# SeleneX Mini-Prototype — Model Card

#### **Model Overview**

**Purpose.** Assist clinicians by predicting benign vs. malignant ovarian tumors from ultrasound images and basic biomarkers (Age, CA-125, BRCA).

Intended Use. Research/educational prototype; not a medical device.

Out of Scope. Autonomous diagnosis, triage, or treatment decisions.

#### **Data**

**Image Modality.** MMOTU 2D ovarian ultrasound images (JPG).

Labels. Case-level benign/malignant derived from provided class IDs.

**Tabular Modality.** Synthetic biomarkers aligned to image IDs: Age (28–78), CA-125 (5–35 for benign; 35–600 malignant, skewed higher), BRCA (0/1; 10–15% positive with higher prevalence among malignant).

Splits. Train 70%, Val 15%, Test 15% with effort to maintain case-level consistency.

## **Model Architectures**

- Image-only: Lightweight CNN (3 conv blocks, GAP, dense, sigmoid).
- Tabular-only: MLP with two hidden layers, sigmoid output.
- Fused: Parallel encoders (CNN + MLP), concatenation, dense, sigmoid.

# **Training & Tuning**

**Objective.** Binary cross-entropy; monitor ROC-AUC on validation for early stopping.

**Regularization.** Data augmentation (rot/shift/flip/brightness), optional dropout/L2, class weights for imbalance.

**Optimization.** Adam, batch size 32, epochs with early stopping.

### **Evaluation**

Report the following on the held-out test set:

- Threshold-agnostic: ROC-AUC.
- Thresholded (default 0.5 or tuned): Accuracy, Precision, Recall, F1.
- **Diagnostics:** ROC curves; confusion matrices per model.

#### Placeholder Metrics (replace with your results):

Model	Acc	Prec (Malig)	Rec (Malig)	F1 (Malig)	ROC-AUC
Image-only	_	_	_	_	_
Tabular-only	_	_	_	_	_
Fused	_	_	_	_	_

#### **Intended Users & Context**

Radiology/ML researchers exploring multimodal diagnostic pipelines. Requires expert oversight; outputs are decision support, not determinations.

#### **Ethical Considerations**

**Biases.** Synthetic biomarkers may not match real distributions; demographic generalization unknown.

**Harms.** False negatives may delay treatment; false positives may drive unnecessary anxiety or tests.

# Limitations

- · Small dataset; potential overfitting.
- Ultrasound variability across devices/sites not fully represented.
- Synthetic tabular features with a hard CA-125 cutoff.
- No clinical covariates beyond Age/CA-125/BRCA.

# **Disclaimer**

This prototype is for research/education only and is **not** FDA/CE approved. Do not use for clinical diagnosis or patient management.