Artificial Intelligence Predicts Coronary Artery Bypass Graft Outcomes Using a Single Surgical Note

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Abstract

Background

The role of artificial intelligence (AI) in healthcare predictive analytics continues to evolve. This study evaluated the capability of AI in predicting outcomes after coronary artery bypass grafting (CABG) using a single preoperative surgical note.

Methods

The most recent preoperative surgical intake notes of 1,738 patients who received an isolated CABG from July 1, 2014 to November 1, 2022 at a single institution were analyzed. The primary outcome was the Society of Thoracic Surgeons defined composite outcome of operative mortality or major morbidity (MM). AI methods included 2 convolutional neural networks (CNN): 1) TextCNN, and 2) AttnToNumCNN, a derivative of TextCNN that extracts numerical values during the embedding phase via multi-headed attention and local context. Predictive performance was measured using 10-fold cross-validation and averaged across the hold-out sets. *Results*

A total of 567 (32.6%) patients had MM following CABG. TextCNN achieved a median AUC of 0.796 (IQR: 0.781-0.813). AttnToNumCNN demonstrated a median AUC of 0.822 (IQR: 0.805-0.842), which permutation tests indicated was a significant improvement compared to

TextCNN (p=0.03). SHAPLey analyses indicate that the model learns to associate the terms "aki", "acute kidney injury", and "fistula placement" with MM. A correlation analysis of the numerical embeddings indicates that the model learns to incorporate both number magnitude and local context to derive semantic similarities.

Conclusion

AI methods can be used to predict outcomes after CABG using a single preoperative note. These findings may be relevant to discussions regarding the potential role of AI in registry reporting and quality improvement.