# Operationalizing Health Al for Clinical Research & Care

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## The Healthcare Al Landscape: Navigating Pressures, Embracing Potential







Current Realities

Clinician & researcher burnout

Operational demands

Economic pressures

**Data Explosion** 

**EHRs** 

Imaging

Genomics

Pathology

The Opportunity

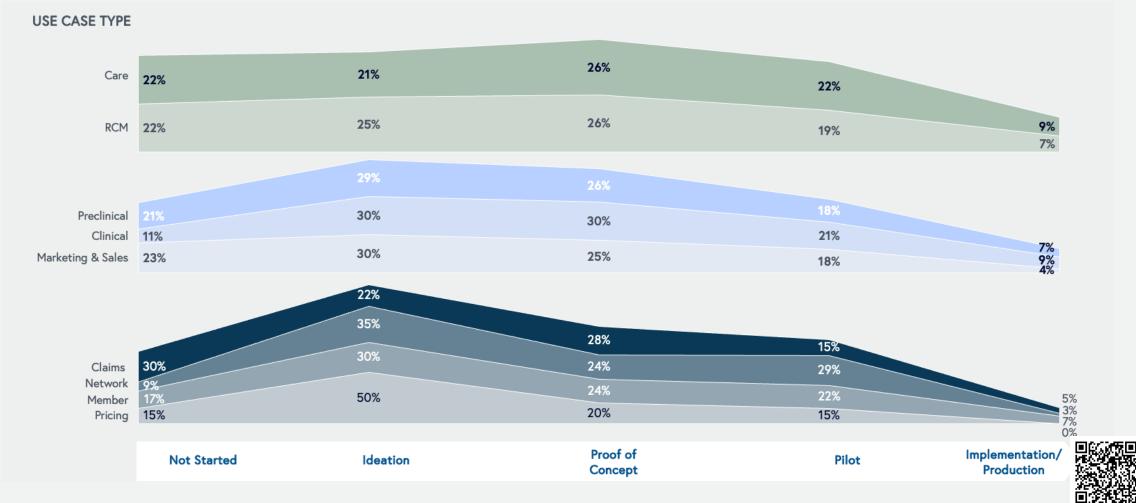
Transform siloed data

Simplify research & care delivery

Accelerate & improve decision -making



## Al Use Case Implementation





## How Customers Are Using AWS for Healthcare

A SAMPLING OF CUSTOMER

- LED HEALTH AI INITIATIVES WITH AWS



Medical Research

Patient-to-trial matching

Multi-modal data analysis

Research summarization



Clinical Tasks

Patient record summarization

Ambient clinical documentation

Automated medical image interpretation



Operational Efficiency

Auto-generated referral letters

Automated prior authorization

Enhanced RCM and clinical coding



Patient Experience

Patient outcome prediction

Personalized patient discharge instructions

Customized treatment plans



Digital Health

Patient care concierge

24/7 bot-mediated triage

Virtual health coaches



## Real World Health Al Interlude 1:

# NHS England



## Foresight: Al for Predictive Healthcare



NHS England, UCL, and KCL teamed up to build Foresight AI, using anonymous health data from 57M people to predict health outcomes and improve care across the UK.

Scans over 10B health records to catch diseases early, helping doctors plan better and focus on everyone, including underrepresented groups.

Aims to prevent illness rather than just treat it, offering personalized care and making healthcare fairer for all. Foresight shows the incredible potential of AI combined with secure access to the deidentified data held in NHS England's SDE. This project is paving the way for smarter, more predictive healthcare – helping us improve patient outcomes across the UK.

Michael Chapman, Director of Data Access and Partnerships, NHS England





## Real World Health Al Interlude 2:

# Thailand's Chulalongkorn University



## Rapidly Scaling Mental Health Support



AIMET at Chulalongkorn University screened 400,000+ users, identifying 7,000 high -risk individuals for intervention

AI voice bot processed 100,000 calls within six months, achieving 40% user adoption rate

Reduced critical case response times from 30 minutes to 7 minutes using intelligent triage

Maintained 99.9% availability during peak demand

"AWS has completely changed how we deliver mental health support. Being able to scale during critical times, like late night hours when demand is highest, has been essential for our mission to make mental healthcare more accessible to everyone."

Assistant Prof. Natawut Nupairoj, PhD Department of Computer Engineering, AIMET





## How Do We Do This Right?



## **AWS Health for Data & Al**

Suite of services, solutions, prescriptive guidance, and data reference architectures purpose -built for healthcare and life sciences



Imaging

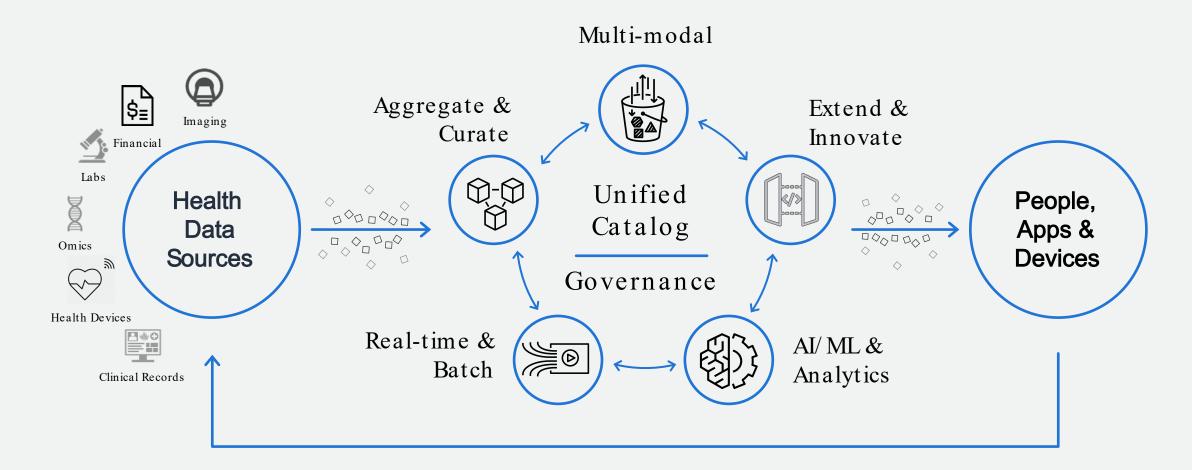
Diagnostics / lab Wearables/ devices OMT

Mfg. and supply chain

Enterprise and operationa Admin and workflow

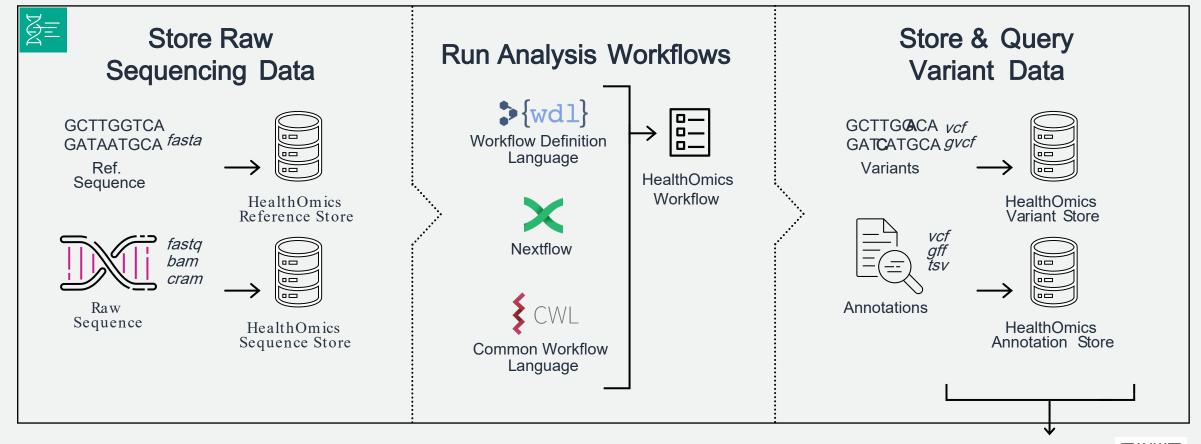


## Modern Health Data Architecture





## Leveraging AWS HealthOmics



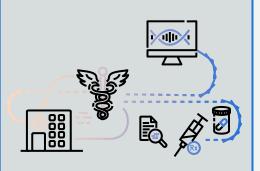






## Accelerating FHIR Adoption with AWS HealthLake

#### **Data Sources**



Claims Electronic Health Records Wearables & Devices Clinical Notes Realtime or Batch

Convert data to FHIR



HIPAA-eligible service to help build & scale FHIR-based apps and analytics solutions

**AWS** 

HealthLake



**FHIR APIs** 





SMART on FHIR



Natural Language **Processing** 



FHIR IG validations



FHIR analytics





Machine Learning



**Business Intelligence** 







Third-party Appl





## **Amazon Bedrock**

THE MOST FLEXIBLE, COMPREHENSIVE WAY TO BUILD AND SCALE GENERATI

**VE AI APPLICATIONS** 



Choose the best model



Optimize for cost, latency, & accuracy



Securely customize with your data



Apply safety & responsible Al checks



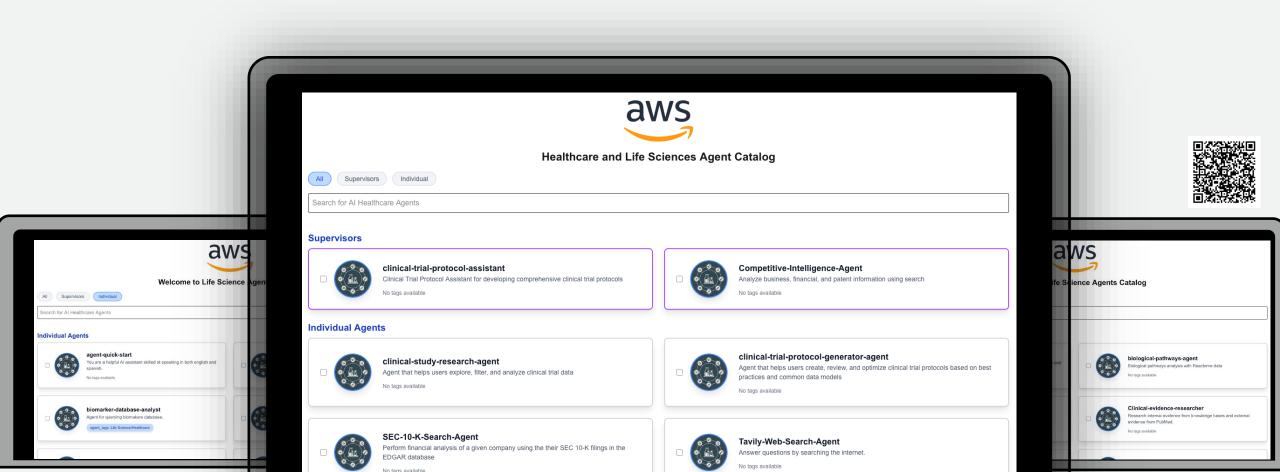
Build & orchestrate Agents

https:// aws.amazon.com/bedrock/



## Open Source Healthcare Agent Toolkit on AWS

BEST PRACTICES FOR BUILDING HEALTHCARE & LIFE SCIENCE WORKFLOWS WITH AMAZON BEDROCK AGENTS



## Real World Health Al Interlude 3:

# **Genomics England**



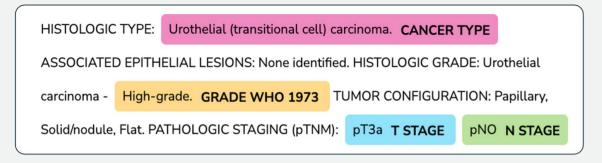


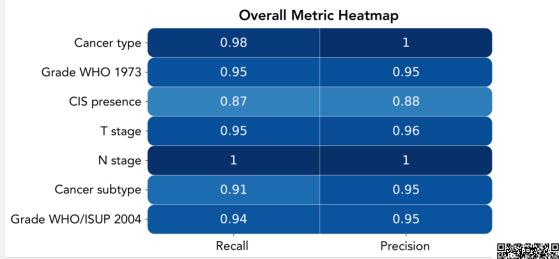
## Extracting Oncology Features from Path Reports

Automated analysis of 70k pathology reports across 15k cancer cases using Amazon Bedrock

Demonstrated high precision and recall across tumor characteristics

Expanded research capabilities by unlocking previously inaccessible pathology insights for genomic analysis







Real World Health Al Interlude 4:

# Froedtert & Medical College of Wisconsin





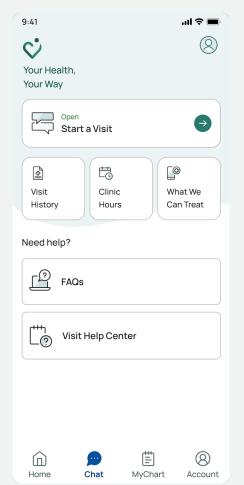
## Reimagining the Patient Experience

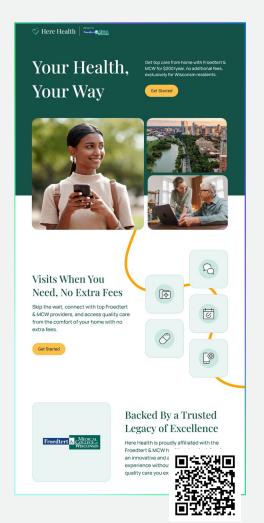
Intelligent Health
Monitoring of health
records, device data, and
patient -reported
outcomes

The system identifies high -risk patients and care gaps for proactive interventions

Mobile app with access to health data and personalized recommendations









https://www.youtube.com/watch?v=mIP\_oP5LrIQ

# **Looking Ahead**



## The Future is Bright





Overall, 84% of physicians felt that using AI scribes had a positive impact on their visit interactions."







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 $\exists \mathbf{r} \forall \mathbf{i} \mathbf{V} > \mathsf{cs} > \mathsf{arXiv:2412.10849}$ 

Computer Science > Artificial Intelligence

[Submitted on 14 Dec 2024]

## Superhuman performance of a large language model on the reasoning tasks of a physician

Peter G. Brodeur, Thomas A. Buckley, Zahir Kanjee, Ethan Goh, Evelyn Bin Ling, Priyank Jain, Stephanie Cabral, Raja-Elie Abdulnour, Adrian Haimovich, Jason A. Freed, Andrew Olson, Daniel J. Morgan, Jason Hom, Robert Gallo, Eric Horvitz, Jonathan Chen, Arjun K. Manrai, Adam Rodman



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## An Opportunity to Accelerate "Scalable Privilege"

August 24, 2023

# **Artificial Intelligence—From Starting Pilots to Scalable Privilege**

Atul J. Butte, MD, PhD<sup>1,2</sup>

» Author Affiliations

JAMA Oncol. Published online August 24, 2023. doi:10.1001/jamaoncol.2023.2867

There is no doubt that AI and LLMs are not yet perfect, and they carry biases that will need to be addressed.<sup>8</sup> These algorithms will need to be carefully monitored as they are brought into health systems.<sup>9</sup> But this does not alter the potential of how they can improve care for both the haves and have-nots of health care. It is time to stop thinking of AI as "nice to have" pilot projects and start realizing that we need AI as a "scalable privilege" for all patients.



# Thank You!

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