





Phase-2 Submission Template

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Department: ECE

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Github Repository Link: To be updated

1. Problem Statement

The rising complexity in diagnosing diseases due to massive and diverse patient data poses a significant challenge in healthcare. Early and accurate disease prediction can greatly enhance treatment success, patient care, and resource allocation. Using AI and machine learning techniques, we aim to build a predictive model that can analyze patient data and forecast potential health risks or diseases.

Type of Problem: Classification

Importance: Enhances healthcare efficiency, supports early diagnosis, reduces human error, and enables personalized treatment plans

2. Project Objectives

- Develop a machine learning model to predict diseases based on patient health data.
- Improve prediction accuracy using EDA and feature engineering.
- Prioritize model interpretability for real-world medical usage.
- Validate performance through appropriate classification metrics.

3. Flowchart of the Project Workflow

(Insert a flowchart diagram here: e.g., Data Collection -> Preprocessing ->







EDA -> Feature Engineering -> Model Building -> Evaluation -> Deployment)

4. Data Description

o Dataset Name: Disease Prediction Dataset

o Source: Kaggle

o Data Type: Structured

o Records: ~5000 patient records

• Features: ~20 features (e.g., age, gender, symptoms, medical history)

Target Variable: Disease classification

o Nature: Static dataset

5. Data Preprocessing

- Missing values handled via median/mode imputation.
- Removed duplicate entries based on patient ID and symptom combination.
- Outliers treated using IQR for continuous variables.
- Label encoding for categorical variables like gender and symptoms.
- Features normalized using MinMaxScaler for model stability.

6. Exploratory Data Analysis (EDA)

- Univariate: Age and symptom distribution visualized with histograms and boxplots.
- Bivariate: Heatmaps revealed strong correlation between symptoms and target disease.
- Insights: Symptoms like chest pain, fatigue, and high sugar levels were strong indicators.

7. Feature Engineering

- Created symptom count feature.
- Transformed date of admission into weekday/weekend feature.
- Applied PCA to reduce dimensionality while preserving 95% variance.







8. Model Building

• Algorithms used: Random Forest, XGBoost

• Data split: 80% train, 20% test (stratified)

• Evaluation Metrics: Accuracy, Precision, Recall, F1-score

• Performance:

o Random Forest: 91% Accuracy

• XGBoost: 93% Accuracy

9. Visualization of Results & Model Insights

Confusion matrix showed high precision for critical diseases.

■ ROC curve: AUC > 0.9 for both models.

• Feature importance highlighted top symptoms like chest pain, blood pressure, sugar level.

10. Tools and Technologies Used

Language: Python

Notebook: Google Colab

Libraries: pandas, numpy, matplotlib, seaborn, scikit-learn, XGBoost

• Visualization Tools: matplotlib, seaborn, Plotly

11. Team Members and Contributions

S.Thirulochine: Data Cleaning, Model Building

V.Sandhiya: EDA, Feature Engineering

M.Murshitha: Documentation, Visualization