# From Theory To Practice:

Implementing Machine Learning Solutions Safely and Effectively in the Clinical Laboratory

#### Nick Spies, MD

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# Disclosures

• I have no relevant conflicts of interest to disclose.





# Learning Objectives

• Define key roles and responsibilities in the machine learning life-cycle.

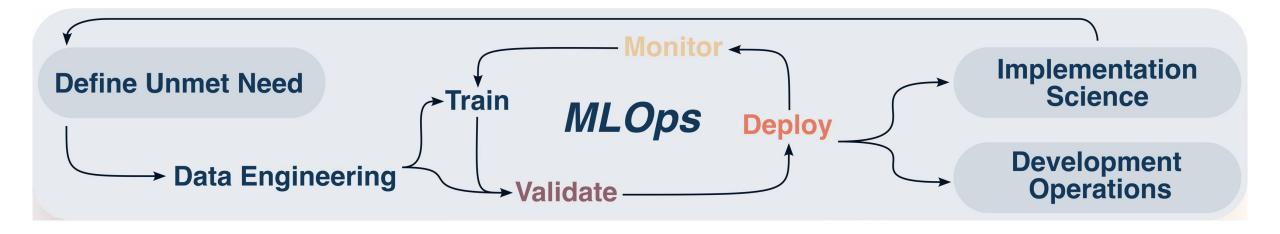
Explore techniques for validating, deploying, and monitoring models.

Reinforce these concepts within a relevant, lab-based example.





# The Machine Learning Life Cycle







#### **Validation**

Metric Selection

Target Label Appraisal

**Prediction Calibration** 

Generalizability & Applicability Assessment

Measuring Inequity & Algorithmic Fairness

Explainability & Interpretability

#### **Deployment**

Production Environments & the IT Stack

Latency, Uptime, & Failure Modes Analysis

CI/CD & Logging

Development Operations

Implementation Science

**Integration Domains** 

Human-in-the-Loop vs. Automated Inference

Governance & RACI Analysis

#### **Monitoring**

Input & Prediction Drift

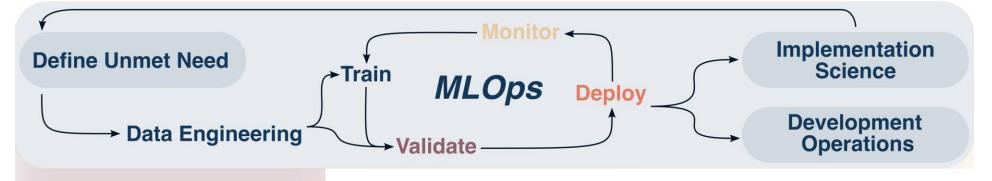
**Prediction Impact Analysis** 

Online Performance Assessment

Model Updating Strategies

Algorithmic Stewardship Principles

Algorithm Inventories & Managing Conflicting Models



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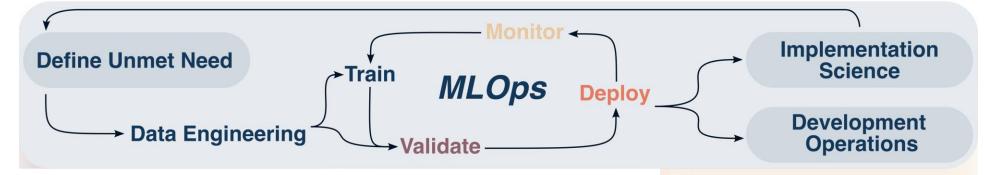
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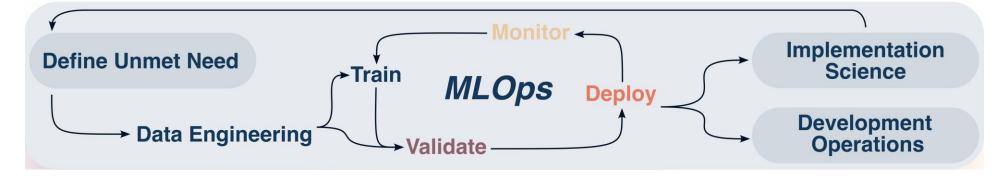
**Prediction Impact Analysis** 

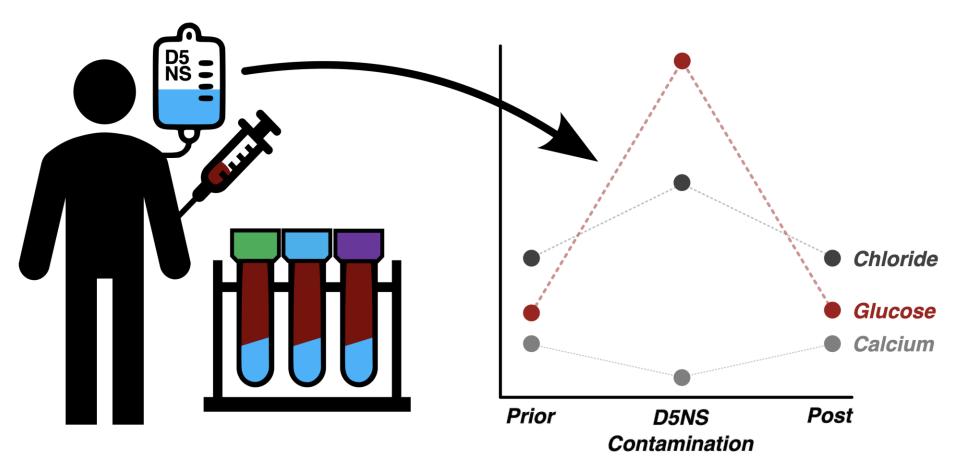
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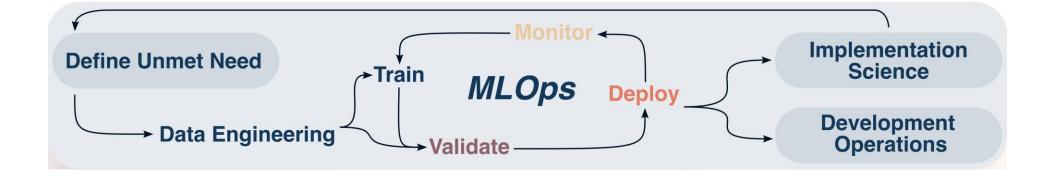
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JOURNAL ARTICLE

#### Validating, Implementing, and Monitoring Machine Learning Solutions in the Clinical Laboratory Safely and Effectively 3

Nicholas C Spies 록, Christopher W Farnsworth, Sarah Wheeler, Christopher R McCudden

Clinical Chemistry, hvae126, https://doi.org/10.1093/clinchem/hvae126

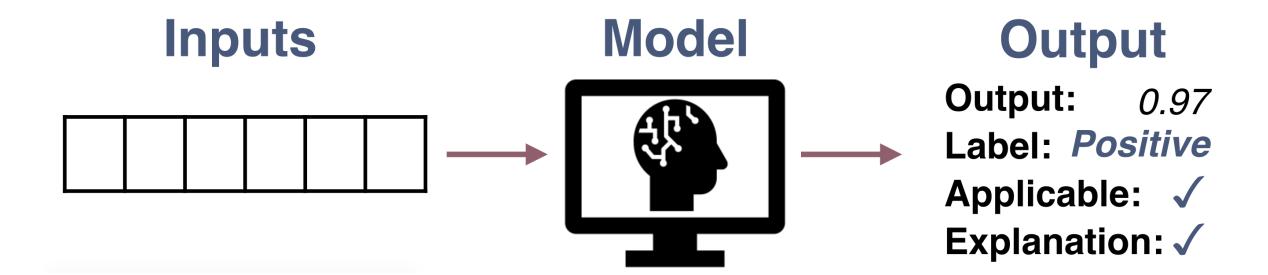
Published: 10 September 2024 Article history ▼



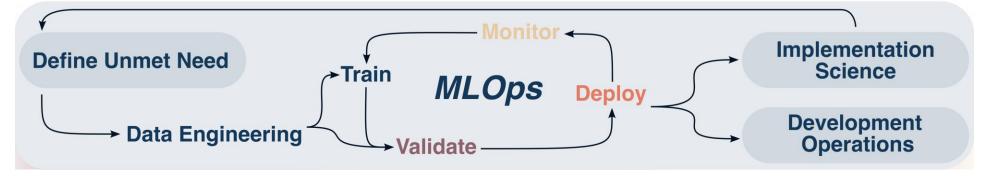




# Defining A Machine Learning Pipeline







# Building The Model

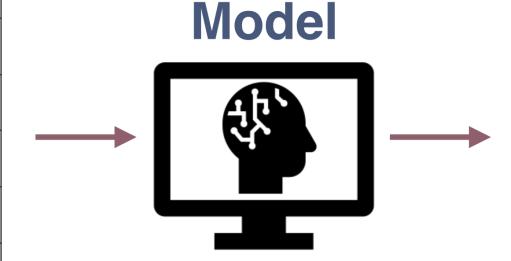
```
# Load required libraries-
    library(tidymodels)
    library(arrow)
    # Load the data-
    train <- --
      read_feather("https://figshare.com/ndownloader/files/45407401") |>
      select(contam_comment, bun:sodium) |> -
      mutate(contam_comment = factor(contam_comment))
10
    # Define the feature recipe-
    recipe <- recipe(contam_comment ~ ., data = train)</pre>
13
    # Define the model-
    model <- boost_tree(mode = "classification") |> set_engine("xgboost")
16
    # Create the workflow-
    workflow <- workflow() |> add_recipe(recipe) |> add_model(model)-
19
    # Fit the model
    fit <- workflow |> fit(data = train)
```





# Testing The Model

Sodium	147 !
Potassium	3.5
Chloride	119 !
CO2	17 !
Creatinine	0.9
BUN	22
Calcium	6.6 !
Glucose	86



# Output

**Output:** 0.97

Label: Positive

Applicable: ✓

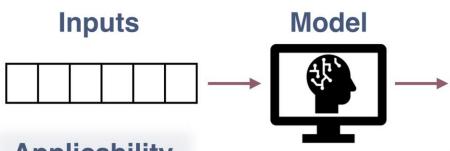
**Explanation:**  $\checkmark$ 



# How can we *validate* a developed model?





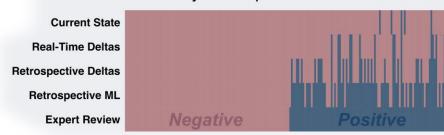


#### Output

Output: Label: Positive Applicable: ✓ Explanation:

#### **Ground Truth Definition**

Evaluating all feasible options for assigning the gold-standard labels by which predictions are evaluated.



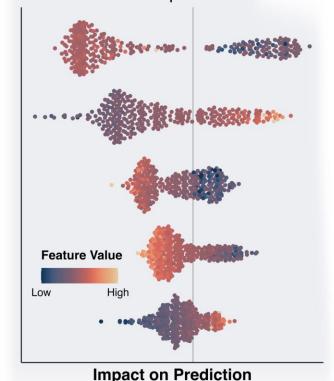
#### **Applicability**

Identifying inputs that diverge from training data *across* or *within* features.



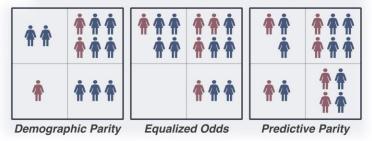
#### **Explainability**

Estimating the impact of each feature on the final prediction



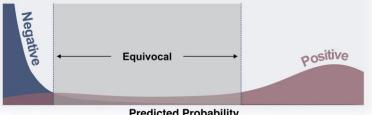
#### **Algorithmic Fairness**

Ensuring the model does not introduce or exacerbate inequity across populations



#### **Threshold Optimization**

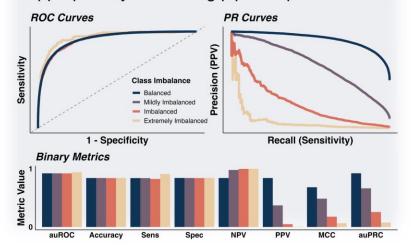
Defining the optimal decision boundaries to convert continuous outputs into class labels



#### **Predicted Probability**

#### **Metric Selection**

Appropriately measuring pipeline performance.



# **Ground Truth Definition**

Evaluating all feasible options for assigning the goldstandard labels by which predictions are evaluated.

**Current State** 

**Real-Time Deltas** 

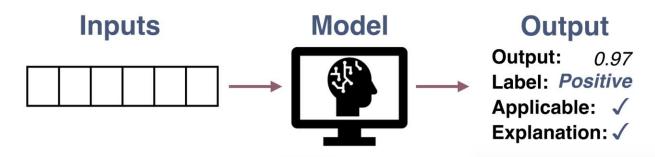
**Retrospective Deltas** 

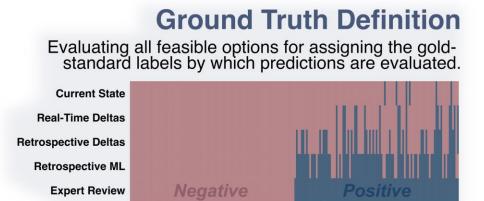
**Retrospective ML** 

**Expert Review** 



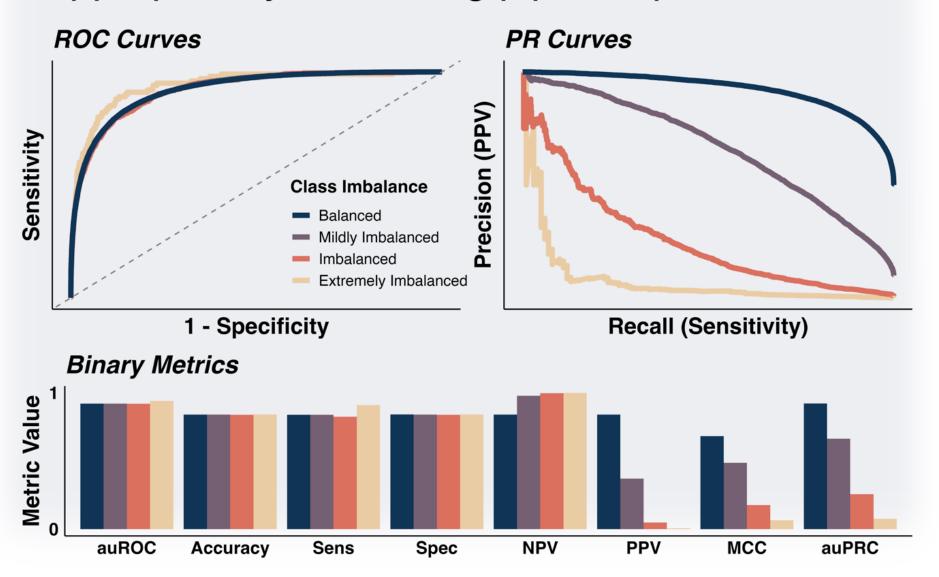
**Sample Number** 

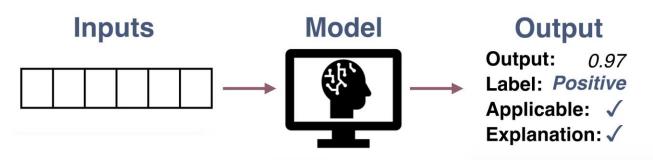




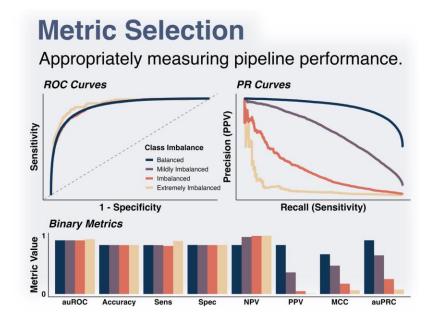
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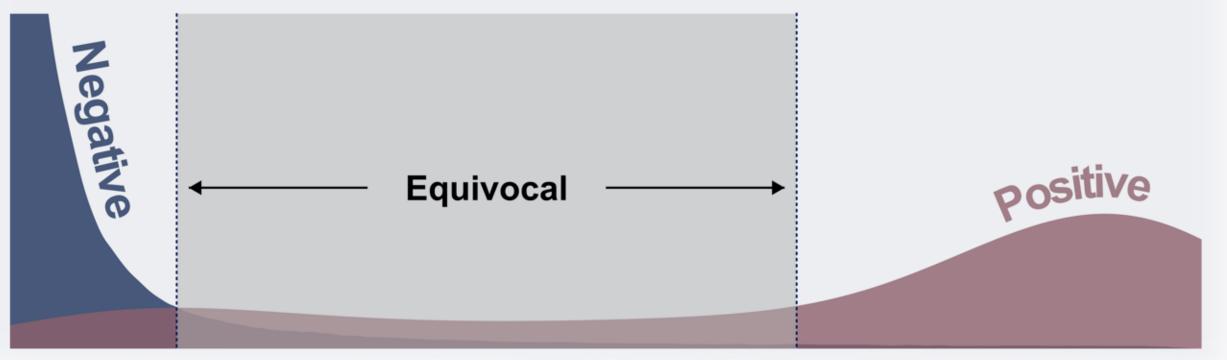


# Ground Truth Definition Evaluating all feasible options for assigning the gold-standard labels by which predictions are evaluated. Current State Real-Time Deltas Retrospective Deltas Retrospective ML Expert Review Negative Positive

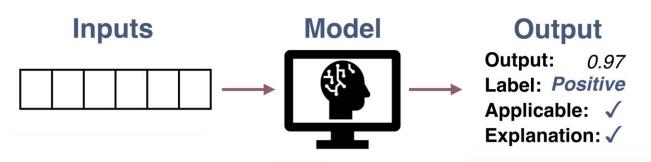


# **Threshold Optimization**

Defining the optimal decision boundaries to convert continuous outputs into class labels



**Predicted Probability** 



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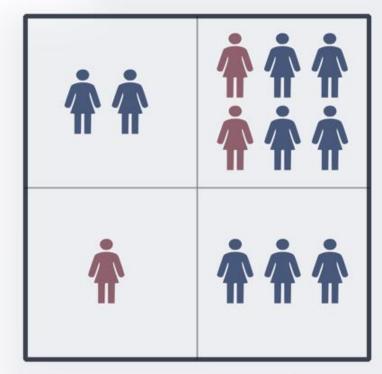
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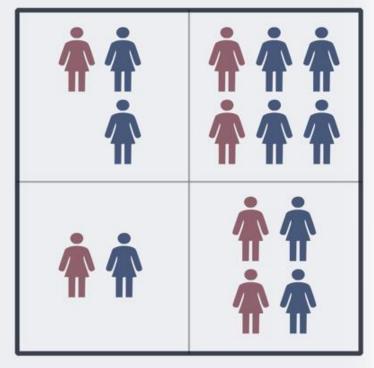
# Threshold Optimization Defining the optimal decision boundaries to convert continuous outputs into class labels Regative Equivocal Positive

**Predicted Probability** 

# **Algorithmic Fairness**

Ensuring the model does not introduce or exacerbate inequity across populations

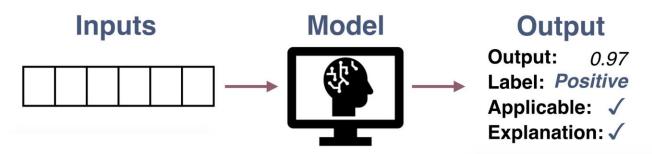




Demographic Parity

**Equalized Odds** 

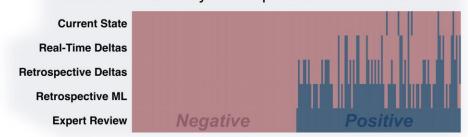
Predictive Parity



#### 

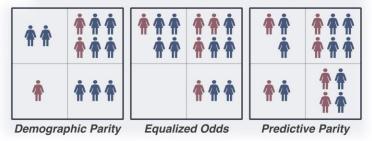
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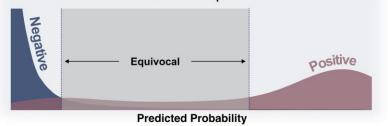
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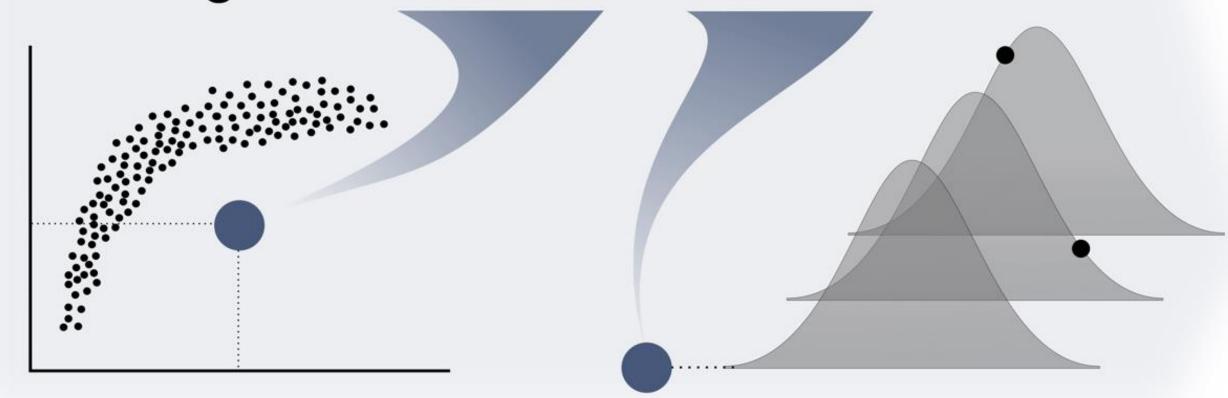
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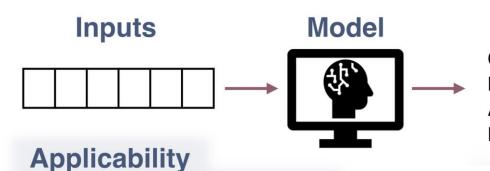
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# Applicability

Identifying inputs that diverge from training data *across* or *within* features.



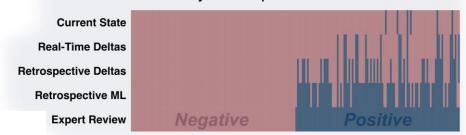


#### Output

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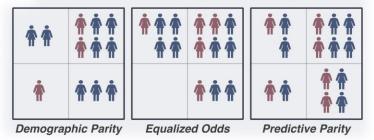
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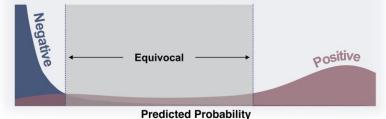
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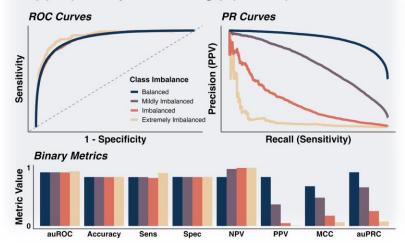
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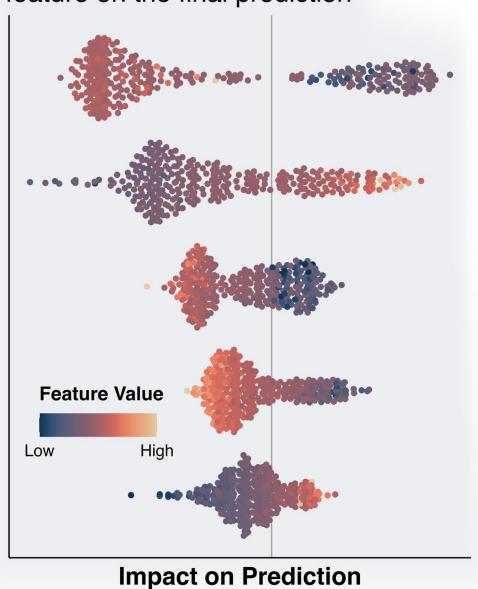
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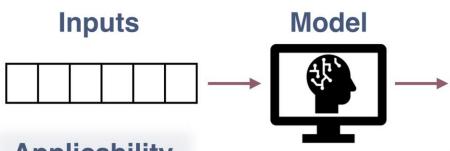
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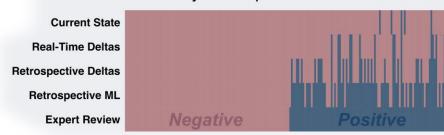


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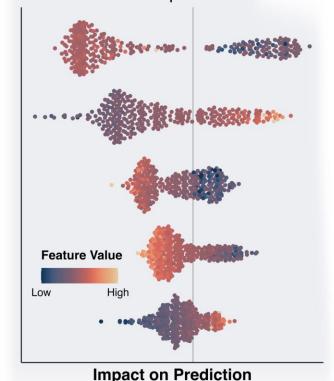
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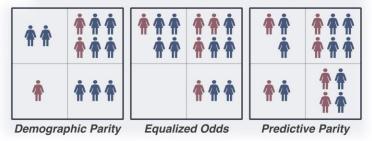
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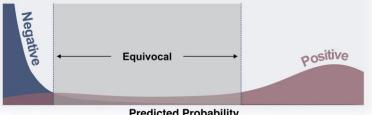
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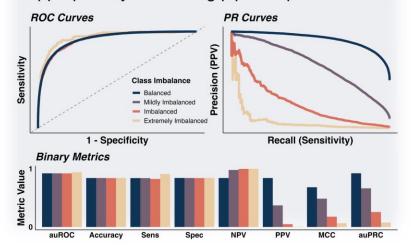
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# How do we *implement* a validated model?





#### **Key Roles and Responsibilities**



#### Subject Matter Experts

- Align implementation to fit unmet clinical need.
- Evaluate failure modes and off-target effects.

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#### Data Scientists & Data Engineers

- Build and evaluate models for deployment.
- Optimize storage and retrieval of input data.

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#### Software & ML Engineers

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- Implement best practices in DevOps/MLOps.

#### **MLOps**

The framework for building, deploying, and monitoring end-to-end ML solutions in live, production environments safely and effectively.

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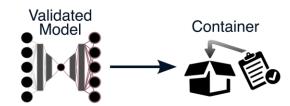
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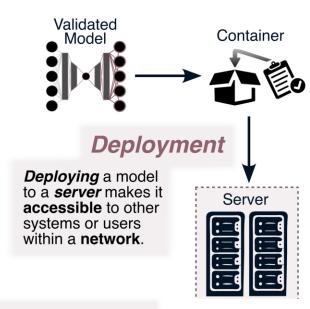
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#### **Terms and Technologies**



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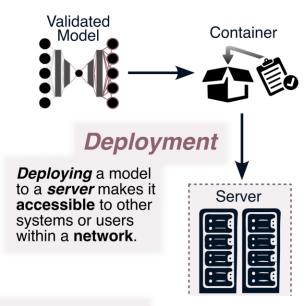
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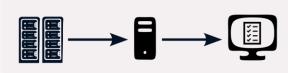
#### **Key Roles and Responsibilities**

#### **Terms and Technologies**



#### **Development Environment**

Before deployment, the **full pipeline** should be **robustly tested** in an offline "**sandbox**" that is **completely isolated** from clinical workflows.





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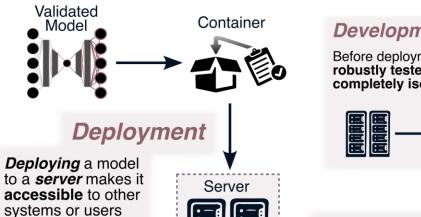
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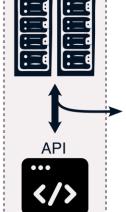
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within a **network**.



#### **Logging Metrics**

**Latency:** Turn-around time for predictions.

**Uptime:** % of time a prediction can be made.

**Scalability:** Change in latency/uptime with increased volume.



- Maintain interfaces for ML inputs and outputs.
- Develop infrastructure and allocate resources.

## Successful Implementation of Machine Learning Pipelines

#### **Key Roles and Responsibilities**

Data Scientists & Data Engineers

Build and evaluate models for deployment.

- Optimize storage and retrieval of input data.

## Validated Container

#### **Deployment**

to a *server* makes it accessible to other systems or users within a **network**.

# Server

#### **Logging Metrics**

Latency: Turn-around time for predictions.

**Development Environment** 

Before deployment, the full pipeline should be robustly tested in an offline "sandbox" that is completely isolated from clinical workflows.

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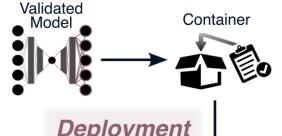
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#### Information Technology & Systems

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## **Terms and Technologies**

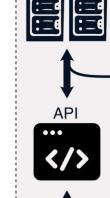


# **Deploying** a model

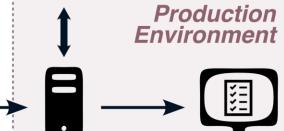
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Instruments



Middleware





## Successful Implementation of Machine Learning Pipelines

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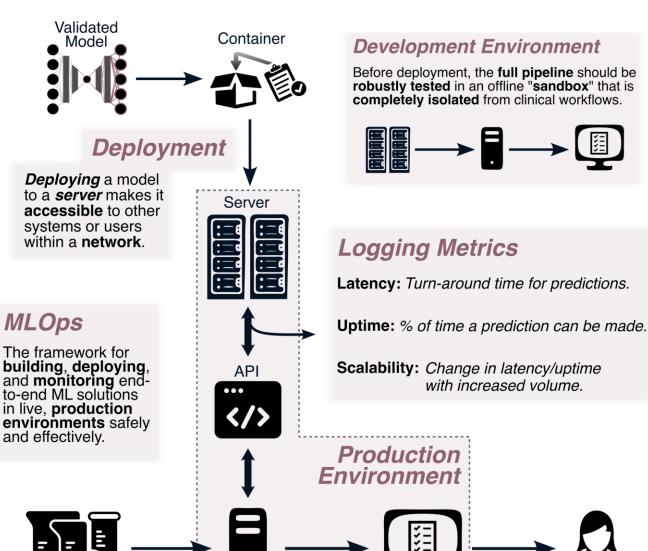
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### **Terms and Technologies**

Middleware

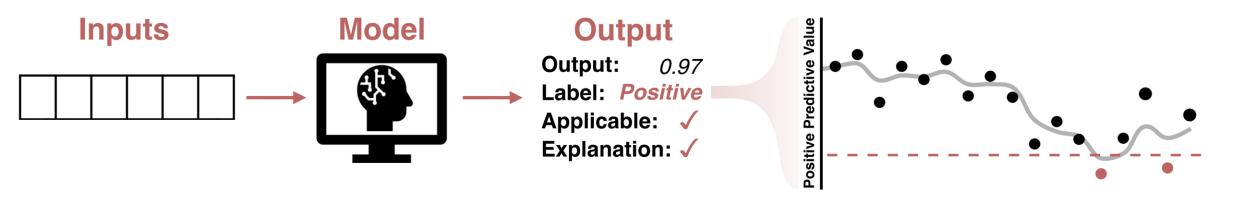
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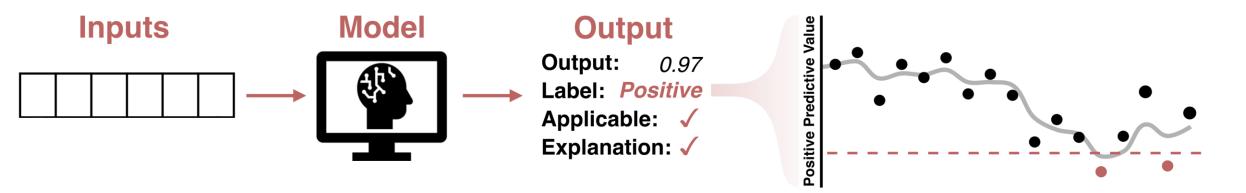


# How do we *monitor* an implemented model?



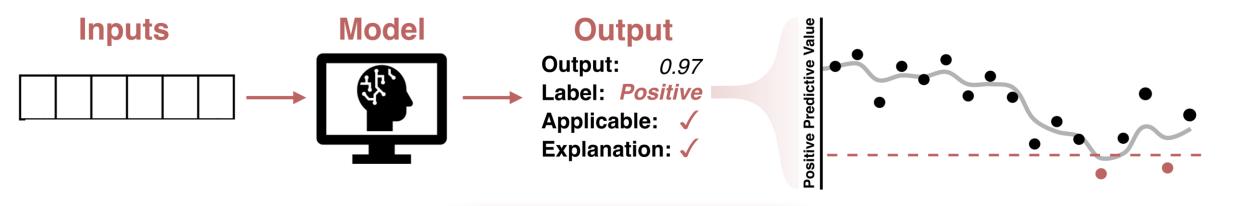


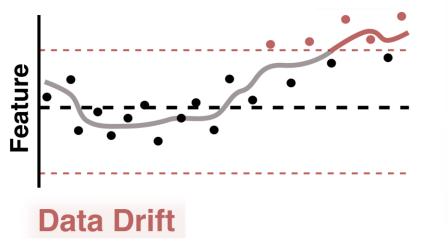




#### **Performance Drift**

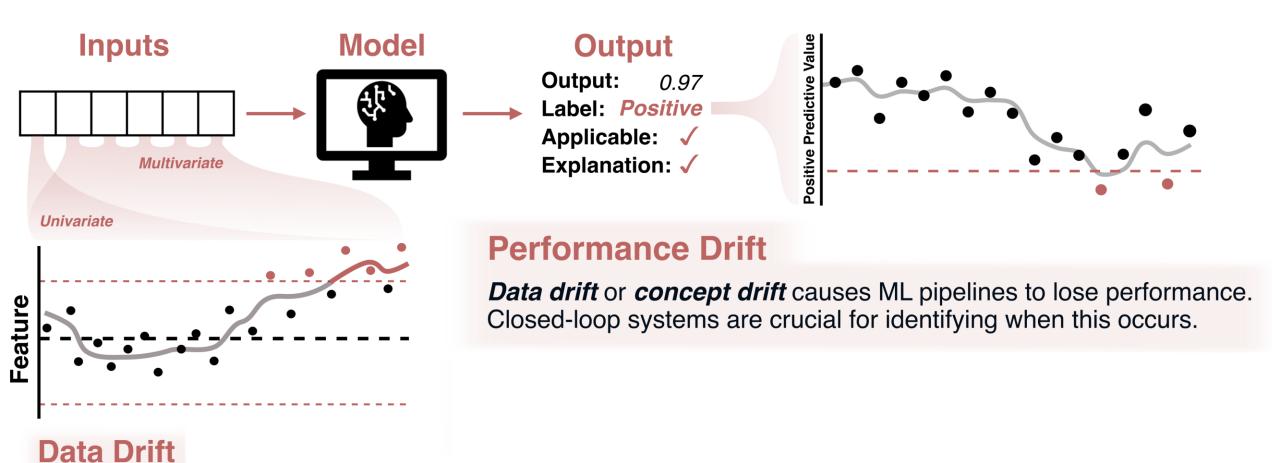
**Data drift** or **concept drift** causes ML pipelines to lose performance. Closed-loop systems are crucial for identifying when this occurs.

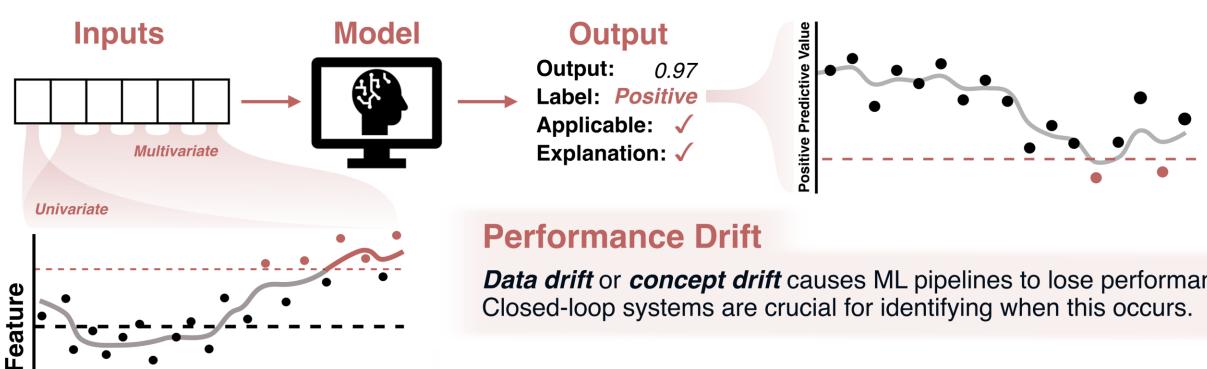




#### **Performance Drift**

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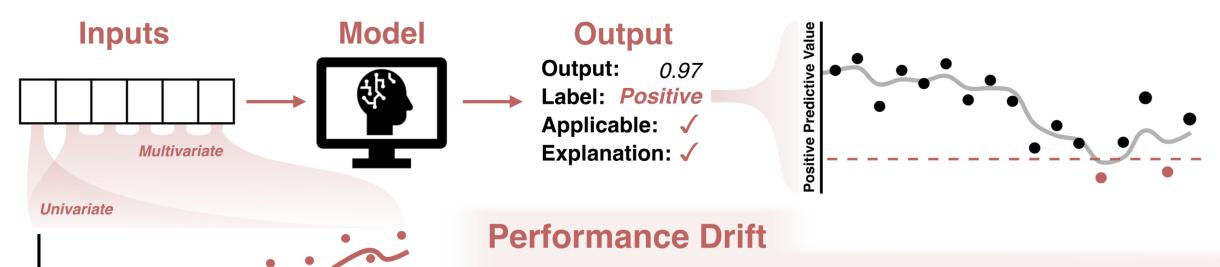
Data drift or concept drift causes ML pipelines to lose performance. Closed-loop systems are crucial for identifying when this occurs.

#### **Data Drift Detection** Correction - Threshold Flags - Input Preprocessing Uni-- Moving Averages - Analyzer Recalibration

Multi-

- Input Transformation - Principal Components

- Model Retraining - Mahalanobis Distance



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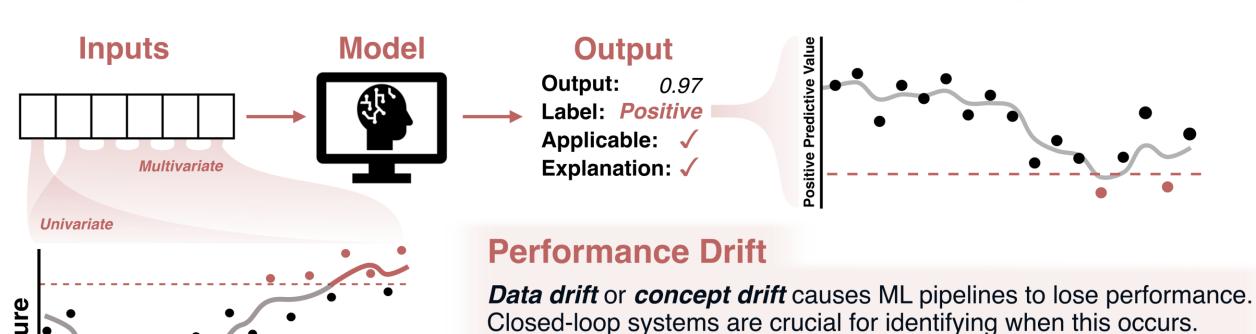
#### **Concept Drift**

Occurs when **real-world labels diverge** from **training** labels.

Difficult to detect and correct without input from **subject-matter experts**.

	Detection	Correction
Uni-	- Threshold Flags - Moving Averages	<ul><li>Input Preprocessing</li><li>Analyzer Recalibration</li></ul>
Multi-	- Principal Components - Mahalanobis Distance	<ul><li>Input Transformation</li><li>Model Retraining</li></ul>

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**Concept Drift** 

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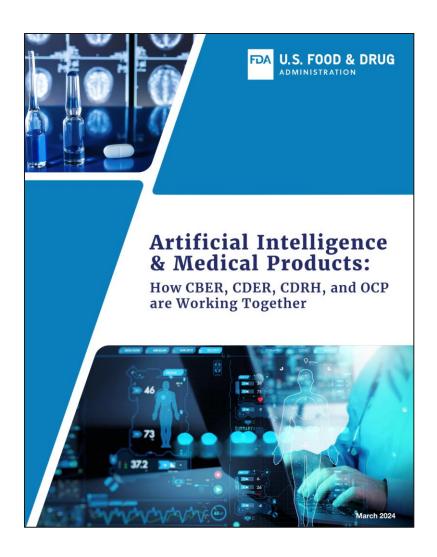
#### **Updating Models**



Replacement models can be continuously retrained and evaluated to replace deteriorating models before they impact live workflows.



## A Note On Regulatory Guidance









Medicines & Healthcare products Regulatory Agency

#### Predetermined Change Control Plans for Machine Learning-Enabled Medical Devices: Guiding Principles

October 202

In 2021, the U.S. Food and Drug Administration (FDA), Health Canada, and the U.K.'s Medicines and Healthcare products Regulatory Agency (MHRA) jointly identified 10 guiding principles that can inform the development of Good Machine Learning Practice (GMLP). GMLP supports the development of safe, effective, and high-quality artificial intelligence/machine learning technologies that can learn from real-world use and, in some cases, improve device performance.

In this document, FDA, Health Canada, and MHRA jointly identified 5 guiding principles for predetermined change control plans. These principles draw upon the overarching GMLP guiding principles, in particular principle 10, which states that deployed models are monitored for performance and re-training risks are managed.

Advancements in digital health technologies include <a href="artificial">artificial</a> intelligence/machine learningenabled medical devices (MLMD). Regulatory expectations that are aligned with best practices for development and change management, such as those described in the <a href="GMLP Guiding Principles">GMLP Guiding Principles</a>, can help to support the quality of such devices. Ultimately, this can lead to patient benefits such as earlier access to innovative technologies or more accurate diagnoses.

The change management process helps to ensure the ongoing safety and effectiveness of devices in the face of change throughout the device's total product lifecycle (TPLC). However, certain changes to MLMDs, such as changes to a model or algorithm, may be substantive or significant. For this reason, they can require regulatory oversight, such as additional premarket review. Such regulatory expectations may not always coincide with the rapid pace of MLMD development.

Internationally, the medical device community is discussing the use of predetermined change control plans (PCCPs) as a way of managing certain device changes where regulatory authorization before marketing is typically required. PCCPs can be used to help:

- align regulatory processes with the rapid and ongoing approach to change management in MLMDs
- manage risks in a timely and ongoing fashion through monitoring, maintenance, and/or improving device performance
- uphold high regulatory standards to ensure device safety and effectiveness.

For this document, the term PCCP describes a plan, proposed by a manufacturer, that specifies:

- certain planned modifications to a device
- the protocol for implementing and controlling those modifications and
- · the assessment of impacts from modifications.

PCCPs may be developed and implemented in different ways in different regulatory jurisdictions.

One key objective of the 5 Guiding Principles for PCCPs for MLMD is to provide foundational considerations that highlight the characteristics of robust PCCPs. Another objective of this document is to facilitate and foster ongoing engagement and collaboration among stakeholders on the PCCP concept for MLMD. As with the <u>GMLP Guiding Principles</u>, this document intends to lay a foundation for PCCPs and encourages international harmonization.

International harmonization and stakeholder consensus on the core concepts of PCCPs will help support the advancement of responsible innovations in the digital health space.

We welcome your continued feedback through the FDA public docket (FDA-2019-N-1185) at Regulations.gov, and we look forward to engaging with you on these efforts. This work is being spearheaded by the Digital Health Center of Excellence for the FDA, the Medical Devices Directorate Digital Health Division at Health Canada and the software and AI team at the MHRA. Contact us directly at Digitalhealth@fda.hhs.gov, software@mhra.gov.uk, and mddpolicypolitiquesdim@hc-sc.gc.ca.



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Proposal for a

#### REGULATION OF THE EUROPEAN PARLIAMENT AND OF THE COUNCIL

LAYING DOWN HARMONISED RULES ON ARTIFICIAL INTELLIGENCE (ARTIFICIAL INTELLIGENCE ACT) AND AMENDING CERTAIN UNION LEGISLATIVE ACTS

 $\{SEC(2021)\ 167\ final\} - \{SWD(2021)\ 84\ final\} - \{SWD(2021)\ 85\ final\}$ 







#### **Validation**

Metric Selection

Target Label Appraisal

**Prediction Calibration** 

Generalizability & Applicability Assessment

Measuring Inequity & Algorithmic Fairness

Explainability & Interpretability

### **Deployment**

Production Environments & the IT Stack

Latency, Uptime, & Failure Modes Analysis

CI/CD & Logging

Development Operations

Implementation Science

**Integration Domains** 

Human-in-the-Loop vs. Automated Inference

Governance & RACI Analysis

## **Monitoring**

Input & Prediction Drift

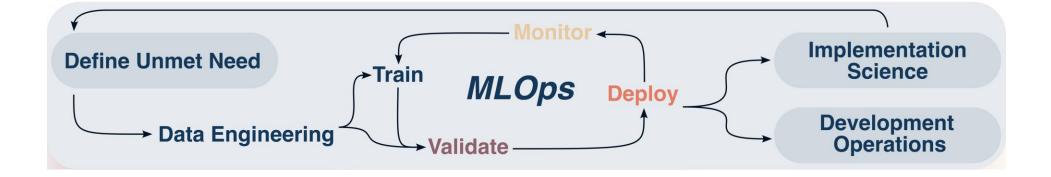
**Prediction Impact Analysis** 

Online Performance Assessment

Model Updating Strategies

Algorithmic Stewardship Principles

Algorithm Inventories & Managing Conflicting Models



JOURNAL ARTICLE

#### Validating, Implementing, and Monitoring Machine Learning Solutions in the Clinical Laboratory Safely and Effectively 3

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