

# Medical Imaging Computing Assignment 1

Suneet Tipirneni

March 20, 2023

## 1 Code

Code for the assignment can be found at <https://github.com/suneettipirneni/med-proj-1>

## 2 Task 1

### 2.1 Training resnet-18 from scratch

#### 2.1.1 Implementation

The model I used for this assignment was the low-fidelity resnet-18 model. For input transforms each image needed to be resized to 224 as this is what the resnet model expects as an input dimension.

For the number of epochs I chose 30 as it seem to give the best balance between both computational runtime and overall accuracy. For a batch size a size of 5 was chosen as this was a similiar batch size used by [1] for their model training, mine is increased by one as it helps improve how fast the model trains. The results are shown in figure 1.

#### 2.1.2 Graphs

#### 2.1.3 Accurracies

The overall accuracy of this model was 92%, the outline of the different percentages for each class is shown below in table 1

Normal	87%
Pneumonia	97.4%

Table 1: Individual Accurracies for model 1.1

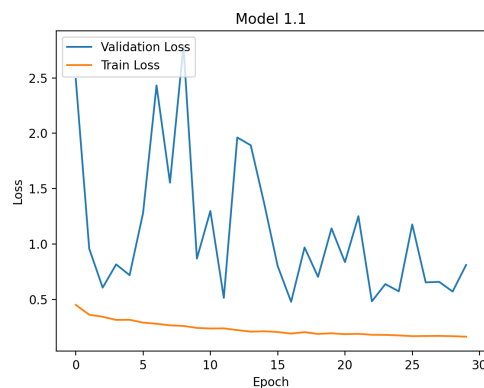


Figure 1: Results from pretraining the model fully

The calculation of these individual accuracies uses the code from [2].

### 2.2 Finetuning a resnet-18

#### 2.2.1 Implementation

For the second task a resnet-18 model was once again used, however the model was trained with it's preexisting weights that were previously learned on the ImageNet dataset.

As with the previous model, a batch size of 5 and the number of epochs were set to 30. These values were kept the same in order to make sure a fair comparison could be formed between both models.

This model mainly differs in the architecture described in section 2. A dropout layer with a rate of 0.5 is employed before the final fully-connected layer to prevent over-fitting. In addition to architecture

changes, data augmentation is performed to increase the fidelity of the test dataset. Firstly, a random horizontal transformation is applied to input images, horizontal transforms were only used as opposed to vertical transforms as the body would be misrepresented by a vertical flip. Secondly, a random crop to the network input size of 224 is employed this allows the inputs to crop to a variety of different areas and helps the model to not over-train on specific formats and shapes of images.

### 2.2.2 Graphs

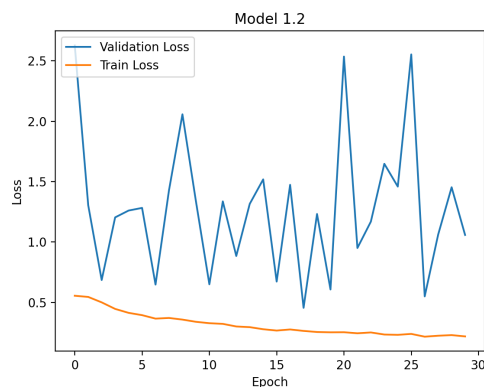


Figure 2: Results from finetuning the model using pretrained resnet-18 weights

### 2.2.3 Accuracies

The overall test accuracy for this model was 89%. This was slightly lower than the previous model, this may be due to lack of training time. The per-class accuracies for this model are shown in table 2.

Normal	76.5%
Pneumonia	95.4%

Table 2: Individual Accuracies for model 1.2

Compared to the first model these are slightly lower scores. I once again believe this may be caused

by the lack of training time for the model. Perhaps increasing the epoch count would yield better results.

## References

- [1] CHILAMKURTHY, S. Transfer learning for computer vision tutorial. [https://pytorch.org/tutorials/beginner/transfer\\_learning\\_tutorial.html](https://pytorch.org/tutorials/beginner/transfer_learning_tutorial.html).
- [2] PYTORCH. Training a classifier. [https://pytorch.org/tutorials/beginner/blitz/cifar10\\_tutorial.html](https://pytorch.org/tutorials/beginner/blitz/cifar10_tutorial.html).