

Perspective

Artificial Intelligence in Clinical Decision-Making: A Critical Perspective on Opportunities, Limitations, and Ethical Boundaries in Real-World Healthcare

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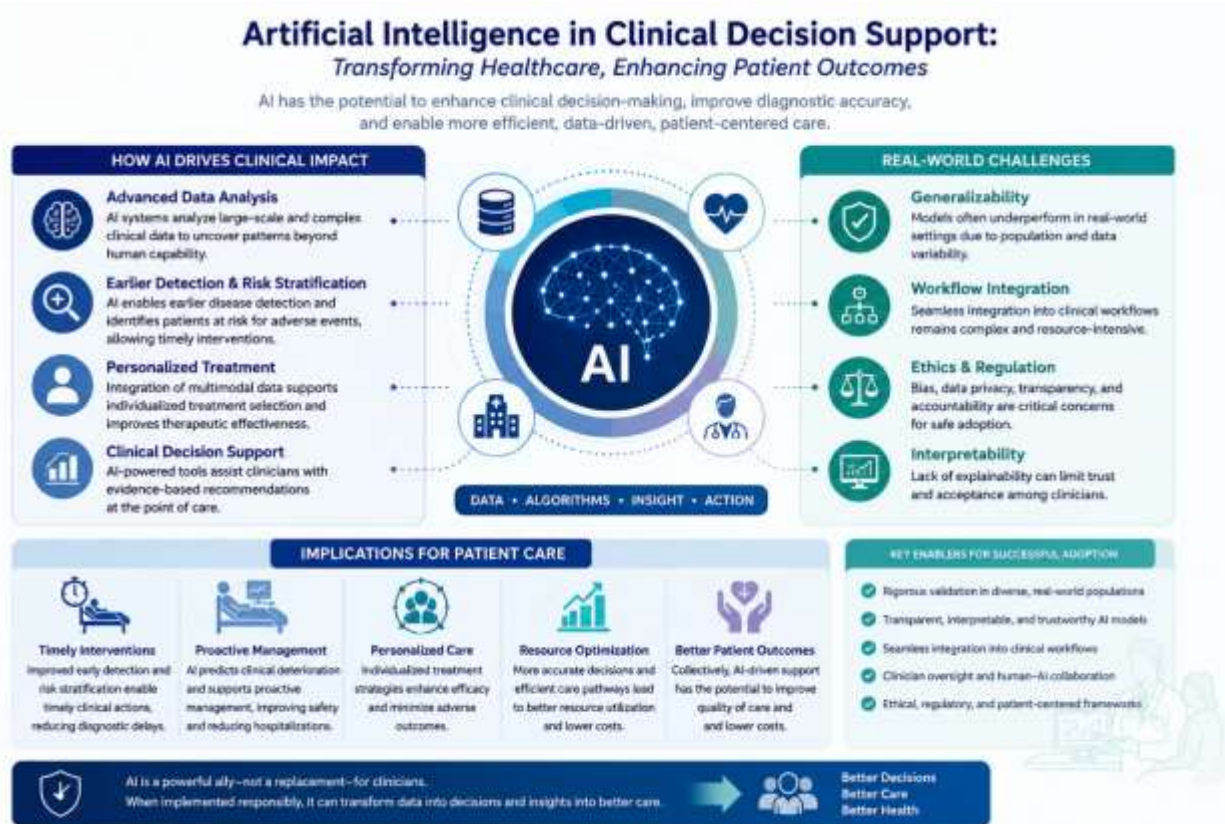
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Abstract

Artificial intelligence (AI) is increasingly reshaping modern healthcare by enhancing clinical decision-making, improving diagnostic accuracy, and optimizing healthcare delivery systems. This perspective explores the expanding role of AI across clinical decision support systems, predictive analytics, and personalized medicine, highlighting its potential to support clinicians in managing complex and data-intensive healthcare environments. Evidence from recent studies suggests that AI algorithms can achieve high performance in specific diagnostic tasks, particularly in radiology, dermatology, and pathology; however, their real-world clinical effectiveness remains dependent on robust validation, workflow integration, and generalizability across diverse populations. Despite these promising developments, the integration of AI into clinical practice raises important ethical, practical, and regulatory challenges. Key concerns include limited explainability of complex models, data privacy and security risks, and the potential for algorithmic bias that may exacerbate existing healthcare disparities. In addition, gaps between retrospective model performance and prospective clinical impact continue to limit the translation of AI tools into routine care. These challenges underscore the need for a more holistic evaluation framework that extends beyond technical performance metrics to include clinical usability, transparency, and ethical robustness. A critical appraisal of current AI applications suggests that successful implementation in healthcare depends not only on algorithmic accuracy but also on trust, interpretability, and seamless integration into clinical workflows. Furthermore, clinicians must remain central to decision-making processes, ensuring that AI functions as an assistive technology rather than a replacement for human judgment. Overall, while AI holds substantial promise for improving patient outcomes and healthcare efficiency, its safe and effective adoption requires careful attention to ethical principles, regulatory oversight, and real-world clinical validation.

Keywords: Artificial intelligence; Clinical decision support systems; Machine learning; Digital health; Predictive analytics and Personalized medicine



Graphical Abstract: Role of Artificial Intelligence in Enhancing Clinical Decision-Making and Patient Care. This graphical abstract illustrates the role of artificial intelligence in enhancing clinical decision support, improving diagnostic accuracy, and translating data-driven insights into meaningful patient care outcomes while addressing key real-world challenges in healthcare implementation.

Introduction

Artificial intelligence (AI) has rapidly emerged as one of the most transformative technologies in modern healthcare. Advances in machine learning, deep learning, and data science have enabled AI-based systems to analyze large volumes of clinical data, recognize patterns, and support clinical decision-making with unprecedented speed and accuracy. In recent years, AI applications have expanded across multiple domains of medicine, including diagnostic imaging, predictive analytics, personalized treatment planning, and healthcare management. While these technologies offer remarkable opportunities to improve patient outcomes and healthcare efficiency, they also raise important ethical, legal, and clinical concerns that require evidence-based evaluation

in real-world healthcare settings [1,2]. Taken together, these developments highlight the growing role of AI as a supportive tool in clinical practice rather than a standalone solution. Its value lies not only in improving technical performance but also in its potential to complement clinical expertise and enhance decision-making processes. However, realizing this potential requires careful consideration of how these systems are designed, validated, and ultimately integrated into everyday healthcare settings.

AI Applications in Clinical Decision Support

One of the most promising applications of AI in healthcare lies in clinical decision support systems (CDSS). AI-driven CDSS can integrate diverse datasets such as electronic health records,

laboratory findings, imaging results, and genomic information to assist clinicians in making evidence-based decisions. Studies have shown that AI algorithms can achieve diagnostic performance comparable to human experts in selected, well-defined clinical tasks under controlled or retrospective study settings, particularly in radiology, dermatology, and pathology. For instance, deep learning models have shown high performance in detecting diseases such as diabetic retinopathy, breast cancer, and lung nodules on medical imaging. By facilitating early detection and risk stratification, AI may improve clinical workflows; however, robust prospective evidence on its direct impact on patient outcomes remains limited [2,3].

In addition to diagnostic support, AI can also improve efficiency in healthcare systems. Automated data analysis and predictive modeling can help identify high-risk patients, anticipate disease progression, and optimize resource allocation. In critical care settings, machine learning models have been developed to predict sepsis, acute kidney injury, and patient deterioration before clinical symptoms become apparent. These predictive models are being increasingly evaluated in critical care settings to support earlier intervention, although their impact on hard clinical endpoints is still under investigation. Furthermore, AI technologies may alleviate administrative burdens by automating documentation, coding, and workflow processes, allowing clinicians to dedicate more time to patient care [2,4].

Ethical and Practical Challenges of AI in Healthcare

Despite these advantages, the integration of AI into clinical decision-making raises several ethical and practical challenges. One major concern relates to transparency and explainability. Many AI models, particularly deep learning systems, function as “black boxes,” producing outputs without clearly explaining how the decision was reached. This lack of

interpretability may undermine clinicians’ trust in AI recommendations and complicate accountability when errors occur. In clinical practice, physicians must be able to understand and justify diagnostic or therapeutic decisions, making explainable AI an important priority for future development [4,5].

Another critical issue involves data privacy and security. AI systems rely heavily on large datasets that often include sensitive patient information. The collection, storage, and analysis of such data create potential risks for privacy breaches and unauthorized access. Ensuring robust data protection frameworks and compliance with ethical and legal standards is therefore essential when implementing AI technologies in healthcare environments [5,6].

Bias in AI algorithms represents another significant ethical challenge. AI models are trained on historical datasets, which may reflect existing disparities in healthcare access, diagnosis, and treatment. If these biases are embedded within training data, AI systems may inadvertently perpetuate or even amplify healthcare inequalities across different populations. Addressing algorithmic bias requires careful dataset selection, continuous model evaluation, continuous external validation, prospective monitoring, and deployment in diverse real-world populations [7,8].

The Role of Clinicians in AI-Assisted Decision-Making

The role of clinicians in AI-assisted decision-making must also be clearly defined. AI should be viewed as a supportive tool rather than a replacement for human expertise. Clinical judgment, ethical reasoning, and patient-centered care remain fundamental aspects of medical practice that cannot be fully replicated by algorithms. Physicians must retain ultimate responsibility for medical decisions while critically evaluating AI recommendations within the broader clinical context [5,9].

Regulatory and Legal Considerations

Regulatory and legal frameworks are also evolving to address the rapid expansion of AI in healthcare. Regulatory agencies such as the U.S. Food and Drug Administration (FDA) and the European Medicines Agency have begun developing guidelines for the evaluation and approval of AI-based medical technologies. However, many challenges remain, particularly regarding adaptive algorithms that continuously learn from new data. Establishing clear standards for validation, safety monitoring, and accountability will be essential to ensure the safe implementation of AI systems in clinical practice [10,11].

Future Directions and Clinical Integration

Artificial intelligence has the potential to significantly reshape clinical decision-making and improve the way healthcare is delivered. It can support clinicians by improving diagnostic accuracy, enabling more personalized treatment strategies, and making healthcare systems more efficient. At the same time, integrating AI into clinical practice requires careful attention to ethical principles, transparency, data protection, and fairness in algorithm design. Achieving this balance will require close collaboration between clinicians, researchers, policymakers, and technology developers to ensure that appropriate and responsible frameworks are in place. In the end, the real success of AI in healthcare will depend on whether it can support clinicians in practice while preserving a human-centered and evidence-based approach to patient care, rather than replacing clinical judgment.

Critical Appraisal of AI in Healthcare

Artificial intelligence has demonstrated strong potential across multiple areas of healthcare, particularly in diagnostic support, risk prediction, and workflow optimization. However, its clinical value cannot be fully understood by focusing on algorithmic performance alone. In real-world

settings, the successful adoption of AI depends on how well these systems integrate into clinical workflows, how easily their outputs can be interpreted by clinicians, and how reliably they perform across diverse patient populations.

One of the key limitations of current AI systems is the gap between retrospective model performance and prospective clinical effectiveness. Many models perform well in controlled datasets but face challenges when deployed in heterogeneous, real-world environments. This raises important questions about generalizability and external validity, which remain insufficiently addressed in many studies. Importantly, this disconnect suggests that current evaluation paradigms may overestimate clinical readiness by prioritizing statistical performance over real-world usability and impact.

In addition, issues related to explainability, trust, and user acceptance continue to play a central role in determining whether AI tools are actually used in clinical practice. Even highly accurate systems may fail to influence decision-making if clinicians cannot understand or confidently interpret their outputs. Similarly, concerns regarding bias and fairness further complicate widespread implementation, particularly in healthcare systems serving diverse populations. These challenges indicate that technical optimization alone is not sufficient, and that socio-clinical factors must be treated as core evaluation criteria rather than secondary considerations.

Therefore, the evaluation of AI in healthcare should extend beyond technical performance metrics and incorporate clinical usability, workflow integration, and ethical robustness. A more holistic assessment framework is needed to ensure that AI technologies deliver meaningful improvements in patient care rather than remaining limited to experimental or technical success.

Conclusion

Artificial intelligence is progressively reshaping the landscape of modern healthcare by enhancing diagnostic accuracy, supporting clinical decision-making, and improving the efficiency of healthcare delivery systems. While current evidence demonstrates strong performance of AI systems in specific clinical tasks under controlled settings, their real-world effectiveness remains dependent on robust clinical validation, seamless integration into healthcare workflows, and continuous post-deployment monitoring. Despite its transformative potential, AI should be regarded as an adjunct to, rather than a replacement for, clinical expertise. The safe and effective implementation of AI in healthcare requires a balanced approach that integrates technological innovation with ethical responsibility, transparency, and patient-centered care. Future advancements should prioritize prospective validation studies, explainable models, and real-world clinical impact to ensure that AI-driven tools translate into measurable improvements in patient outcomes and healthcare system performance. Ultimately, the success of AI in medicine will depend not only on algorithmic performance but also on its ability to support clinicians in delivering safer, more accurate, and more equitable care.

Implications for Patient Care

The integration of artificial intelligence into clinical practice has important implications for patient care across multiple domains. First, AI-enabled clinical decision support systems may enhance early disease detection and risk stratification, potentially reducing diagnostic delays and enabling timely therapeutic interventions. This is particularly relevant in high-burden conditions such as cancer, cardiovascular disease, and infectious diseases, where early identification is strongly associated with improved outcomes. Second, AI-based predictive analytics can assist clinicians in

identifying patients at risk of clinical deterioration, allowing for proactive management strategies in both acute and chronic care settings. Such approaches may contribute to reduced hospital admissions, shorter lengths of stay, and improved allocation of healthcare resources.

Third, the use of AI in personalized medicine may support more precise treatment selection by integrating clinical, imaging, and molecular data. This has the potential to improve therapeutic efficacy while minimizing adverse drug reactions and unnecessary interventions. However, the clinical benefits of AI will only be realized if systems are implemented in a way that is transparent, clinically interpretable, and aligned with physician workflow. Poor integration may lead to alert fatigue, over-reliance on automated outputs, or underutilization of clinical judgment. Therefore, clinician oversight remains essential in all AI-assisted decision-making processes.

In addition, equitable access to AI-driven healthcare tools is critical to avoid widening existing disparities in health outcomes. Ensuring that algorithms are trained and validated on diverse populations will be necessary to promote fairness and generalizability across different patient groups. Overall, AI has the potential to significantly improve patient outcomes, but its success in clinical practice will depend on careful implementation, continuous evaluation, and alignment with patient-centered care principles.

Conflict of Interests

The author declares that there is no conflict of interest.

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Reference:

1. Bajwa J, Munir U, Nori A, Williams B. Artificial intelligence in healthcare: transforming the practice of medicine. *Future Healthc J*. 2021 Jul;8(2):e188-e194. <https://doi.org/10.7861/fhj.2021-0095>.
2. Fahim YA, Hasani IW, Kabba S, Ragab WM. Artificial intelligence in healthcare and medicine: clinical applications, therapeutic advances, and future perspectives. *Eur J Med Res*. 2025 Sep 23;30(1):848. <https://doi.org/10.1186/s40001-025-03196-w>.
3. Elhaddad M, Hamam S. AI-Driven Clinical Decision Support Systems: An Ongoing Pursuit of Potential. *Cureus*. 2024 Apr 6;16(4):e57728. <https://doi.org/10.7759/cureus.57728>.
4. Abbas Q, Jeong W, Lee SW. Explainable AI in Clinical Decision Support Systems: A Meta-Analysis of Methods, Applications, and Usability Challenges. *Healthcare (Basel)*. 2025 Aug 29;13(17):2154. <https://doi.org/10.3390/healthcare13172154>.
5. Pham T. Ethical and legal considerations in healthcare AI: innovation and policy for safe and fair use. *R Soc Open Sci*. 2025 May 14;12(5):241873. <https://doi.org/10.1098/rsos.241873>.
6. Jangid P, Meena A, Prerna R, Hashmi ZH, Kumar V, Bhagtani H. The Role of Artificial Intelligence in Safeguarding Patient Privacy in Healthcare Systems. *J Pharm Bioallied Sci*. 2025 Jun;17(Suppl 2):S1083-S1085. https://doi.org/10.4103/jpbs.jpbs_381_25.
7. Cross JL, Choma MA, Onofrey JA. Bias in medical AI: Implications for clinical decision-making. *PLOS Digit Health*. 2024 Nov 7;3(11):e0000651. <https://doi.org/10.1371/journal.pdig.0000651>.
8. Chinta SV, Wang Z, Palikhe A, Zhang X, Kashif A, Smith MA, Liu J, Zhang W. AI-driven healthcare: Fairness in AI healthcare: A survey. *PLOS Digit Health*. 2025 May 20;4(5):e0000864. doi: 10.1371/journal.pdig.0000864. Erratum in: *PLOS Digit Health*. 2025 Aug 21;4(8):e0000994. <https://doi.org/10.1371/journal.pdig.0000994>.
9. Hindhede AL, Andersen VH. The role of AI and personalized medicine in healthcare: balancing technological advancements and the art of medicine. *BMC Med Educ*. 2025 Nov 11;25(1):1580. <https://doi.org/10.1186/s12909-025-07771-x>.
10. Singh R, Zhou K, Auclair JR. Reimagining drug regulation in the age of AI: a framework for the AI-enabled Ecosystem for Therapeutics. *Front Med (Lausanne)*. 2025 Oct 16;12:1679611. <https://doi.org/10.3389/fmed.2025.1679611>.
11. Lenarczyk G, Minssen T, Price N, Rai A. The future of AI regulation in drug development: a comparative analysis. *J Law Biosci*. 2025 Nov 7;12(2):lsaf028. <https://doi.org/10.1093/jlb/lsaf028>.