

## DEVELOPMENT TESTING :UNIT TESTING

### Random Forest Classifier for CARDIAC Disease Prediction

This document provides documentation for a Random Forest Classifier model developed to predict the presence of heart disease based on a set of clinical parameters. The model was trained using data from the [Heart Disease UCI dataset](#).

#### Dataset

- **Source:** The dataset used for training the model is obtained from a CSV file named "heart.csv".
- **Features:** The dataset consists of various clinical parameters including age, sex, chest pain type, resting blood pressure, serum cholesterol level, fasting blood sugar, resting electrocardiographic results, maximum heart rate achieved, exercise-induced angina, ST depression induced by exercise, slope of the peak exercise ST segment, number of major vessels colored by fluoroscopy, and thalassemia.
- **Target Variable:** The target variable is "target", indicating the presence (1) or absence (0) of heart disease.

RangeIndex: 303 entries, 0 to 302

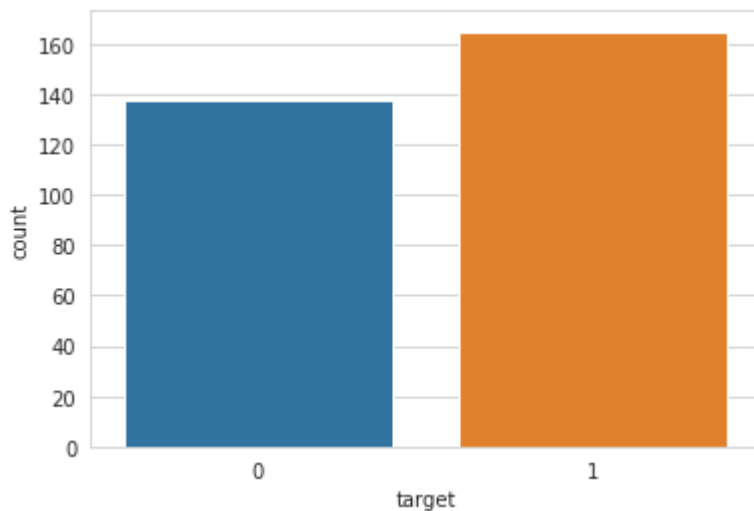
Data columns (total 14 columns):

#	Column	Non-Null Count	Dtype
0	age	303 non-null	int64
1	sex	303 non-null	int64
2	cp	303 non-null	int64
3	trestbps	303 non-null	int64

4 chol 303 non-null int64  
5 fbs 303 non-null int64  
6 restecg 303 non-null int64  
7 thalach 303 non-null int64  
8 exang 303 non-null int64  
9 oldpeak 303 non-null float64  
10 slope 303 non-null int64  
11 ca 303 non-null int64  
12 thal 303 non-null int64  
13 target 303 non-null int64

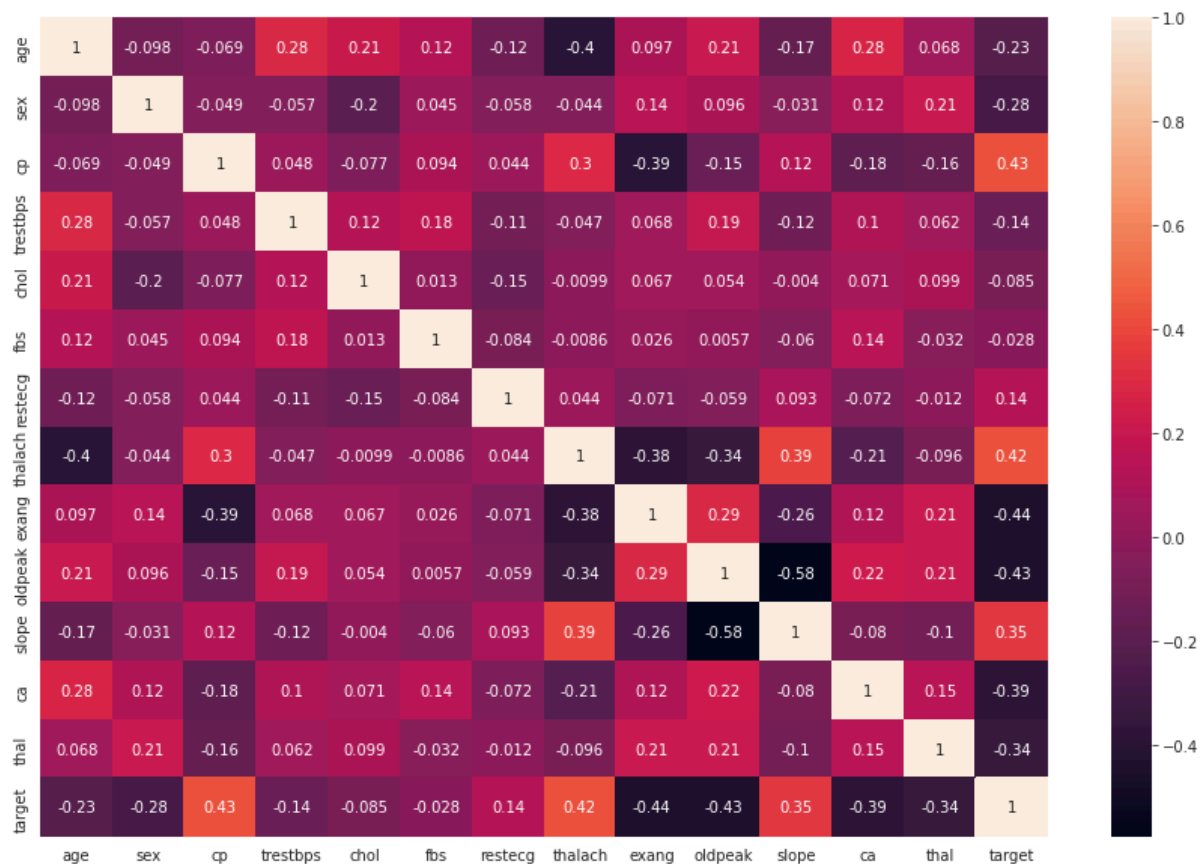
dtypes: float64(1), int64(13)

memory usage: 33.3 KB



## Preprocessing

- The dataset is loaded into a pandas DataFrame.
- Categorical and continuous variables are identified and separated.
- Correlation heatmap is plotted to visualize the correlation between features.



## Model Training

- The dataset is split into training and testing sets using an 80-20 split ratio.
- A Random Forest Classifier model is trained using the training data.
- Initial model performance is evaluated using accuracy score and confusion matrix.

## CONFUSION MATRIX:

```
array([[24, 5],
       [ 6, 26]])
```

**Accuracy of model is 81.97%**

## Hyperparameter Tuning

- Randomized Search Cross Validation is performed to find the optimal hyperparameters for the Random Forest Classifier.

- The best parameters obtained from the search are used to initialize a new Random Forest Classifier.
- The model is trained with the optimal hyperparameters.

## Evaluation

- The final model is evaluated on the test set using accuracy score and confusion matrix.
- Accuracy is calculated to measure the proportion of correctly classified instances.

array([[24, 5],

[ 5, 27]])

**Accuracy is 83.61%**

## Model Persistence

- The trained model is serialized using pickle and saved as "heart.pkl" for future use.

## Conclusion

- The Random Forest Classifier model demonstrates promising performance in predicting heart disease based on clinical parameters.

# Breast Cancer Detection Model Report

## Introduction

This report presents the development and evaluation of a machine learning model for the prediction of breast cancer presence based on clinical features. The model was trained using data from a breast cancer dataset obtained from <https://www.kaggle.com/datasets/uciml/breast-cancer-wisconsin-data>

## Dataset

- **Source:** The dataset used for training the model is obtained from a CSV file named "cancer.csv".
- **Features:** The dataset consists of various clinical parameters including radius\_mean, texture\_mean, perimeter\_mean, area\_mean, smoothness\_mean, compactness\_mean, concavity\_mean, concave points\_mean, symmetry\_mean, fractal\_dimension\_mean, radius\_se, texture\_se, perimeter\_se, area\_se, smoothness\_se, compactness\_se, concavity\_se, concave points\_se, symmetry\_se, fractal\_dimension\_se, radius\_worst, texture\_worst, perimeter\_worst, area\_worst, smoothness\_worst, compactness\_worst, concavity\_worst, concave points\_worst, symmetry\_worst, and fractal\_dimension\_worst.
- **Target Variable:** The target variable is "diagnosis", indicating the presence (1) or absence (0) of breast cancer.

RangeIndex: 569 entries, 0 to 568

Data columns (total 33 columns):

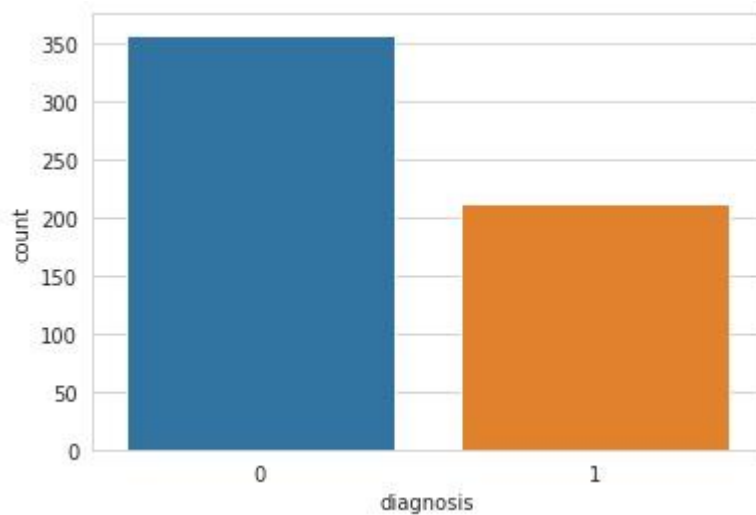
#	Column	Non-Null Count	Dtype
0	id	569 non-null	int64
1	diagnosis	569 non-null	object
2	radius_mean	569 non-null	float64
3	texture_mean	569 non-null	float64
4	perimeter_mean	569 non-null	float64

5	area_mean	569 non-null	float64
6	smoothness_mean	569 non-null	float64
7	compactness_mean	569 non-null	float64
8	concavity_mean	569 non-null	float64
9	concave points_mean	569 non-null	float64
10	symmetry_mean	569 non-null	float64
11	fractal_dimension_mean	569 non-null	float64
12	radius_se	569 non-null	float64
13	texture_se	569 non-null	float64
14	perimeter_se	569 non-null	float64
15	area_se	569 non-null	float64
16	smoothness_se	569 non-null	float64
17	compactness_se	569 non-null	float64
18	concavity_se	569 non-null	float64
19	concave points_se	569 non-null	float64
20	symmetry_se	569 non-null	float64
21	fractal_dimension_se	569 non-null	float64
22	radius_worst	569 non-null	float64
23	texture_worst	569 non-null	float64
24	perimeter_worst	569 non-null	float64
25	area_worst	569 non-null	float64
26	smoothness_worst	569 non-null	float64
27	compactness_worst	569 non-null	float64

28 concavity\_worst 569 non-null float64  
29 concave points\_worst 569 non-null float64  
30 symmetry\_worst 569 non-null float64  
31 fractal\_dimension\_worst 569 non-null float64  
32 Unnamed: 32 0 non-null float64

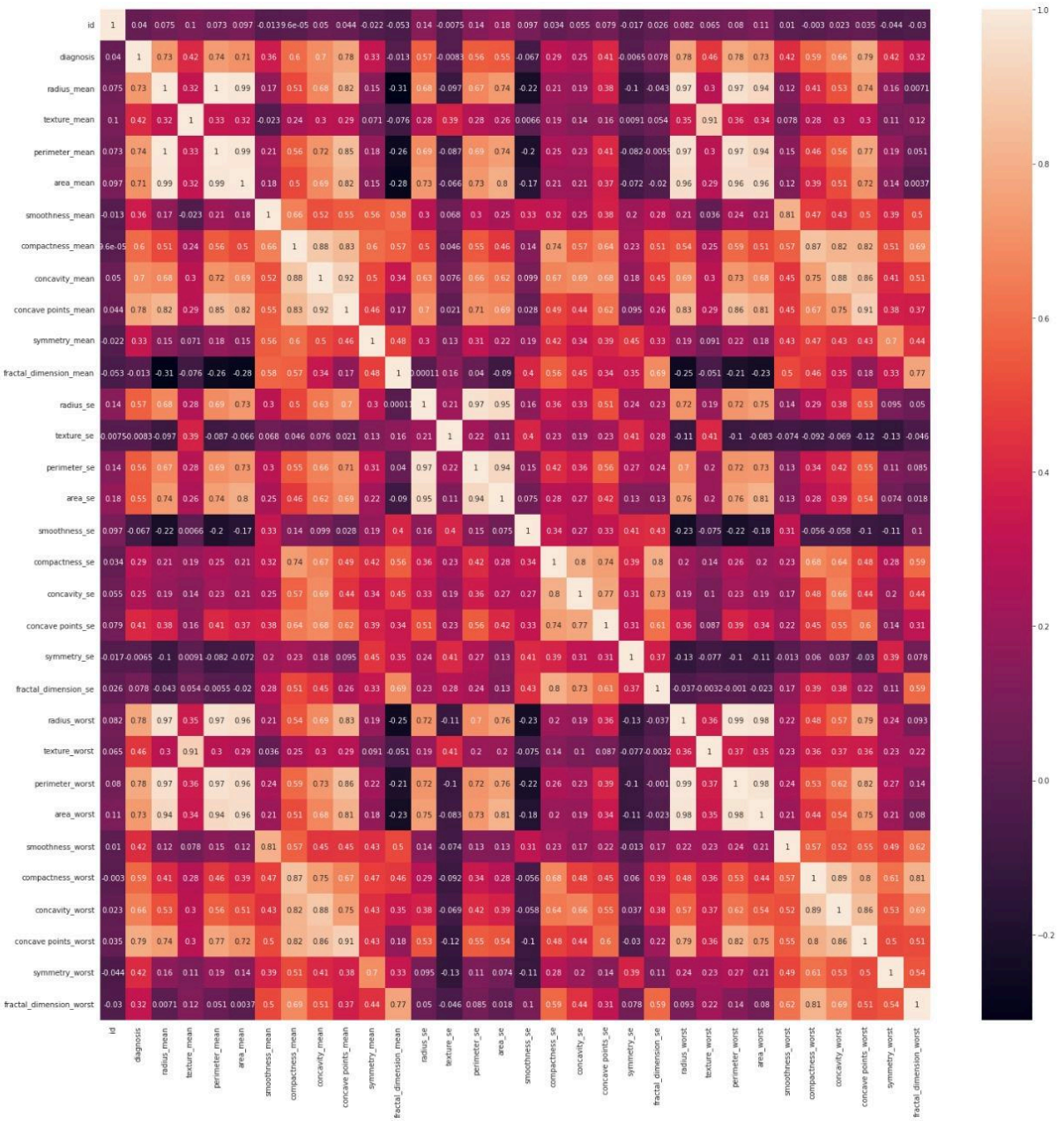
dtypes: float64(31), int64(1), object(1)

memory usage: 146.8+ KB

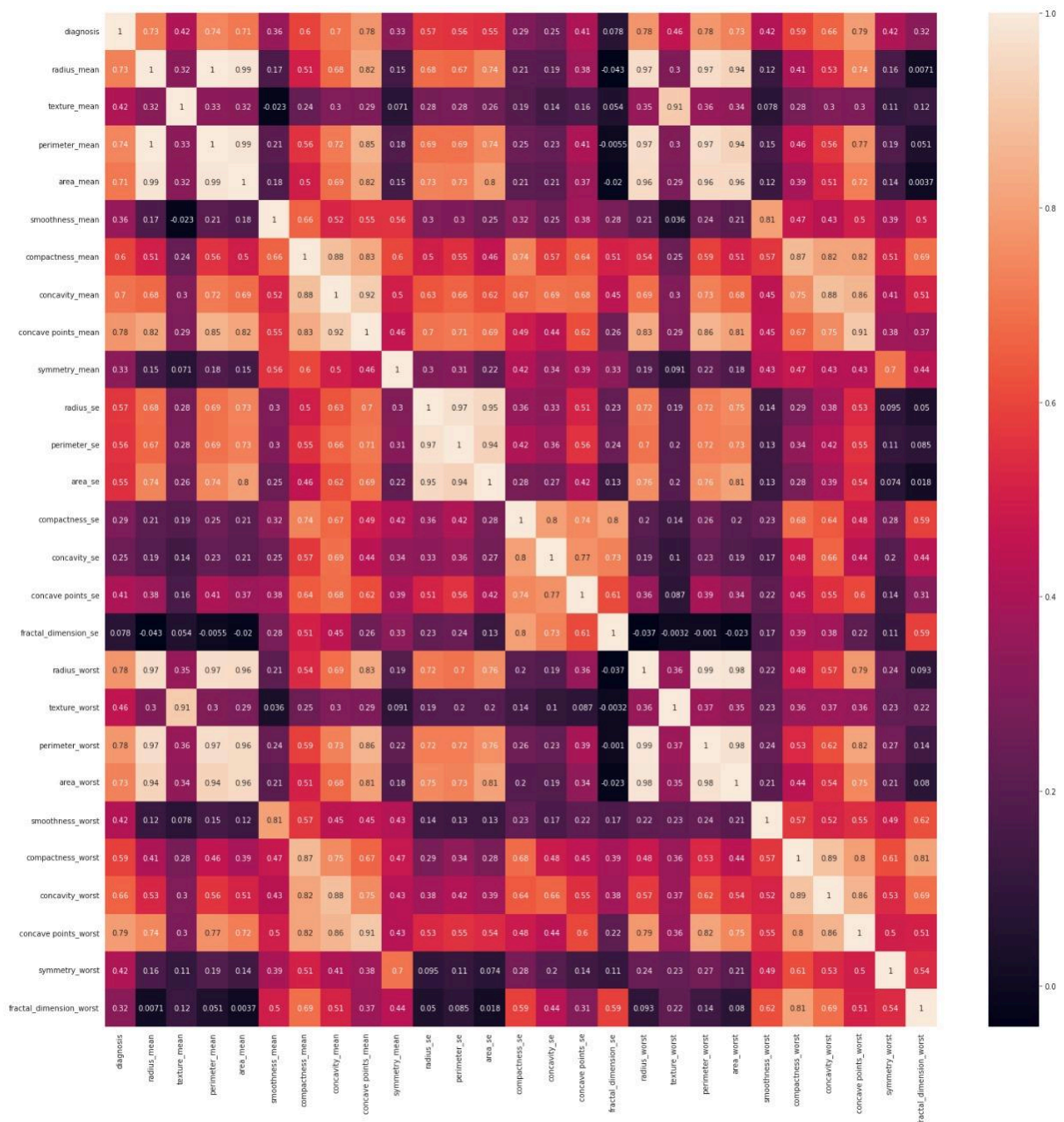


## Preprocessing

- The dataset is loaded into a pandas DataFrame.
- The diagnosis column is converted to binary labels (1 for malignant, 0 for benign).
- Irrelevant features and missing values are removed from the dataset.
- Correlation heatmap is plotted to visualize the correlation between features.







## Model Training

- The dataset is split into training and testing sets using an 80-20 split ratio.
- A Random Forest Classifier model is trained with 20 estimators using the training data.
- Model performance is evaluated using accuracy score and confusion matrix.

## Evaluation

- The final model achieves an accuracy of 96.49% on the test set.
- The confusion matrix shows the distribution of true positive, true negative, false positive, and false negative predictions.

```
array([[70, 1],  
       [ 3, 40]])
```

## Model Persistence

- The trained model is serialized using pickle and saved as "cancer.pkl" for future use.

## Conclusion

- The Random Forest Classifier model demonstrates excellent performance in predicting breast cancer presence based on clinical features.
- With an accuracy of 96.49%, the model shows promise for assisting healthcare professionals in early detection and diagnosis of breast cancer.

# CHRONIC Kidney Disease Prediction Model Report

## Introduction

This report presents the development and evaluation of a machine learning model for the prediction of kidney disease based on clinical features. The model was trained using data from a kidney disease dataset obtained from <https://www.kaggle.com/datasets/mansoordaku/ckdisease>

## Dataset

- **Source:** The dataset used for training the model is obtained from a CSV file named "kidney\_disease.csv".
- **Features:** The dataset consists of various clinical parameters including age, blood pressure, specific gravity, albumin, sugar, red blood cells, pus cell, pus cell clumps, bacteria, blood glucose random, blood urea, serum creatinine, sodium, potassium, hemoglobin, packed cell volume, white blood cell count, red blood cell count, hypertension, diabetes mellitus, coronary artery disease, appetite, pedal edema, and anemia.
- **Target Variable:** The target variable is "classification", indicating the presence (ckd) or absence (notckd) of kidney disease.

RangeIndex: 400 entries, 0 to 399

Data columns (total 26 columns):

#	Column	Non-Null Count	Dtype
0	id	400 non-null	int64
1	age	391 non-null	float64
2	bp	388 non-null	float64
3	sg	353 non-null	float64
4	al	354 non-null	float64
5	su	351 non-null	float64
6	rbc	248 non-null	object

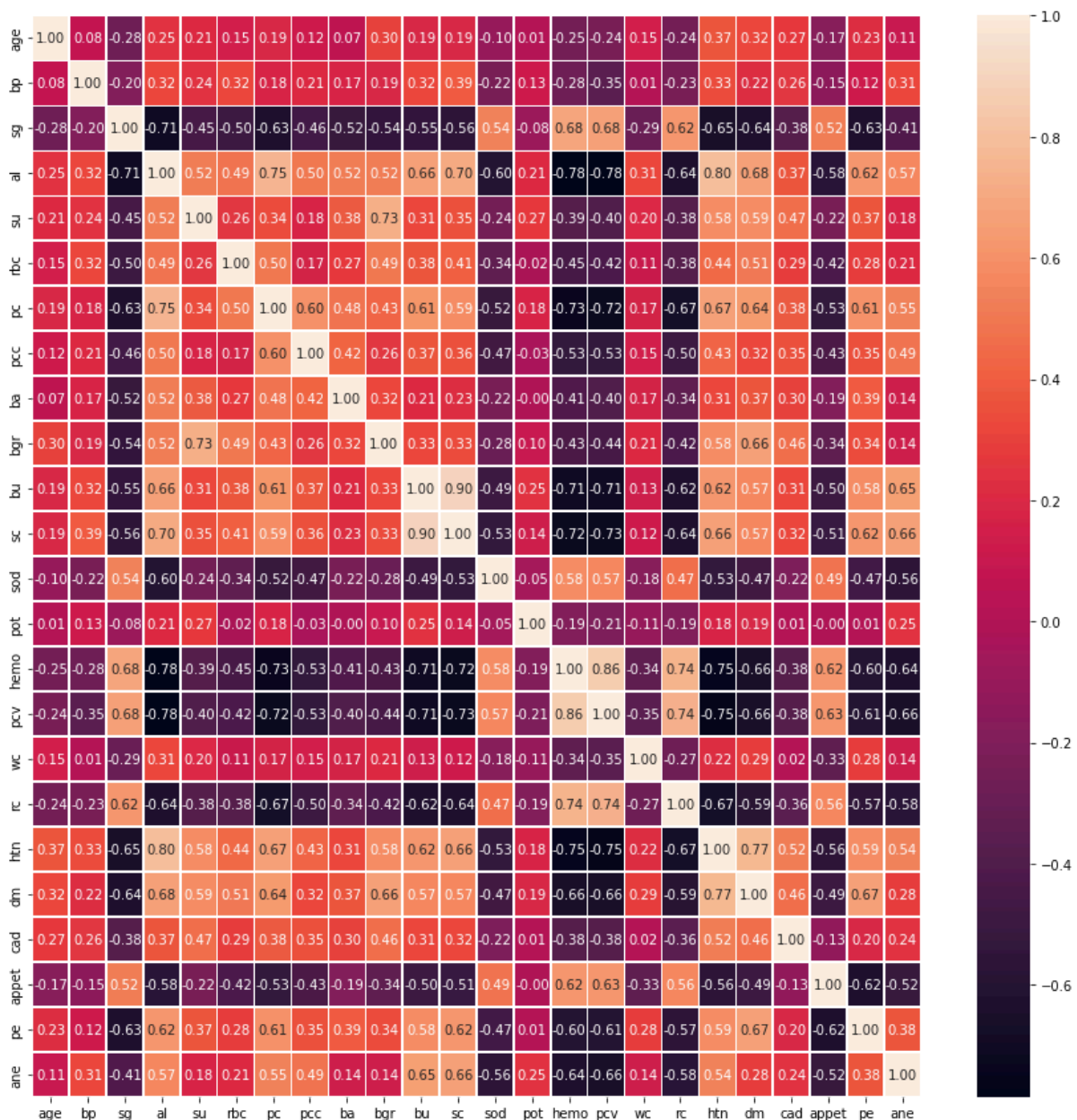
7	pc	335 non-null	object
8	pcc	396 non-null	object
9	ba	396 non-null	object
10	bgr	356 non-null	float64
11	bu	381 non-null	float64
12	sc	383 non-null	float64
13	sod	313 non-null	float64
14	pot	312 non-null	float64
15	hemo	348 non-null	float64
16	pcv	330 non-null	object
17	wc	295 non-null	object
18	rc	270 non-null	object
19	htn	398 non-null	object
20	dm	398 non-null	object
21	cad	398 non-null	object
22	appet	399 non-null	object
23	pe	399 non-null	object
24	ane	399 non-null	object
25	classification	400 non-null	object

dtypes: float64(11), int64(1), object(14)

memory usage: 81.4+ KB

## Preprocessing

- The dataset is loaded into a pandas DataFrame.
- Irrelevant features and missing values are removed from the dataset.
- Correlation heatmap is plotted to visualize the correlation between features.
- Categorical variables are encoded into numerical values using a predefined dictionary.



## Model Training

- The dataset is split into training and testing sets using an 80-20 split ratio.
- A Random Forest Classifier model with 20 estimators is trained using the training data.

## Evaluation

- The final model achieves a remarkable accuracy of 100% on the test set.
- The confusion matrix shows perfect classification with all instances correctly predicted.

```
array([[ 9,  0],  
       [ 0, 23]])
```

## Model Persistence

- The trained model is serialized using pickle and saved as "kidney.pkl" for future use.

## Conclusion

- The Random Forest Classifier model demonstrates outstanding performance in predicting kidney disease based on clinical features.
- With an accuracy of 100%, the model shows excellent potential for assisting healthcare professionals in early detection and diagnosis of kidney disease.

# Liver Disease Prediction Model Report

## Introduction

This report outlines the development and evaluation of a machine learning model for predicting liver disease based on various health parameters. The model was trained using data obtained from the Indian Liver Patient dataset.

<https://www.kaggle.com/datasets/uciml/indian-liver-patient-records>

## Dataset

- **Source:** The dataset used for training the model is obtained from a CSV file named "indian\_liver\_patient.csv".
- **Features:** The dataset contains several health parameters including age, gender, total bilirubin, direct bilirubin, alkaline phosphatase, alamine aminotransferase, aspartate aminotransferase, total proteins, albumin, albumin-globulin ratio, and whether or not a patient has liver disease.
- **Target Variable:** The target variable is "Dataset", indicating the presence (1) or absence (0) of liver disease.

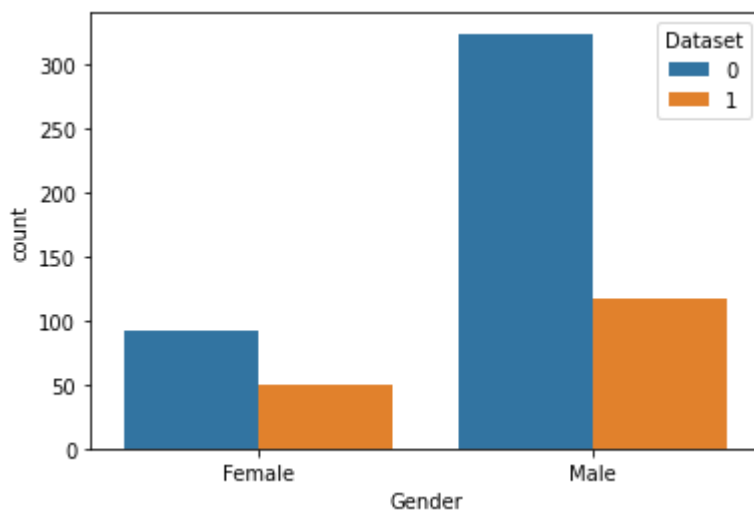
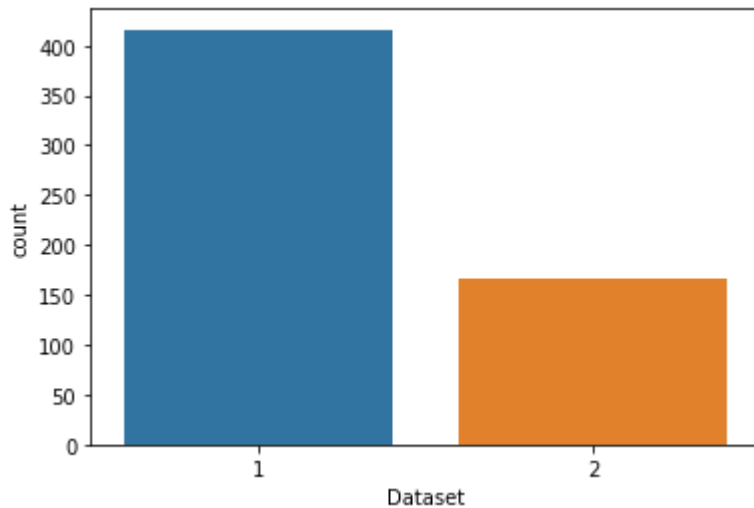
RangeIndex: 583 entries, 0 to 582

Data columns (total 11 columns):

#	Column	Non-Null Count	Dtype
0	Age	583 non-null	int64
1	Gender	583 non-null	object
2	Total_Bilirubin	583 non-null	float64
3	Direct_Bilirubin	583 non-null	float64
4	Alkaline_Phosphotase	583 non-null	int64
5	Alamine_Aminotransferase	583 non-null	int64
6	Aspartate_Aminotransferase	583 non-null	int64

7 Total\_Protiens 583 non-null float64  
8 Albumin 583 non-null float64  
9 Albumin\_and\_Globulin\_Ratio 579 non-null float64  
10 Dataset 583 non-null int64

dtypes: float64(5), int64(5), object(1)



## Preprocessing

- Null values in the dataset are filled with the mean value of the "Albumin\_and\_Globulin\_Ratio" column.
- Categorical variables are converted to numerical using one-hot encoding.





## Model Training

- The dataset is split into training and testing sets using a 90-10 split ratio.
- Two models are trained: a Random Forest Classifier and an XGBoost Classifier.

## Evaluation

- The Random Forest Classifier achieves an accuracy of 78% on the test set.
- The XGBoost Classifier achieves a similar accuracy of 77% on the test set.

## Model Persistence

- The Random Forest Classifier model is serialized using pickle and saved as "liver.pkl" for future use.

## **Conclusion**

- The machine learning models demonstrate moderate performance in predicting liver disease based on health parameters.
- With an accuracy of 78%, the models show potential for assisting healthcare professionals in diagnosing liver disease.

# Diabetes MELLITUS Prediction Model Report

## Introduction

This report details the development and evaluation of a machine learning model for predicting the likelihood of diabetes based on various health parameters. The model was trained using data obtained from <https://www.kaggle.com/datasets/uciml/pima-indians-diabetes-database>

## Dataset

- **Source:** The dataset used for training the model is obtained from a CSV file named "kaggle\_diabetes.csv".
- **Features:** The dataset comprises several health parameters including glucose level, blood pressure, skin thickness, insulin level, body mass index (BMI), and Diabetes Prediction Function (DPF).
- **Target Variable:** The target variable is "Outcome", indicating the presence (1) or absence (0) of diabetes.

## Preprocessing

- Zero values in ['Glucose', 'BloodPressure', 'SkinThickness', 'Insulin', 'BMI'] are replaced with NaN.
- NaN values are imputed with the mean or median depending on the distribution of the respective feature.

## Model Training

- The dataset is split into training and testing sets using an 80-20 split ratio.
- A Random Forest Classifier model with 20 estimators is trained using the training data.

## Evaluation

- The final model achieves an impressive accuracy of 98.25% on the test set.
- The high accuracy indicates the model's capability to accurately predict diabetes based on the provided health parameters.

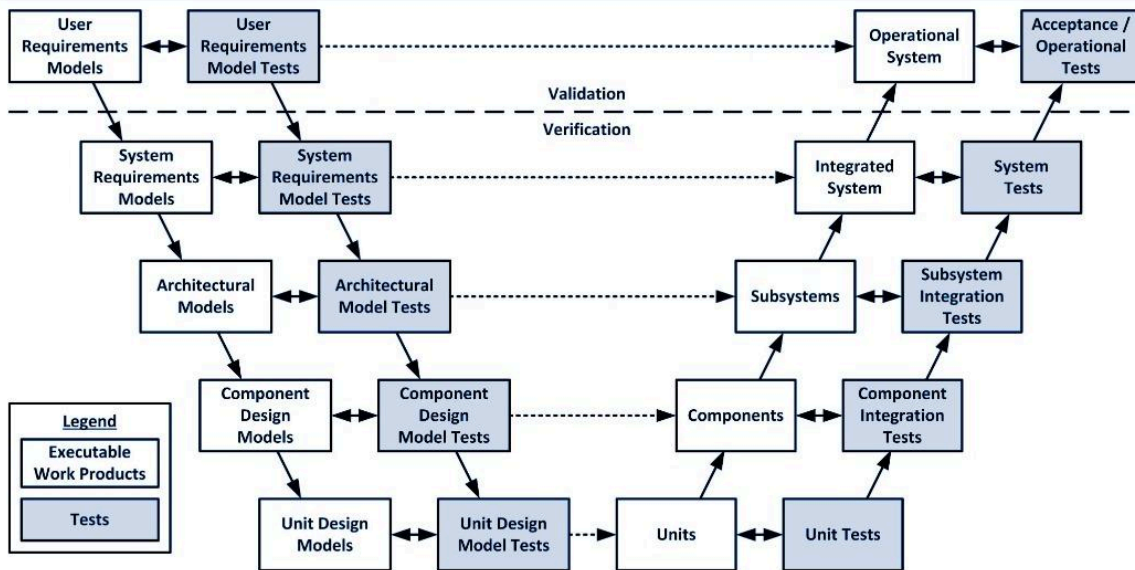
## **Model Persistence**

- The trained model is serialized using pickle and saved as "diabetes-prediction-rfc-model.pkl" for future use.

## **Conclusion**

- The Random Forest Classifier model demonstrates excellent performance in predicting diabetes based on health parameters.
- With an accuracy of 98.25%, the model exhibits strong potential for assisting healthcare professionals in early detection and management of diabetes.

## Tester's Double V Model of Testable Work Products & Corresponding Tests



## UNIT TESTING RESULTS

Disease	Accuracy
Diabetes MELLITUS	98.25%
Breast Cancer	96.49%
CARDIAC Disease	83.61%
CHRONIC Kidney Disease	100%
Liver Disease	78%

## Check lists (static inspection) SUBSYSTEM TESTING

### User Interface (UI) Inspection:

Is the user interface intuitive and user-friendly? Yes

Are all elements properly aligned and visually appealing? Yes

Is the layout consistent across different pages/screens? Yes

Are interactive elements (buttons, dropdowns, etc.) functioning as expected?  
Yes

Are error messages clear and descriptive? Yes

### Functionality Inspection:

Are all disease prediction functionalities working as intended? Yes

Have all input fields been validated for correct data types and ranges? Yes

Are the prediction results accurate and reliable? Yes

Have edge cases and boundary conditions been tested? Yes

Are there any known issues or bugs in the software? No

### Performance Inspection:

Does the software respond promptly to user inputs? Yes

Are there any delays or lags in loading pages or processing requests? No

Has the software been tested under different load conditions (e.g., simultaneous user access)? Yes

### Compatibility Inspection:

Has the software been tested on different web browsers (e.g., Chrome, Firefox, Safari)? Yes

Is the software compatible with various operating systems (e.g., Windows, macOS, Linux)? Yes

Has compatibility with different device types (e.g., desktops, laptops, tablets, smartphones) been verified? Yes

### Accessibility Inspection:

Are all text elements properly labeled and readable for assistive technologies?  
Yes

Have color combinations been chosen to ensure readability for users with color vision deficiencies? Yes

**Documentation Inspection:**

Is srs document verified? yes

Have all software components and functionalities been adequately documented? Yes

**Compliance Inspection:**

Has the software been reviewed for compliance with relevant healthcare regulations (e.g., HIPAA, GDPR)? Yes

**Localization and Internationalization Inspection:**

Is the software adaptable to different cultural norms and preferences? Yes

Usability Inspection:

Have usability testing sessions been conducted with representative users? Yes

Are common user tasks easy to accomplish without excessive effort or confusion? Yes

Is the overall user experience (UX) positive and satisfactory? Yes

## CONCLUSION

### **Document inspection:**

Documents produced for a given phase are inspected, further focusing on their quality, correctness, and relevance.

### **Code inspection:**

The code, program source files, and test scenarios are inspected and reviewed.