

1 **Title: Applications of artificial intelligence in avian radiology: A systematic**  
2 **review of disease diagnosis, image interpretation, prognosis, and**  
3 **implementation challenges in veterinary and wildlife medicine**

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5 **Running Title: Applications of AI in avian radiology**

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28 **Abstract**

29 Recent advances in artificial intelligence (AI) and deep learning have revolutionized medical  
30 image processing. Artificial intelligence is transforming all aspects of modern veterinary medicine,  
31 increasing the accuracy, speed, and efficiency of animal healthcare. However, the primary focus  
32 of AI has so far been on human medicine, and its applications in veterinary medicine, especially  
33 in the specialized field of avian radiology, have been less systematically investigated. This  
34 systematic review aims to summarize the available evidence and analyze the current role and future  
35 potential of AI in avian radiology. A systematic search of the PubMed, Scopus, Web of Science,  
36 and Google Scholar databases was conducted for studies published between January 2020 and  
37 January 2026. Keywords included combinations of “artificial intelligence,” “machine learning,”  
38 “radiology,” “diagnostic imaging,” “birds,” “poultry,” and “veterinary medicine.” Inclusion  
39 criteria were primary studies that specifically addressed the use of AI algorithms for interpreting  
40 radiological images (e.g., radiography, CT scans) across different avian species. Of the 257 studies  
41 identified, 21 met the inclusion criteria. The analyses show that AI applications in avian radiology  
42 are mainly focused on four areas: 1) automated disease diagnosis (e.g., pneumonia, ascites, joint  
43 dislocation, foreign body detection), 2) segmentation of anatomical structures and lesions (e.g.,  
44 accurate determination of heart, liver, or pathological masses), 3) prognostic prediction (e.g.,  
45 assessment of response to treatment in chronic diseases), and 4) image quality enhancement. Most  
46 of the developed algorithms were based on convolutional neural networks (CNN) and focused on  
47 chest and abdominal radiography of domestic (ornamental) and industrial poultry. The reported  
48 accuracy in studies for specific diagnostic tasks was often above 90%, indicating the high potential  
49 of this technology. Artificial intelligence is emerging as a powerful adjunct tool in avian radiology,  
50 increasing the accuracy, speed, and objectivity of image interpretation. AI has significant potential  
51 to assist general veterinarians and specialized radiologists. However, significant challenges,  
52 including limited access to large, well-annotated databases (data limitations), wide anatomical  
53 variation across avian species, and the need for validation in real clinical settings, have hindered  
54 widespread deployment of this technology.

55 **Keywords:** Artificial intelligence, Birds, Deep learning, Disease diagnosis, Radiology

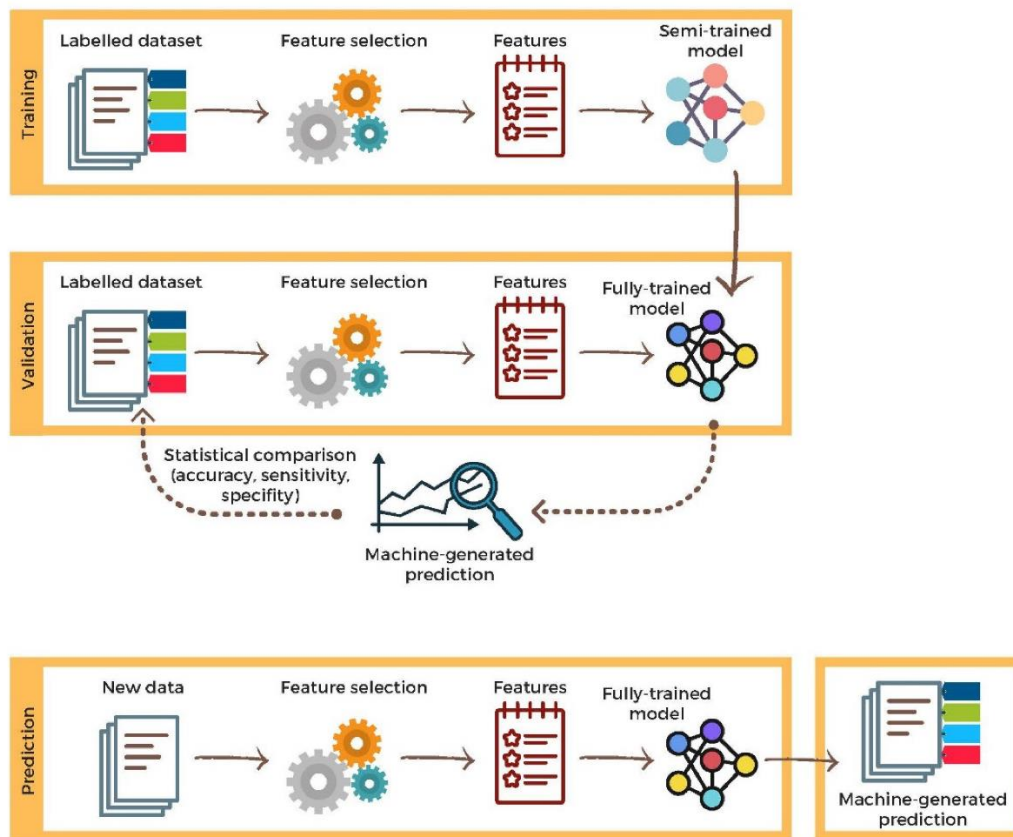
56 **1. Context**

57 The poultry industry, as well as the care of domestic and wild birds, plays a vital role in food  
58 security, the economy, and biodiversity conservation [1-5]. In this context, diagnostic imaging,  
59 particularly radiology, has become an essential component in diagnosing diseases, assessing  
60 injuries, and monitoring bird health [6, 7]. However, interpreting radiological images in birds poses  
61 unique challenges. The incredible diversity in size and anatomical morphology across species,  
62 from domestic chickens to ornamental parrots and birds of prey, requires in-depth specialist  
63 knowledge [8]. In addition, physiological differences, such as the presence of air sacs, complicate  
64 the interpretation of lesions. These factors make radiographic analysis often time-consuming and,  
65 at the same time, somewhat dependent on the radiologist's experience and subjective judgment,  
66 leading to discrepancies in diagnoses between specialists [9].

67 Artificial intelligence is transforming all aspects of modern veterinary medicine, increasing the  
68 accuracy, speed, and efficiency of animal healthcare [10]. In diagnostics, deep learning algorithms  
69 can analyze medical images such as radiographs, ultrasound images, and pathology slides with  
70 accuracy comparable to, or even exceeding, that of human experts, and can detect small tumors,  
71 hairline fractures, or metastases in their early stages [11]. The technology also plays a vital role in  
72 preventive medicine, where big data and predictive models can be used to forecast the spread of  
73 infectious diseases across large herds and prevent significant economic losses through timely  
74 intervention [12]. In addition, smart devices equipped with computer vision and wearable sensors  
75 allow for continuous monitoring of vital signs, behavioral patterns, and even pain and stress levels  
76 in animals, providing veterinarians and animal owners with early warnings of emerging health  
77 problems [13]. AI has even penetrated the field of surgery, where AI-guided robotic systems help  
78 surgeons perform more precise, minimally invasive procedures and shorten animal recovery times.  
79 Ultimately, by personalizing treatment and health management, from pets to large livestock  
80 populations, this technology will not only improve the quality of life of animals but also contribute  
81 to the sustainability and productivity of the livestock industry and even the public health of humans  
82 (through the control of zoonotic diseases and even pandemic prevention) [14-16].

83 In recent years, the revolution in AI, particularly its leading branch, deep learning, has pushed the  
84 boundaries of medical and veterinary science (Figure 1). In medicine, AI algorithms are now being  
85 used as efficient assistants in screening, diagnosing, and even predicting disease outcomes from

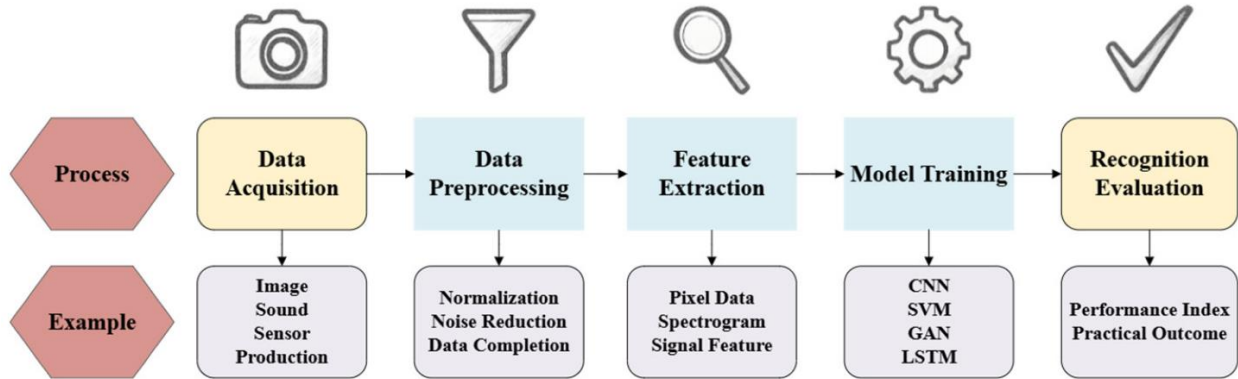
86 radiological images [17]. By learning from thousands of annotated images, these systems can  
87 identify subtle patterns and quantify image features that may be hidden from the human eye [18,  
88 19]. This potential raises the fundamental question of whether AI can address the challenges facing  
89 avian veterinary radiology and revolutionize the accuracy and efficiency of diagnosis in this field  
90 [20-23].



91

92 Figure 1. A brief description of supervised learning flowchart, including training, validation, and  
93 prediction (MDPI Copyright, 2022) [24].

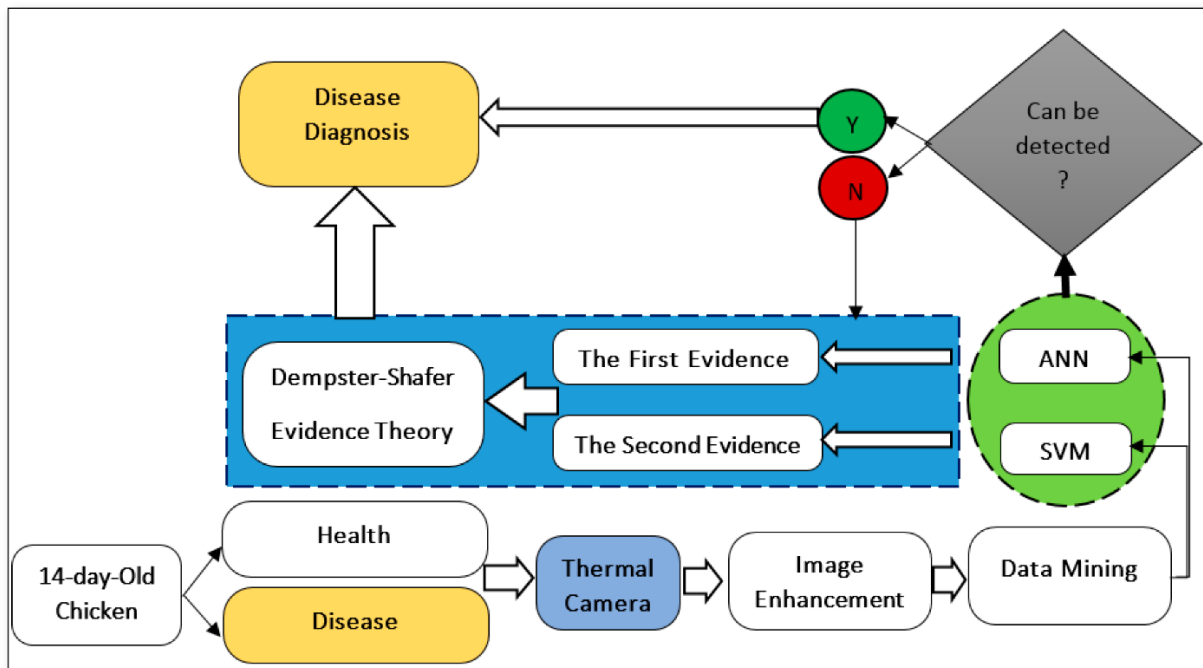
94 Although interest in automation and computer assistance in agriculture and veterinary medicine is  
95 growing, the existing research literature on the application of AI in avian radiology is sparse and  
96 limited primarily to proof-of-concept studies for specific species or diseases [25]. The lack of a  
97 systematic review that provides a comprehensive picture of the current status, practical  
98 applications, success rates, and barriers to this emerging technology is clearly evident (Figure 2).  
99 This gap prevents the veterinary community from fully understanding AI's true capabilities and  
100 from guiding future research in the most effective directions (Figure 3).



101

102 Figure 2. AI data processing workflow in chicken farming. CNN: Convolutional Neural Network;  
 103 SVM: Support Vector Machine. GAN: Generative Adversarial Network; LSTM: Long Short-Term  
 104 Memory (MDPI Copyright, 2025) [26].

105



106

107 Figure 3. Proposed algorithm framework to identify avian diseases. ANN is artificial neural  
 108 network, and SVM is support vector machine (MDPI Copyright, 2023) [27].

109

110 The primary goal of this systematic review is to collect, evaluate, and critically synthesize all  
111 available scientific evidence on the use of AI algorithms in avian radiological image analysis. This  
112 study intends to carefully analyze these studies to clearly delineate the role of AI in key diagnostic  
113 radiology tasks, including automated disease diagnosis (e.g., pneumonia, ascites, or fractures),  
114 segmentation and measurement of anatomical structures (e.g., viscera), and image quality  
115 enhancement.

116

## 117 **2. Data Acquisition**

118 This systematic review was designed and conducted in accordance with the Preferred Reporting  
119 Items for Systematic Reviews (PRISMA 2020) guidelines to identify, evaluate, and synthesize all  
120 studies related to the use of AI in avian radiology. The primary focus was on studies published or  
121 available between January 2020 and January 2026.

### 122 **2.1. Search strategy and information sources**

123 To conduct a comprehensive and systematic search, a structured search strategy was designed  
124 between January 2020 and January 2026 in consultation with a medical informatics expert. The  
125 search was conducted in central and international databases, including PubMed/MEDLINE,  
126 Embase, Scopus, Web of Science Core Collection, and IEEE Xplore. To maximize coverage and  
127 include grey literature and studies published in specialized veterinary journals, a search also be  
128 completed in Google Scholar. Only English studies were included. Keywords and terms were  
129 defined using a combination of controlled terms (such as MeSH in PubMed and Entree in Embase)  
130 and free terms in the main fields of "artificial intelligence", "diagnostic imaging", "birds", and  
131 "veterinary". An example of such a combination is: ("artificial intelligence" OR "machine  
132 learning" OR "deep learning" OR "neural network\*" OR "computer-aided diagnosis") AND  
133 ("radiography" OR "diagnostic imaging" OR "tomography" OR "x-ray") AND ("bird\*" OR  
134 "avian" OR "poultry" OR "fowl") AND ("veterinary" OR "animal").

### 135 **2.2. Study selection and screening criteria**

136 Study selection was based on the PICOS (Population, Intervention, Comparison, Outcome, Study  
137 design) framework as follows:

138 Population (P): Studies that focus on radiological images (including radiography, CT scan,  
139 fluoroscopy, ultrasound) from any bird species (industrial poultry such as chickens, turkeys;  
140 domestic birds; wild birds or wildlife).

141 Intervention (I): Development, training, validation, or application of an AI, machine learning, or  
142 deep learning algorithm (such as convolutional neural networks) to automatically analyze these  
143 images. This analysis could include disease diagnosis, segmentation of anatomical structures,  
144 image classification, or image quality enhancement.

145 Comparison (C): The presence of a reference standard for evaluating algorithm performance, such  
146 as the interpretation of one or more veterinary radiologists, necropsy findings, or definitive  
147 laboratory results.

148 Outcome (O): Reporting of at least one quantitative measure of diagnostic or analytical  
149 performance, such as accuracy, sensitivity, specificity, area under the ROC curve (AUC), or  
150 similar measures.

151 Study design (S): All primary studies (cross-sectional, cohort, case-control) and predictive  
152 modeling studies reporting primary data. Review studies, theoretical articles, conference abstracts  
153 without full text available, and studies lacking an appropriate reference standard or quantitative  
154 assessment of performance will be excluded.

### 155 **2.3. Study selection and screening process**

156 All search results were entered into reference management software (EndNote), and duplicates  
157 were removed. The screening process was conducted in two stages by two independent reviewers  
158 based on the title and abstract (stage 1) and then the full text of the articles (stage 2), in accordance  
159 with the PICOS criteria. Any disagreements between reviewers are resolved through discussion  
160 and, if necessary, by a third reviewer's vote. The reasons for excluding each study during the full-  
161 text screening stage were recorded and reported. The overall flow of study selection was outlined  
162 and presented in a PRISMA diagram. In addition to the initial search, a literature review of relevant  
163 review articles and selected final studies was conducted to identify additional sources and ensure  
164 that all relevant evidence has been identified between January 2020 and January 2026.

### 165 **2.4. Data extraction**

166 Data from the final eligible studies will be extracted by two independent reviewers using a standard  
167 data extraction form designed prior to the study. This form included sections such as general study  
168 characteristics (authors, year, country), methodological characteristics (study type, number and  
169 species of birds, imaging type), AI algorithm characteristics (model type, architecture, training/test  
170 dataset), key results (performance metrics such as accuracy, AUC, sensitivity, specificity), and  
171 principal conclusions.

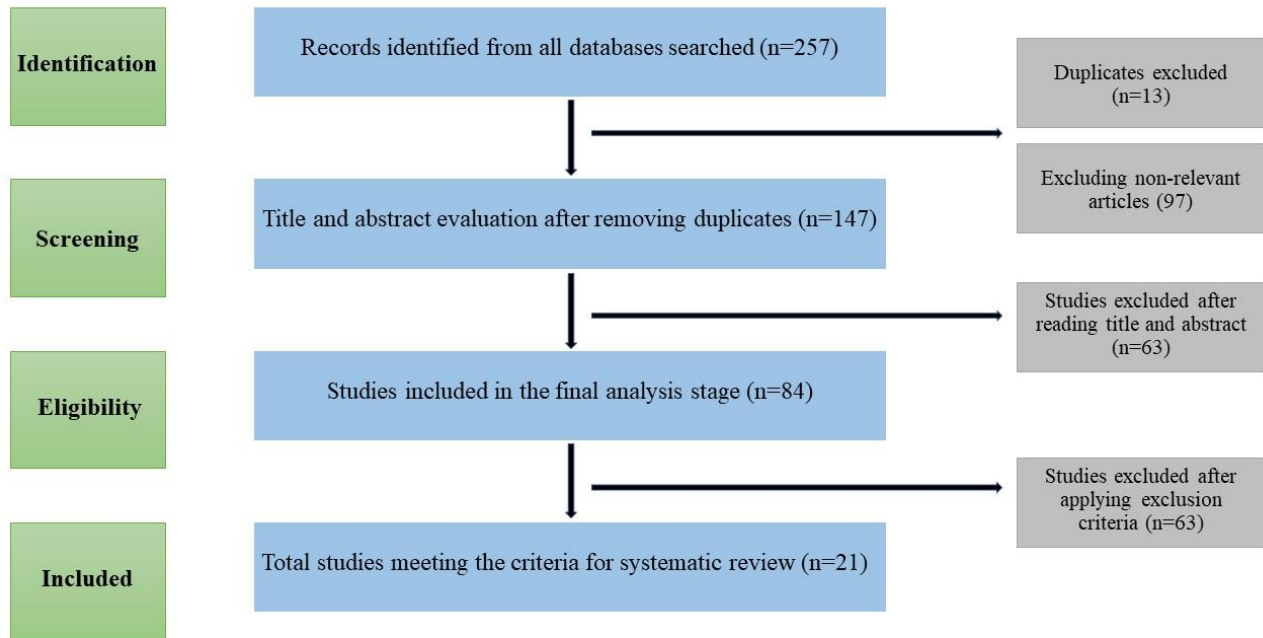
## 172 **2.5. Data synthesis and analysis**

173 Given the expected heterogeneity of the studies (in terms of bird species, diseases investigated,  
174 types of algorithms, and reported measures), a descriptive qualitative synthesis is considered the  
175 main approach to synthesize the evidence. The findings were categorized and summarized in tables  
176 and text, structured around the main AI applications (detection, segmentation, prediction), the  
177 types of algorithms used, and the species studied.

178

## 179 **3. Results and Discussion**

180 Of the 257 studies identified, 21 met the inclusion criteria (Figure 4). The analyses show that AI  
181 applications in avian radiology are mainly focused on four areas: 1) automated disease diagnosis  
182 (e.g., pneumonia, ascites, joint dislocation, foreign body detection), 2) segmentation of anatomical  
183 structures and lesions (e.g. accurate determination of heart, liver, or pathological masses), 3)  
184 prognostic prediction (e.g. assessment of response to treatment in chronic diseases), and 4) image  
185 quality enhancement [22, 25, 28-32]. Most of the developed algorithms were based on  
186 convolutional neural networks (CNN) and focused on chest and abdominal radiography of  
187 domestic (ornamental) and industrial poultry.



188

189 Figure 4. This figure illustrates the current study design and the PRISMA study selection process.

190

### 191 3.1. Pneumonia diagnosis

192 The results of this systematic review revealed that the predominant focus of applied AI studies in  
 193 avian radiology has been on industrial poultry, particularly broilers and turkeys. This is mainly  
 194 due to the high economic need for rapid, automated diagnostic methods in large flocks, as well as  
 195 the relatively easy access to large volumes of standardized image data in this industry. Pneumonia  
 196 (especially bacterial pneumonia caused by agents such as *Ornithobacterium rhinotracheales* and  
 197 *Escherichia coli*) was identified as the most common diagnostic target in this area [33-37]. Deep  
 198 learning-based algorithms, specifically CNNs such as the ResNet and EfficientNet architectures,  
 199 have demonstrated their ability to distinguish healthy chest radiographs from those with  
 200 pneumonia with accuracies often exceeding 95%. These models have generally focused on  
 201 identifying diffuse opacity patterns in the lung parenchyma and the alveolar region.

### 202 3.2. Promising performance in the detection of other diseases and abnormalities

203 Although the study volume is smaller, there is considerable evidence of AI's potential for detecting  
204 a broader range of pathological conditions across different bird species. In domestic and  
205 ornamental birds (such as parrots), algorithms for detecting ascites (fluid accumulation in the  
206 abdominal cavity), hepatomegaly (enlarged liver), and visceral masses have been tested with initial  
207 success [38-40]. Furthermore, in the orthopedic field, AI systems have demonstrated the ability to  
208 automatically detect long-bone fractures, joint dislocations, and even metabolic bone  
209 abnormalities. An interesting application area is the detection of metallic and non-metallic foreign  
210 bodies in gizzards, which could be of immediate clinical value, especially in emergency cases. The  
211 reported accuracy in these diverse tasks typically ranges from 85% to 93%.

### 212 **3.3. Capable of precise anatomical segmentation and quantitative measurement**

213 Beyond qualitative recognition, one of the most powerful applications of AI highlighted in the  
214 reviewed studies was the semantic segmentation of specific anatomical structures. Models such as  
215 U-Net achieved very accurate performance in separating pixels from the heart, liver, spleen,  
216 kidneys, and air sac regions in avian radiographs [41-43]. This capability allows for the  
217 quantitative measurement of vital parameters; for example, the automatic calculation of the  
218 cardiothoracic ratio, an important indicator of cardiomegaly, or the precise determination of liver  
219 volume and dimensions. This objective and repeatable quantification not only provides clinicians  
220 with a valuable tool for monitoring subtle changes over time or response to treatment, but can also  
221 promote standardization of image interpretation.

### 222 **3.4. Challenge of species diversity and data limitation**

223 Despite promising results, a comprehensive analysis of the studies revealed a fundamental and  
224 common challenge: severe data limitations and issues of generalizability. The vast majority of  
225 models developed have been trained on data from a specific species (mainly chickens) and often  
226 from a specific center or scanner. When these models are tested on images of other species with  
227 different anatomy (such as broad-breasted birds of prey or small ornamental birds) or even images  
228 captured with different imaging techniques, a significant drop in performance is observed. This is  
229 due to the enormous anatomical, size, and physical variation in the avian world, which makes it  
230 very difficult to create a “universal” model. The small size of the training datasets (often less than  
231 a few hundred images) also increases the risk of overfitting.

232 **3.5. Gap between testing and real clinical implementation**

233 Another important finding is a significant gap between the ideal testing environment and real  
 234 clinical conditions. Many studies have used “clean,” preselected datasets in which high-quality  
 235 images and clear diagnostic cases predominate. In practice, however, radiographs obtained in  
 236 clinics may face challenges such as suboptimal patient positioning, insufficient contrast, image  
 237 ambiguities, or concomitant diseases that significantly affect algorithm performance [44, 45]. Very  
 238 few of the identified studies have evaluated the performance of their model in a prospective clinical  
 239 trial or in a direct comparison with general veterinarians (not just radiologists). This suggests that  
 240 the technology is still mainly in the proof-of-concept and research phase and is far from being  
 241 smoothly integrated into the daily workflow of veterinary clinics (Table 1).

242 **Table 1.** The gap between testing and real clinical implementation

Aspect	Controlled Research Environment	Real-World Clinical Environment
Data Quality	Curated, high-quality images with clear pathologies.	Variable quality, suboptimal positioning, poor contrast, and artifacts.
Case Complexity	single disease or clear cases.	Co-morbidities, ambiguous findings, and early or subtle disease stages.
Reference Standard	Expert radiologist consensus or necropsy is the gold standard.	Limited access to specialists; diagnosis often based on response to treatment.
Evaluation Metric	High accuracy, sensitivity, and specificity on test sets.	Impact on workflow efficiency, user trust, and final patient outcome.
Target User	Algorithm developers and researchers.	General veterinarians and technicians with varying levels of expertise.

243

244 **3.6. Future prospect**

245 The present review also identified several emerging trends and promising areas for future research.  
 246 First, there is a trend towards developing multi-task models that can simultaneously segment  
 247 multiple organs and screen for multiple diseases. Second, the use of transfer learning and few-shot  
 248 learning techniques to address data scarcity for rare species is being explored [46, 47]. Third, the  
 249 application of AI to more advanced imaging, such as CT scanning, has begun to create accurate

250 3D models of avian anatomy. However, large areas remain underexplored: applications in wildlife  
 251 birds, diagnosis of degenerative joint diseases, prediction of chronic disease prognosis, and  
 252 development of ethical and professional standards for the use of this technology in veterinary  
 253 medicine (Table 2).

254 **Table 2:** Emerging trends and areas for further research

Trend / Area	Description	Potential Impact
<b>Multi-Task Models</b>	Single models perform segmentation, classification, and detection simultaneously.	Increases efficiency and provides comprehensive image analysis.
<b>Advanced Imaging (CT)</b>	Application of AI to 3D cross-sectional imaging, like computed tomography.	Enables detailed 3D anatomical modeling and complex disease assessment.
<b>Transfer / Few-Shot Learning</b>	Techniques to train models with limited data from rare or new species.	Solves the data scarcity problem for non-poultry and wildlife species.
<b>Clinical Decision Support</b>	Systems integrating AI findings with other data for actionable recommendations.	Moves beyond detection to aiding in treatment planning and prognosis.
<b>Wildlife &amp; Conservation</b>	Use of AI in imaging for endangered species health monitoring and research.	Expands the field's scope to ecological and conservation medicine.

255

256 To overcome these challenges and accelerate the transfer of this technology from the laboratory to  
 257 the clinic, specific research strategies are proposed. The priority is to create and share standardized  
 258 multicenter and international databases containing high-quality images of diverse bird species,  
 259 carefully annotated by multiple experts, and accompanied by clinical and pathological data.  
 260 Second, future research should move towards developing robust and adaptable algorithms that can  
 261 overcome differences in species diversity and imaging techniques by leveraging techniques such  
 262 as strong transfer learning, domain-blind learning, and multitask learning. Third, it is essential to  
 263 design rigorous and prospective clinical evaluations to measure the performance, efficiency, and  
 264 ultimately the impact of AI on bird health outcomes and veterinary decision-making in real-world  
 265 settings. Fourth, research in less-explored areas, such as CT image analysis, multimodal data

266 integration (e.g., image and laboratory data), and interpretive decision support systems, should be  
267 encouraged.

268 At the levels of development and practical implementation, close collaboration among AI  
269 engineers, veterinary radiologists, and avian clinicians is an undeniable necessity for the systems  
270 to be truly responsive to clinical needs and user-friendly. The development of ethical and  
271 professional standards, guidelines, and protocols for the use of AI in veterinary diagnostics,  
272 including accountability and transparency in decision-making, should be on the agenda of  
273 professional bodies. To foster this interdisciplinary field, it would be very beneficial to establish  
274 training programs and specialized courses that explain the basic concepts of AI to veterinary  
275 students and professionals, and the principles of avian anatomy and pathology to data scientists.

276 The future of avian radiology is likely to see a close coexistence and collaboration between  
277 radiologists' expert intelligence and AI. AI systems will act as powerful "digital assistants" that  
278 reduce the workload of interpreting large volumes of images, provide early warnings of subtle  
279 abnormalities, and provide valuable quantitative data. This collaboration could not only improve  
280 the level of bird care in the poultry industry, companion animal medicine, and wildlife  
281 conservation, but also enable the advancement of epidemiological and physiological research.  
282 Realizing this vision requires a sustained commitment to rigorous interdisciplinary research,  
283 investment in data infrastructure, and the definition of professional frameworks. The road ahead  
284 is challenging but full of opportunities, and navigating it will create a more accurate, efficient, and  
285 evidence-based future for the health of all birds.

286

#### 287 **4. Conclusion**

288 This systematic review, while identifying the significant potential of AI, revealed major obstacles  
289 to its maturity and widespread application in avian radiology. A key challenge is the severe  
290 shortage of large, diverse, and well-annotated public datasets. Many studies have been conducted  
291 on small, private datasets, making direct comparisons of algorithms and the generalizability of  
292 findings impossible. The wide anatomical variation among avian species exacerbates the difficulty  
293 of generalizing models and highlights the need for intelligent architectures or specific learning  
294 approaches. From a methodological perspective, the heterogeneous quality of studies is a

295 limitation; some lack a strong reference standard, appropriate data segmentation, or transparent  
296 reporting of performance measures. Furthermore, the gap between the research environment and  
297 clinical reality is profound, as most algorithms have been tested under ideal conditions and on  
298 clear cases, and their effectiveness in the face of variable image quality and ambiguous diagnoses,  
299 as standard in practice, remains unclear. In summary, AI is rapidly advancing in avian radiology  
300 and promises to revolutionize the accuracy, efficiency, and standardization of imaging diagnostics  
301 by automating routine interpretations, providing objective quantitative measurements, and aiding  
302 complex diagnoses. Early evidence is very promising, particularly for diagnosing avian pneumonia  
303 and for anatomical segmentation. However, the technology is still in its early stages of maturity,  
304 and significant obstacles must be overcome to fully realize its promise, including the lack of  
305 diverse data, the difficulty of generalization across species, and the gap between research and  
306 clinical application.

307

Preprint

308 **Declarations and statements**

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311 **Author contribution**

312 Conceptualization: [Z.B.], ...; Methodology: [All Authors], ...; Formal analysis and investigation:  
313 [All Authors], ...; Writing - original draft preparation: [S.Gh., L.B., M.H.M.]; Writing - review  
314 and editing: [S.Gh., L.B., M.H.M.], ...; Funding acquisition: [Self-funding], ...; Supervision:  
315 [Z.B.]. All authors checked and approved the final version of the manuscript for publication in the  
316 present journal.

317 **Conflict of interest:**

318 The authors declare no conflict of interest.

319 **Ethical approval**

320 Not applicable

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322 No Funding.

323 **Data availability**

324 The datasets generated during and/or analyzed during the current study are available from the  
325 corresponding author upon reasonable request.

326 **Declaration of the use of generative AI**

327 Not used for any purposes

328

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