

# DeepDoc: NLP with Deep Neural Networks for the American Board of Internal Medicine Certification Exam



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## **Prediction Task**

- No system currently exists that assists physicians through natural language queries and direct answers.
- Rapidly growing amount of literature makes it harder for physicians to find relevant information for treatment [1].
- As a first pass, can we train a neural network to answer review questions for a physician certification exam?

#### Data

- 3564 examples were scraped from 2012, 2015, and 2018 review questions.
- Each question is comprised of a question, accompanying context passage, and 4 or 5 answer choice selections.
- We do a time split to capture ability to generalize on future problems.
  - Train: 2364 examples (2012, 2016).
  - Dev: 600 examples (1/2 of 2018).
  - Test: 600 examples (1/2 of 2018).

## Example of a question:

Passage: A 76-year-old woman is evaluated... rapid ventricular rate.

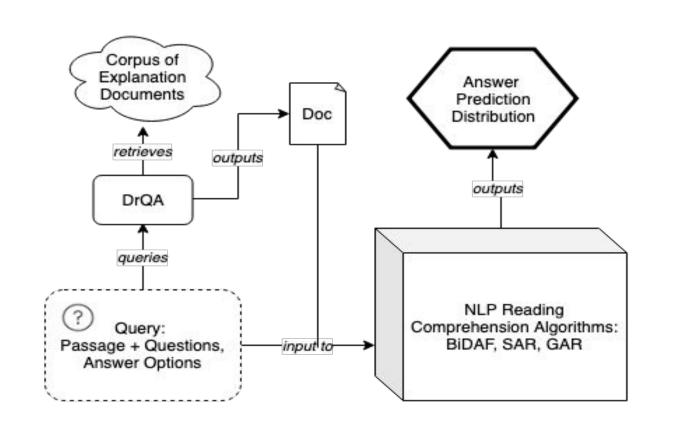
**Question**: Which of the following is the most appropriate acute treatment?

**Answer Options:** A. Adenosine B. Amiodarone C. Cardioversion D. Diltiazem E. Metoprolol

Correct answer: C. Cardioversion.

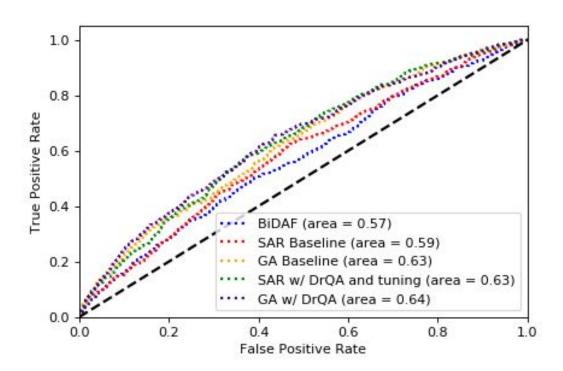
**Explanation:** This patient with atrial fibrillation is hemodynamically unstable and should undergo immediate cardioversion...or diltiazem could worsen the pulmonary edema.

# **Approach and Results**



**Figure 1.** Flow diagram of prediction task.

- DrQA used to extract relevant explanations from training set when evaluating on dev/test. Top 3 explanations are used as input.
- Models include GA, SAR adapted from RACE [2]. And a modified BiDAF baseline.



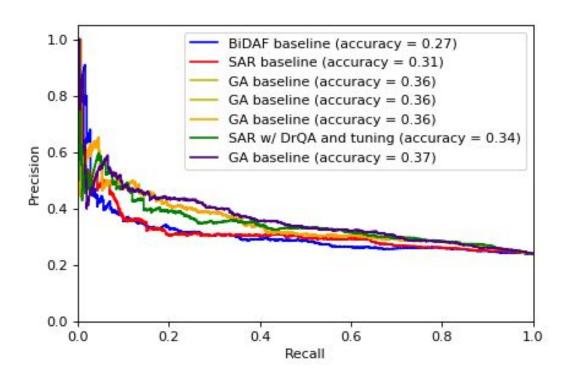
**Figure 4.** ROC models for top-performing models and baselines.

Model	Accuracy
Random	0.222
BiDAF Baseline	0.273
SAR Baseline	0.310
GA Baseline	0.360
SAR w/ BioEmbeddings	0.322
GA w/ BioEmbeddings	0.377
SAR w/ DrQA*	0.325
GA w/ DrQA*	0.373
SAR w/ DrQA and tuning*	0.335
GA w/ DrQA and tuning*	0.335
Ensembled Model	0.337

**Figure 2.** Prediction Results demonstrate strong performance of GA model for this task.

Model	Accuracy
Correct Explanations	0.340
DrQA Explanations	0.337

Figure 3. Ensembled model with correct explanations vs. with DrQA explanations show little difference, suggesting difficulties in reading comprehension or lack of signal.



**Figure 5.** Precision-Recall curve for top-performing models and baselines.

## Analysis

Examples	Relevant Explanation (%)	Helpful Explanation (%)
Top 5	0.266	0.133
Bottom 5	0.200	0.066

Figure 6. Looked at the top and bottom 5 scoring explanations (30 explanations total) and found that only 7-13% of cases had helpful explanations.

- Tuning didn't perform well, likely due to searching too wide of a space.
- Our model could benefit from different comprehension architectures, or a better search corpus.

## **Conclusion & Next Steps**

- Demonstrate relatively good performance of the GA model, especially compared to RACE (MC task dataset) baseline of 40%, and a 50-60% passing score on the exam.
- Next steps include:
  - Character embeddings
  - Longer hyperparameter search
  - Validation on an official released exam
  - Try DrQA on wikipedia or UpToDate

# Acknowledgments & References

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1] D. T. Durack, "The weight of medical knowledge.," The New England journal of medicine vol. 298, no. 14, pp. 773–5, 1978

[2] G. Lai, Q. Xie, H. Liu, Y. Yang, and E. Hovy, "RACE: Large-scale ReAding Comprehension Dataset From Examinations," apr 2017.