021), (Stanovsky, Gruhl, and Mendes 2017), and (Ge et al. 2020) respectively, and are macro-averaged.

Named Entity Recognition (NER)

Adverse Drug Reactions (ADR) Benchmark



Dataset	GLoVe (Avg.) Embeddings			BERT (Avg.) Embeddings			BERT Sentence Embeddings			SOTA
	Precision	Recall	F1	Precision	Recall	F1	Precision	Recall	F1	F1
ADE	75.96	79.53	76.86	76.91	84.96	79.37	87.41	84.72	85.96	87.0
	86.84	81.22	83.43	88.13	84.38	85.38	90.97	91.20	91.03	
CADEC	85.29	84.24	84.71	86.50	86.11	86.30	87.13	86.32	86.69	81.5
	85.99	86.10	86.0	87.38	87.43	87.40	87.78	87.86	87.79	

Table 1: Classification Metrics on benchmark datasets. For each dataset, Macro and Micro averaged scores are displayed on first and second row respectively. SOTA metrics for ADE and CADEC datasets are obtained from (Huynh et al. 2016) and (Alimova and Tutubalina 2019) respectively.

Dataset	Base (FCNN) RE			BERT RE			SOTA
	Precision	Recall	F1	Precision	Recall	F1	F1
ADE Corpus	69.11	86.22	74.70	81.31	79.03	80.10	83.74
ADE Enriched with n2c2	89.01	89.44	89.22	89.19	90.93	90.02	

Table 3: Relation Extraction performance on the ADE benchmark dataset. The test set was kept standard for a fair comparison, and all scores are macro-averaged due to high class imbalance. SOTA metrics for RE on ADE corpus as reported by (Crone 2020)

Part - VII

❖ Key Chunk Phrase Extractor

Chunk Key Phrase Extractor (KCPE)

key_phrase	source	DocumentSimilarity	MMRScore	sentence
type two diabetes mellitus	NER	0.7639750686118073	0.4583850593816694	0
subsequent type diabetes	ngrams	0.7503709443591438	0.08298243928224425	0
HTG-induced pancreatitis years	ngrams	0.6817062970203589	0.11246275270031031	0
hepatitis obesity	ngrams	0.6666053470245074	0.1177052008980295	0
mellitus diagnosed years	ngrams	0.6389213391545323	0.08129479185432026	0
history gestational diabetes	ngrams	0.6219876368539883	0.0950104202982544	0
vomiting	ngrams	0.5824238088130589	0.14864183399720493	0
admitted starvation ketosis	ngrams	0.5789875069392564	0.12008073486190007	0
five-day amoxicillin respiratory	ngrams	0.5330653868257814	0.09428153526023508	0
28-year-old female history	ngrams	0.38613601247069695	0.12987678861407687	0

YAKE

keyword	score
years prior presentation	0.006335399690627251
prior presentation	0.011644010991495998
prior presentation subsequent	0.020272229518351368
weeks prior presentation	0.020272229518351368
respiratory tract infection	0.02568455658449274
anion gap	0.025965846371439553
physical examination presentation	0.02840600503736659
obtained hours presentation	0.028532992974589392
examination presentation significant	0.028532992974589392
prior	0.029673513395379065
years prior	0.03008818777992058
anion gap elevated	0.031568192739369824

CKPE

key_phrase_candidate	DocumentSimilarity
pancreatitis years prior	0.6491587146812722
diagnosed years prior	0.38594469396979897
respiratory tract infection	0.34452766290310755
patient treated insulin	0.3413457416284759
serum	0.3371024001999838
presentation revealed glucose	0.31458360368143906
examination presentation significant	0.29099950377907047
prior analysis due	0.22501711661945623
prior	0.21634008371261446
physical examination presentation	0.19165189487112474

key_phrase_candidate	source
28-year-old female history	ngram
28-year-old	NER
female history gestational	ngram
female	NER
history gestational diabetes	ngram
gestational diabetes mellitus	NER
gestational diabetes mellitus	ngram
diabetes mellitus diagnosed	ngram
mellitus diagnosed years	ngram
diagnosed years prior	ngram
eight years prior	NER
years prior presentation	ngram
prior presentation subsequent	ngram
presentation subsequent type	ngram
subsequent type diabetes	ngram
type diabetes mellitus	ngram
type two diabetes mellitus	NER
diabetes mellitus (ngram
mellitus (T2DM	ngram
(T2DM),	ngram
T2DM), prior	ngram
T2DM	NER
), prior episode	ngram
prior episode HTG-induced	ngram
episode HTG-induced pancreatitis	ngram
HTG-induced pancreatitis years	ngram
HTG-induced pancreatitis	NER
pancreatitis years prior	ngram
three years prior	NER
years prior presentation	ngram
prior presentation ,	ngram
presentation , acute	ngram
, acute hepatitis	ngram



Thank you !

Veysel Kocaman
Principal Data Scientist
John Snow Labs



Spark NLP Resources

Spark NLP Official page

Spark NLP Workshop Repo

JSL Youtube channel

JSL Blogs

Introduction to Spark NLP: Foundations and Basic Components (Part-I)

Introduction to: Spark NLP: Installation and Getting Started (Part-II)

Named Entity Recognition with Bert in Spark NLP

Text Classification in Spark NLP with Bert and Universal Sentence Encoders

Spark NLP 101 : Document Assembler

Spark NLP 101: LightPipeline

<https://www.oreilly.com/radar/one-simple-chart-who-is-interested-in-spark-nlp/>

<https://blog.dominodatalab.com/comparing-the-functionality-of-open-source-natural-language-processing-libraries/>

<https://databricks.com/blog/2017/10/19/introducing-natural-language-processing-library-apache-spark.html>

<https://databricks.com/fr/session/apache-spark-nlp-extending-spark-ml-to-deliver-fast-scalable-unified-natural-language-processing>

<https://medium.com/@saif1988/spark-nlp-walkthrough-powered-by-tensorflow-9965538663fd>

<https://www.kdnuggets.com/2019/06/spark-nlp-getting-started-with-worlds-most-widely-used-nlp-library-enterprise.html>

<https://www.forbes.com/sites/forbestechcouncil/2019/09/17/why-spark-nlp-is-the-most-widely-used-nlp-library-enterprise/>

<https://medium.com/hackernoon/mueller-report-for-nerds-spark-meets-nlp-with-tensorflow-and-bert-part-1-32490a8f8f12>

<https://www.analyticsindiamag.com/5-reasons-why-spark-nlp-is-the-most-widely-used-library-in-enterprises/>

<https://www.oreilly.com/ideas/comparing-production-grade-nlp-libraries-training-spark-nlp-and-spacy-pipelines>

<https://www.oreilly.com/ideas/comparing-production-grade-nlp-libraries-accuracy-performance-and-scalability>

<https://www.infoworld.com/article/3031690/analytics/why-you-should-use-spark-for-machine-learning.html>

Healthcare NLP Summit '22

1	 End-to-End No-Code Development of NER model for Text with Annotation Lab John Snow Labs 4:42	Using Spark NLP in R: A Drug Standardization Case Study John Snow Labs 15:00	11	 Natural Language Technologies: Current Status and Future Evolution John Snow Labs 19:54	Natural Language Technologies: Current Status and Future Evolution John Snow Labs 19:54
2	 How to Build a Foundation of AI-based Healthcare Systems Through Language Models? John Snow Labs 34:12	How to sign up for a free trial and how to use your license on COLAB John Snow Labs 1:09	12	 The Quest for Proactive and Reactive Healthcare John Snow Labs 15:31	The Quest for Proactive and Reactive Healthcare John Snow Labs 15:31
3	 Automated Patient Risk Adjustment and Medicare HCC Coding from Clinical Notes John Snow Labs 28:19	Few-Shot Text Classification in the Real-World John Snow Labs 25:16	13	 The Unified NLP Platform John Snow Labs 26:44	The Unified NLP Platform John Snow Labs 26:44
4	 End-to-End No-Code Development of Visual NER Models for PDFs and Images John Snow Labs 6:31	Medical NLP: Domain Expertise and Data Quality are Vital For Success John Snow Labs 13:50	14	 Industry Survey Analysis: AI in Healthcare 2022 John Snow Labs 19:59	Industry Survey Analysis: AI in Healthcare 2022 John Snow Labs 19:59
5	 A Hierarchical Approach for Automated ICD-10 Coding Using Phrase-level Attention John Snow Labs 29:04	Automatic mining of adverse drug reactions from social media posts and unstructured chats John Snow Labs 19:24	15	 Using NLP at Scale to Process Patient Charts for Identifying Patient Encounters John Snow Labs 23:54	Using NLP at Scale to Process Patient Charts for Identifying Patient Encounters John Snow Labs 23:54
6	 End-to-End No-Code Development of AI Models for Text and Images John Snow Labs 14:41	Data Centric AI for Healthcare John Snow Labs 26:23	16	 Transfer Learning From Existing Diseases Via Hierarchical Multi-Modal BERT Models to Predict COVID19 John Snow Labs 24:19	Transfer Learning From Existing Diseases Via Hierarchical Multi-Modal BERT Models to Predict COVID19 John Snow Labs 24:19
7	 Opportunities and Challenges of Applying Advances in NLP to Healthcare John Snow Labs 20:38	Radiology Report Summarization John Snow Labs 36:15	17	 Supporting Mental Healthcare Delivery Using NLP John Snow Labs 25:33	Supporting Mental Healthcare Delivery Using NLP John Snow Labs 25:33
8	 Current State-of-the-Art Accuracy for Key Medical Natural Language Processing Benchmarks John Snow Labs 23:08	Entropy and Sentiment: the Anna Karenina Principle in Patient Experience Data John Snow Labs 31:06	18	 Using Spark NLP to De-Identify Doctor Notes in the German Language John Snow Labs 28:50	Using Spark NLP to De-Identify Doctor Notes in the German Language John Snow Labs 28:50
9	 Machine Reading for Precision Medicine John Snow Labs 21:50	1 Line of Code to Use 600+ State-of-the-Art Clinical & Biomedical NLP Models John Snow Labs 31:31	19	 Accelerating Use of the Digital Medical Record with Optimized Structured & Unstructured Data John Snow Labs 30:20	Accelerating Use of the Digital Medical Record with Optimized Structured & Unstructured Data John Snow Labs 30:20
10	 Collaborative Healthcare NLP: Customisable NLP platforms for health and related research John Snow Labs 18:10	Cleanlab: Making AI Work with Messy, Real-World Healthcare and NLP Data John Snow Labs 23:40	20	 Is it Enough to Simply Apply Language Model for Optimal Text Classification? John Snow Labs 25:57	Is it Enough to Simply Apply Language Model for Optimal Text Classification? John Snow Labs 25:57