# **CLINICAL REVIEW REPORT**

Al-Assisted Osteoarthritis Assessment

#### FOR HEALTHCARE PROVIDER REVIEW

## **REVIEW STATUS**

Report Generated:	July 24, 2025 at 05:23 PM	
Reviewing Physician:		
Clinical Approval:	■ APPROVED ■ NEEDS REVISION ■ REJECTED	
Date Reviewed:		
Signature:		

### **PATIENT SUMMARY**

Patient Name:	Jennifer Lee
Age:	59 years
Gender:	Female
Date of Birth:	Not specified
Occupation:	Retail Manager
BMI:	27.9
Activity Level:	Moderate

#### **CLINICAL HISTORY**

Current Symptoms:	Daily knee pain, Difficulty with prolonged standing
Comorbidities:	Hypertension, Anxiety
Medical History:	Hypertension, Anxiety
<b>Current Medications:</b>	Amlodipine, Sertraline, Naproxen

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# **AI ANALYSIS RESULTS**

X-ray Classification:	Mild
Kellgren-Lawrence Grade:	Unknown
Al Model Confidence:	38.7%
Clinical Description:	Mild osteoarthritis with minor joint changes
Model Architecture:	Deep Learning Ensemble
Analysis Timestamp:	2025-07-24 17:23:14
Quality Assurance:	■ Image quality adequate ■ Positioning acceptable
Clinical Correlation:	■ Consistent with symptoms ■ Inconsistent - review needed

#### **CLINICAL ASSESSMENT**

#### **AI-Generated Clinical Analysis:**

Clinical Note:

Subject: Clinical Analysis of Al-Assisted Osteoarthritis Assessment

Patient: 59-year-old female, Retail Manager BMI: 27.9 Activity Level: Moderate Symptoms: Daily knee pain, difficulty with prolonged standing Comorbidities: Hypertension, Anxiety

Al Analysis Results: Classification: Mild osteoarthritis Confidence: 38.7% Model Description: Mild osteoarthritis with minor joint changes

- 1. Assessment of AI prediction reliability: The AI model has classified the patient's condition as mild osteoarthritis with a relatively low confidence level of 38.7%. Given the patient's age, BMI, and symptoms, this prediction is plausible but should be interpreted with caution due to the low confidence score.
- 2. Clinical correlation between imaging findings and patient symptoms: The patient's symptoms of daily knee pain and difficulty with prolonged standing are consistent with the Al's prediction of mild osteoarthritis. However, the correlation between imaging findings and symptoms should be confirmed with a physical examination and possibly additional imaging.
- 3. Risk factors present in this patient: The patient's age, female gender, and elevated BMI are risk factors for osteoarthritis. Additionally, her occupation as a retail manager, which likely involves prolonged standing, may contribute to her symptoms.
- 4. Differential diagnosis considerations: While osteoarthritis is a likely diagnosis, other conditions such as rheumatoid arthritis, gout, or patellofemoral pain syndrome should also be considered, particularly given the low confidence of the AI prediction.
- 5. Recommendations for clinical validation or additional imaging: Given the low confidence score of the AI prediction, further clinical validation is recommended. This could include a physical examination, laboratory tests (such as ESR, CRP, and rheumatoid factor), and additional imaging (such as MRI) if necessary.
- 6. Treatment pathway appropriateness assessment: If the diagnosis of mild osteoarthritis is confirmed, a treatment pathway including weight management, physical therapy, and non-steroidal anti-inflammatory drugs (NSAIDs) would be appropriate.
- 7. Follow-up and monitoring recommendations: Regular follow-ups should be scheduled to monitor the patient's symptoms and response to treatment. If symptoms persist or worsen, referral to an orthopedic surgeon for possible surgical intervention may be necessary.
- 8. Quality assurance notes for the AI prediction: While the AI model's prediction is consistent with the patient's symptoms and risk factors, the low confidence score suggests that the model may not have had sufficient data to make a reliable prediction. The model's performance should be monitored and evaluated regularly to ensure its accuracy and reliability.

In conclusion, the Al's prediction of mild osteoarthritis in this patient is plausible but should be confirmed with further clinical evaluation. The patient's risk factors and symptoms support this diagnosis, but the low confidence score of the Al prediction necessitates caution in its interpretation.

#### TREATMENT PLAN ASSESSMENT

Primary Treatment Approach: Not specified

#### **CLINICAL DECISION SUPPORT**

Confidence Assessment:	■ High (>90%) ■ Moderate (70-90%) ■ Low (<70%)	
Requires Additional Imaging:	■ Yes ■ No	
Specialist Referral Needed:	■ Rheumatology ■ Orthopedics ■ Pain Managemen	t ■ None
Treatment Plan Approval:	■ Approve as suggested ■ Modify ■ Create new pla	n
Follow-up Interval:	■ 2 weeks ■ 4 weeks ■ 3 months ■ 6 months	
Patient Education Provided:	■ Yes ■ No ■ Scheduled	

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dditional clinical observations and modifications:				

#### **CLINICAL RED FLAGS**

■■ Monitor for: Severe uncontrolled pain, signs of infection, significant functional decline, neurological symptoms, inability to bear weight, suspected fracture

#### **CLINICAL APPROVAL**

Physician Name:	
Medical License #:	
Signature:	

Date:	
Next Review Date:	

This Al-assisted analysis is intended to support clinical decision-making and must be reviewed by a qualified healthcare provider. The final diagnosis and treatment decisions remain the responsibility of the attending physician.

Generated by Osteoarthritis Clinical Decision Support System | Report ID: 20250724\_172314