

AI-Driven Healthcare Data Management and Predictive Analytics using Cloud Computing and Secure Authentication

¹Vijai Anand Ramar

Delta Dental Insurance Company, Georgia, USA vijaianandramar@gmail.com

⁴Venkataramesh Induru

Piorion Solutions Inc, New York, USA venkatarameshinduru@gmail.com

³Karthik Kushala

Celer Systems Inc, Folsom, California, USA karthik.kushala@gmail.com

⁴Priyadarshini Radhakrishnan

IBM Corporation, Ohio, USA, priyadarshinir990@gmail.com

⁵R. Pushpakumar

Department of Information Technology, Vel Tech Rangarajan Dr. Sagunthala R&D Institute of Science and Technology, Tamil Nadu, Chennai, India. pushpakumar@veltech.edu.in

ABSTRACT

This study presents the improvements in health service delivery and revenue management of health-related data, mainly relying on real-time predictive analysis, anomaly detection, and personalized care management. A system for data collection organized through structured methodology involves a variety of sources of health care data such as electronic health records (EHR), wearable sensors, and medical devices. It has the intricate processes through pre-processing, handling missing values, normalizing, and extracting features through the Fast Fourier Transform (FFT) technique. The pre-processed data have been secured while still permitting organization for further processing and analysis. Multi-factor authentication (MFA) was set up to safeguard patient information for confidentiality. Different performance metrics were involved in evaluating the models with the total accuracy of 96.44%, precision 95.80%, recall 94.95%, and F1 score 95.37% and validated the strength of predicting health outcomes. The current integrated frame thus provides an increasingly strong justification for predictive health-care initiatives and the study of artificial intelligence, cloud computing, RNNs, and security and protection measures in data storage systems.

Keywords: Artificial Intelligence, Cloud Computing, Recurrent Neural Networks, Data Preprocessing, Feature Extraction, Multi-factor Authentication, Healthcare Prediction.

1. INTRODUCTION

Integrating Artificial Intelligence (AI) and Cloud Computing in today's health facility has won a lot towards improvement in service-delivery, data management, and patient care [1]. With AI algorithms, one can analyse large-scale medical data for more accurate diagnoses, predictive analysis, and personalized treatment plans with the help of cloud infrastructure's high computing capability [2]. Hospitals and bulk research institutions are moving to AI-based solutions for issues such as optimum resource use, quick decisions, and management of disease [3]. Cloud computing has made it affordable for healthcare organizations to store large volumes of data securely and also created a network for real-time access to that data from multiple devices and systems [4]. Integration saves on operational costs and time, improving the healthcare delivery system while giving data-driven insights that can improve





patient care [5].

The volume and complexity of data in the health care industry are increasing, as seen in patient records, diagnostic imaging, and real-time monitoring data [6], which all call for advanced computational techniques for efficient storage, processing, and analysis [7]. Most traditional health systems suffer from silos which impede the availability of medical information [8]. Besides, the increasing demand for personalized and precision medicine makes it imperative to put together large data sets in order to achieve higher predictive accuracy [9]. Cloud computing can provide infrastructure to maintain such large data, while AI models will be tasked with analysing this data, to extract knowledge [10]. Another factor that drives the integration of AI into healthcare is value-based care, which focuses on measuring [11] the patient's outcome as opposed to the number of services provided. As IoT devices increasingly get adopted in the health sector [12], the need for secure, scalable cloud solutions that integrate data in real-time through various sources will only become more pressing [13].

Although AI and Cloud Computing have diversified advantages, they also face various challenges [14]. Data privacy and security are the most important concerns [15]. Data in hospitals is incredibly sensitive, and its breach leads to severe consequences in terms of identity theft, financial loss, or regulatory fines [16]. Therefore, robust security measures in cloud environments such as encryption, multi-factor authentication, and access control are needed [17]. Moreover, the integration of AI-enabled systems with existing infrastructures is another barrier in health setups. This is because many hospitals or healthcare facilities are still under the legacy systems that may not work well with a newer cloud solution leading to problems in data integration [18]. In addition, AI establishes a new risk about model transparency and accountability due to dependence on machines for decision making [19]. Some AI algorithms are referred to as "black boxes" primarily because they are very difficult for medical personnel to understand how they make their decisions. Hence, this creates mistrust in its [20]. A multi-tiered strategy is required to address these problems. Milder security rules accentuated by end-to-end encryption and blockchain to verify records could better shield highly sensitive healthcare data in cloud environments [21]. These technologies will further provide transparency and traceability necessary for secure data management [22]. Meanwhile, integrating new AI systems with legacy healthcare systems can be simplified by increasing the number of protocols and open application programming interfaces (APIs) used across different healthcare systems [23]. AI models must also be developed with the explicability in mind so that the healthcare provider understands how AI predicts the outcome [24]. In addition, multilateral cross-sector partnerships between technology corporations, healthcare entities, and regulatory agencies could result in clear data governance frameworks defining the ethical use of AI in healthcare in terms of patient privacy and rights [25]. Thus, AI and Cloud Computing will continue to be the cornerstones of innovation in healthcare services in overcoming these challenges making services affordable, efficient, and effective [26].

Recent advancements in federated learning promise privacy-preserving AI models in healthcare [27]. AI-driven predictive analytics can reduce hospital readmissions and improve chronic disease management [28]. Integration of blockchain with AI enhances data security and auditability in medical records [29]. Edge computing combined with AI and cloud provides faster processing for real-time health monitoring [30]. AI-enabled natural language





processing supports medical documentation and decision support [31]. Automated anomaly detection using AI can alert clinicians to critical patient conditions [32]. Cloud-based AI platforms facilitate collaborative research and data sharing among institutions [33]. Challenges in AI ethics and bias require ongoing oversight and inclusive data practices [34]. Implementation of AI in rural healthcare settings can improve access to specialist care [35]. AI-powered telemedicine platforms have expanded during global health crises [36]. Continuous training of AI models with updated datasets is essential to maintain accuracy [37]. Future healthcare systems will rely on AI and cloud synergy to drive personalized, scalable, and secure care delivery [38].

1.1 CONTRIBUTIONS

- > The study appropriately connects AI with cloud computing to enhance healthcare service delivery beyond real-time predictive analytics, anomaly detection, and efficient data management for better decision-making and patient care.
- New preprocessing methods deal with missing values, normalization, and FFT for feature extraction for anomaly detection and disease prediction in health-care data.
- The MFA in this work helps to ensure that sensitive healthcare data are protected from unmerited destruction of patient data while providing high availability and access for AI-driven analysis.
- The proposed model based on the RNN architecture for healthcare has been exhaustively tested against other key performance metrics, demonstrating its viable prediction of healthcare outcomes and thus applicability in the real-life healthcare scenario.

2. LITERATURE SURVEY

Proposes that an Intrusion Detection System (IDS) based on a Tab-Transformer that employs a self-attention mechanism to improve feature dependency modelling and real-time classification of structured network traffic, which has been assessed on various standardized datasets such as NSLKDD and CICIDS 2017 [39]. B. S. proposes that a cloud-based fraud detection mechanism using CNN running on AWS Lambda to detect live fraud in Core Banking Systems (CBS) [40]. The processed features of transactions considered by the model in fraud detection include the following: amount, location, and behaviour of transactions [41]. Proposes a hybrid AI architecture of fog and cloud for real-time ECG interpretation, where fog computing focuses on low-latency processing and cloud computing aids advanced analysis; the system upsurges cardiovascular anomaly detection, accuracy, and energy efficiency [42]. The model is guided by promoting disease prediction accuracy and efficiency via the proposed Hybrid LSTM-Attention model optimized via Bayesian Optimization dealing with challenges of feature selection, long-range dependencies, and computational cost in the context of a cloudassisted healthcare system [43]. It proposes that hybrid AI integrates Memory-Augmented Neural Networks, Hierarchical Multi-Agent Learning, and Concept Bottleneck Models to improve memory efficiency, agent coordination, decision transparency, and adaptability to complex, memory-dependent tasks [44]. A complete framework integrating AI, Big Data Mining, and IoT for optimized healthcare performance, better patient care, and sustainability by being able to advance predictive analytics, resource utilization, and operational efficiency is proposed [45]. This research introduces a framework with a deep learning infrastructure that integrates analytics from the EHR and data from wearable devices to enable real-time clinical decision support, disease progression modelling, and personalized treatment recommendations, thus improving healthcare outcomes and operational efficiencies [46]. The integration will couple Graph Neural Networks and Long Short-Term Memory networks to augment real-time anomaly detection and security breach detection by understanding both spatial and temporal patterns across distributed software systems [47].

A cloud-based fraud detection system built on artificial intelligence and machine learning is presented with artificial intelligence designed for XGBoost for structured data and autoencoders for anomaly detection, coupled with AWS Lambda and S3, which all come together for online fraud detection on the Online Payments dataset [48]. This paper proposes a threat detection model based on LSTM architecture for healthcare cloud-dependent security. This works through Azure services in order to analyse logs for security, looking for any kind of abnormal accesses like unauthorized access or ransomware and then providing risk mitigation through the IoT Healthcare Security Dataset [49]. The contrived hybrid cryptographic key generation will use Super Singular Elliptic Curve Isogeny Cryptography (SSEIC) synergistically with MSADE and GFGSO algorithms to improve security of keys while lowering the computing cost and resistance to quantum attacks for the Internet of Things

ISSN: 2249-7196





Vijai Anand Ramar / International Journal of Management Research & Review

[50]. Networking analysis, comparative effectiveness research, ethnography within big data, including EHRs and AI analytics, would be used to create cost-effective, highly personalized treatment plans for patients improving cardiovascular disease outcomes [51]. This paper proposes a model of probability prediction of trust integrating deep learning and Bayesian inference for real-time assessment of trust in the cloud environment, in which security, scalability, and efficiency improve through dynamic evaluation of trust, anomaly detection, and reinforcement learning [52]. This research focuses on the argument that AI and ML act as enablers for workforce management by enhancing staff recruitment, shift scheduling, performance evaluation, talent acquisition, and skill development, levitating all reinforcement learning through natural language processing and predictive analytics for operational efficiency and accuracy of decisions [53]. Further studies explore the implementation of federated learning techniques to maintain data privacy while enabling collaborative model training across healthcare institutions [54]. AI-driven predictive maintenance models have been developed to anticipate failures in cloud infrastructure, reducing downtime and costs [55]. The integration of explainable AI frameworks improves clinicians' trust by making AI decision-making processes more transparent and interpretable [56]. AI-powered edge computing systems allow real-time data processing near the data source, significantly reducing latency in healthcare monitoring applications [57]. Novel hybrid architectures combining deep learning and blockchain have been proposed to enhance data security and auditability in cloud-based health data sharing [58].

2.1 PROBLEM STATEMENT

Currently, healthcare increasingly manifests more complex patterns and higher volumes of data that usually challenge real-time decision-making attempts in healthcare systems [59]. Traditional methods used for data analysis and resource management seem inadequate when it comes to the high volumes and complexities of datasets and would instead create delays rather than speed up the decision-making process, limit resource applications and lead to unfavourable outcomes in patients [60]. Likewise, traditional existing systems do not seem to appreciate or accommodate mainstream scalability that is necessary to manage increasingly huge amounts of healthcare data [61]. Cloud computing has emerged as a revolutionary panacea that offers scalable resources and supports real-time collaborative access to data [62]. Despite this, gaps still exist in exploiting advanced analytical techniques like Particle Swarm Optimization (PSO) with Time-Varying Acceleration Coefficients (TVAC) for optimizing healthcare data analysis [63]. In terms of predictive analytics for medicine and optimization of resources, healthcare systems still miss the marks as far as making accurate and timely decisions go [64]. It proposes the integration of PSO-TVAC and machine learning models into cloud computing so that healthcare can be better analysed, resources optimally utilized, and decisions made faster [65].

3.PROPOSED METHODOLOGY

The proposed methodology describes a holistic framework of the integration of AI and cloud computing into healthcare services and data management. At first, the study aims at collecting different kinds of health-related data from heterogeneous sources such as electronic health records (EHRs), medical devices, and wearable sensors. The data goes through a rigorous preprocessing of missing values, normalization, and complex feature extraction techniques, such as fast Fourier Transform (FFT), which transforms time-domain signals into frequency-domain features that would critically be used to detect anomalies in health data. Thereafter, data is deposited into secure cloud storage and is made highly available for AI-based model development, particularly RNN-based applications focusing on sequential data analysis and the health outcome prediction. A multi-factor authentication (MFA) security feature is designed to secure patient data further by denying unauthorized access to the data. This methodology thus provides a robust, scalable, and secure infrastructure for improved healthcare delivery, predictive analytics, and operational efficiency.



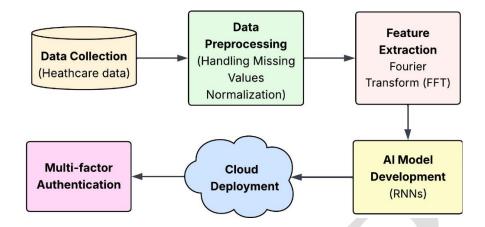


Figure 1: AI-Driven Healthcare Data Processing and Model Deployment with Secure Authentication

3.1 Data Collection

Health data is assumed to refer to the procedure of collecting the miscellaneous sort of health data in a systematic fashion from a variety of sources, including EHRs, medical devices, wearable sensors, and patient monitoring systems. Such health-related data include patient demographics, medical history, lab reports, images, vital signs, and lifestyle-related data necessary for assessing health conditions and making relevant decisions. The data collected thus would be comprehensive, valid, and current for any further analysis and predictive modeling and personalized care planning. The data collection is done in real-time using on-cloud data storage solutions for further processing and analysis.

3.2 Data Preprocessing

The consecutive step in the realm of healthcare data preprocessing implies such measures aimed at taking raw data into analysis, including cleaning the data, transformation, and change into a model-trainable format. Typical steps in this stage include imputing missing values, normalization or standardization of datasets, and outlier detection and removal. Handling missing values can be done any broadly through mean imputations or using k-Nearest Neighbors, with normalization or scaling being probably the next preprocessing operation so as to give all features similar scales.

3.2.1 Handling Missing Values

Handling the missing data is certainly one of the vital steps in data preprocessing, even more so a common issue with health data that sometimes carry missing or incomplete information. Possible techniques for handling missing data are mean imputation and median imputation; subsequently more advanced strategies such as kNearest Neighbors (k-NN) and multiple imputations. The principal disadvantage of simple mean imputation, whereby missing values are replaced with the mean of available data for that feature is

$$X_{\text{imputed}} = \frac{\sum_{i=1}^{n} X_i}{n} \tag{1}$$

where X_{imputed} represents the imputed value, X_i is the non-missing value of the feature, and n is the total number of available values for that feature. It assumes that missing data are missing completely at random (MCAR), and using mean to fill up the value does keep the overall distribution of data intact, thus not introducing any bias into model training.

3.2.2 Normalization

Normalization is a method of preprocessing data in which the features are transformed into a common scale and yet does not distort differences in the ranges of values. And it is especially useful when dealing with features measured in different ranges or units as they are sensitive for most machine learning algorithms. A popular example of normalization is min-max scaling. It rescales a feature to a fixed known range usually [0,1]. In a mathematical form, the min-max normalization can be represented by:





$$X_{\text{norm}} = \frac{x - x_{\min}}{x_{\max} - x_{\min}} \tag{2}$$

where X is the original value of the feature, X_{\min} is the minimum value of that feature, and X_{\max} is the maximum value. By transforming the features in such a manner, it ensures that they are all at the same scale thus, enhancing the operation of algorithms for machine learning and keeping them free from the effects of high-ranged features.

3.3 Feature Extraction

(3)

Feature extraction by means of FFT as seen in the figure refers to the translation of time domain data into the frequency domain in order to extract a few salient frequency contributions. This is especially important in medical applications in which one registers the signals such as the ECG, heart rate data, or any other physiological data over a time scale. The FFT is used to discover any patterns that are periodic or odd in nature and are often hidden by the raw time-domain data. The Fast Fourier Transform is an optimized algorithm that calculates DFT with higher efficiency. The advantage of FFT over DFT is that computational complexity gets reduced significantly making it possible to do real-time processing of large datasets. As another example, in the case of healthcare data, FFT is used to extract frequency-domain features that reveal the underlying periodic behaviors of the signals critical for anomaly detection, prediction of diseases, and more. FFT is described with the following equation which is based on the DFT:

$$X(k) = \sum_{n=0}^{N-1} x(n)e^{-j2\pi kn/N}$$

Where X(k) represents the frequency components of the signal at the $k^{\rm th}$ frequency bin, x(n) is the time-domain signal (input data point at time n), k is the frequency index, representing how often a specific pattern repeats in the signal, N is the total number of data points, j is the imaginary unit, capturing both amplitude and phase information. With this transformation, hidden features may be exposed, for example, the frequency components that pertain to certain health conditions or rhythmic patterns that are important for further analysis and predictive modeling in healthcare systems.

3.4 Al model development using RNNs

Recurrent Neural Networks (RNNs) have been programmed to develop AI models which process and learn sequential healthcare data by storing the information the previous time point. This type of model uses the sequence for the patient health prediction and anomaly detection. After preprocessing and feature extraction (e.g., Fourier Transform), the feature vectors are fed into the RNN, which updates its hidden state at each time step using the equation:

$$h_t = \tanh(W_{xh}x_t + W_{hh}h_{t-1} + b_h) \tag{4}$$

where h_t is the hidden state at time t, x_t is the input at time t, W_{xh} and W_{hh} are weight matrices, and b_h is the bias term. This recurring relationship in the dataset allows the network to learn temporal dependencies in patient data. Consequently, it can identify trends in the data and predict future health outcomes.

3.5 Cloud Storage

Cloud storage acts as a central repository that safely stores security-backed, preprocessed, and feature-extracted healthcare data collected from IoT devices, wearable sensors, and medical systems. This cloud storage allows data to get cleaned, normalized, and feature extracted using various techniques, such as FFT, and uploaded to the cloud so that they can be made available and accessible, 24/7, for AI model development. Specifically, such models include RNN-based ones that require continuous access to sequentially accessed data. In addition, cloud storage provides seamless integration of data sources to the AI infrastructure, enabling remote training, inference, and model updates. Encryption transmission and multi-factor authentication are also possible, ensuring that sensitive patient information remains secured and is accessed only by the authorized. At the same time, scalable deployment can happen across healthcare networks.

3.6 Multi-factor Authentication



Multifactor Authentication (MFA) appears to be an important building block as part of a security framework to secure the access of health data used in AI services handling within the cloud environment. When the data is then collected and subsequently pre-processed to analyze using RNN-based AI schemes, authorized users—probably the doctors, healthcare staff members, or administrators-will use MFA to grant them access to view the results and the sensitive information acquired about the patient. MFA involves two or more types of credentials for accessing an account. Typical credentials are password (something a user knows) and secondary credential, which could be either one-time password (OTP), biometrics, or smart card (something a user has or is). This redundancy in authentication greatly lessens the risk of unauthorized access, fortifying the systems from internal data access threats and ensuring adherence to healthcare-specific security standards such as HIPAA.

4. RESULT AND DISCUSSION

This study presents results showing that the proposed RNN-based healthcare model performed well on multiple key metrics: accuracy, precision, recall, and F1 score, which all provide a broad view of the model's effectiveness at predicting healthcare outcomes. The model performed impressively across all metrics, with its accuracy being the highest and being closely followed by precision and F1 score. Recall's being slightly lower indicates that the model may not have identified a few false negatives while fairly correctly identifying true positives. Also, the latency with respect to vehicle nodes graph demonstrates a direct relationship between the number of vehicle nodes and the corresponding system latencies. With rising number of nodes, latencies also elevate; hence, managing node density and network performance would be very critical in real-time systems. These results thus testify to the good performance of the model in predicting healthcare outcomes while shedding light on the need for optimizing latency in large-scale systems, especially for real-time vehicle network scenarios.

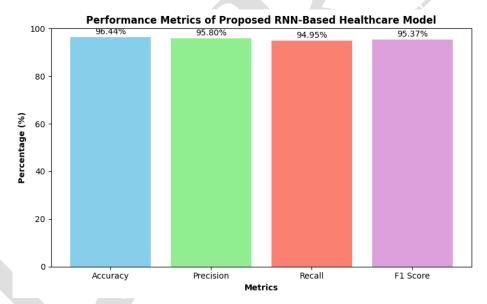


Figure 2: Performance Metrics of Proposed RNN-Based Healthcare Model

Figure 2 shows the performance parameters of the proposed RNN-based healthcare model. It examines the four key performance metric indicators of Accuracy (96.44%), Precision (95.80%), Recall (94.95%), and F1 Score (95.37%). Each metric is shown as a colored bar for visual clarity, and the figure illustrates that the model did well on all metrics, with Accuracy being the highest, followed by Precision and F1 Score. Recall is somewhat lower, which indicates that the model likely has some false negatives where it is potentially overconfident and favors predicting positives. The model's consistent excellent performance across these metrics indicates excellent overall predictive capability for healthcare outcomes.



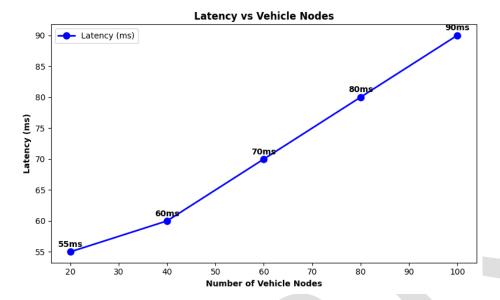


Figure 3: Latency vs Vehicle Nodes

Figure 3 provides details on latency(hysteresis) and how it increases with increasing numbers of vehicle nodes. X-axis-values are given from 20 to 100 vehicle nodes, while on the y-axis the latency for each vehicle node count is indicated. The blue-nonfilled markers on the line graph denote each data point, which clearly exhibits a positive linear relationship: with the increase of vehicle nodes, latency also increases. This justifies the highlighted latency readings from the graph at 20, 40, 60, 80, and 100 vehicle nodes with latencies at 55, 60, 70, 80, and 90 ms, respectively. Hence, much latency is to be looked at against vehicle nodes, which ought to be accounted for in the vehicle network systems.

5. CONCLUSION

In this research, a novel integrated scheme is designed in advancing healthcare with efficient data management, predictive analytics, and anomaly detection. The approach proposed involves systematically collecting data from several healthcare sources like EHRs, wearable sensors, and medical devices, followed by complete preprocessing, normalization, and feature extraction. Furthermore, the system implements the security of sensitive patient information by means of multi-factor authentication (MFA). AI-cloud relies on the cloud infrastructure for the storage and analysis of data generated in huge quantities while using AI models aimed specifically to improve healthcare departments in client-delivery decisions. The performance evaluation of the developed model shows impressive results in terms of 96.44% accuracy, 95.80% precision, 94.95% recall, and a 95.37% F1-score, thus confirming the model's efficiency in predicting health outcomes. During the deduction of parameters for anomaly detection and disease prediction, Fast Fourier Transform (FFT) is applied in the extraction of those key frequency components from physiological data. For the next phase, some measures will seek to minimize latency across very large healthcare systems; federated learning towards improving privacy of the data; and viewing means to ramp model transparency. Advancements may also include the integration of edge computing for super-efficient real-time processing of healthcare data, designing explainable AI models for clinical environments, and scaling the proposed system up to eventually managing the increasing volume of health care data.

REFERENCES

- [1] Srinivasan, K., Chauhan, G. S., Jadon, R., Budda, R., Gollapalli, V. S. T., & Kurunthachalam, A. (2022). Secure healthcare data storage and access control in cloud computing environments using AES and ECC encryption. International Journal of Information Technology & Computer Engineering, 10(3).
- [2] Sitaraman, S. R. (2021). AI-driven healthcare systems enhanced by advanced data analytics and mobile computing. International Journal of Information Technology and Computer Engineering, 9(2), 175-187.
- [3] Radhakrishnan, P., & Padmavathy, R. (2019). Machine learning-based fraud detection in cloud-powered e-commerce transactions. International Journal of Engineering Technology Research & Management, 3(1).





- [4] Tatineni, S. (2022). Integrating AI, Blockchain and cloud technologies for data management in healthcare. Journal of Computer Engineering and Technology (JCET), 5(01).
- [5] Musham, N. K., & Aiswarya, R. S. (2019). Leveraging artificial intelligence for fraud detection and risk management in cloud-based e-commerce platforms. International Journal of Engineering Technology Research & Management, 3(10)
- [6] Albert, A., & Gabriel, R. (2021). AI-Driven Solutions for Securing Distributed Systems in Healthcare and Cloud. International journal of Computational Intelligence in Digital Systems, 10(01), 105-127.
- [7] Musam, V. S., & Rathna, S. (2019). Firefly-optimized cloud-enabled federated graph neural networks for privacy-preserving financial fraud detection. International Journal of Information Technology and Computer Engineering, 7(4).
- [8] Korada, L. (2022). Optimizing Multicloud Data Integration for AI-Powered Healthcare Research. Journal of Scientific and Engineering Research, 9(1), 169-176.
- [9] Deevi, D. P., & Padmavathy, R. (2019). A hybrid random forest and GRU-based model for heart disease prediction using private cloud-hosted health data. International Journal of Applied Science Engineering and Management, 13(2).
- [10] Gopireddy, R. R. (2021). AI-Powered Security in cloud environments: Enhancing data protection and threat detection. International Journal of Science and Research (IJSR), 10(11).
- [11] Vallu, V. R., & Arulkumaran, G. (2019). Enhancing compliance and security in cloud-based healthcare: A regulatory perspective using blockchain and RSA encryption. Journal of Current Science, 7(4).
- [12] Gadde, H. (2021). Secure Data Migration in Multi-Cloud Systems Using AI and Blockchain. International Journal of Advanced Engineering Technologies and Innovations, 1(2), 128-156.
- [13] Gudivaka, R. L., & Mekala, R. (2018). Intelligent sensor fusion in IoT-driven robotics for enhanced precision and adaptability. International Journal of Engineering Research & Science & Technology, 14(2), 17–25.
- [14] Alan, J., & Liam, M. (2020). Protecting Healthcare Data: AI-Powered Strategies for Securing Distributed Systems. International journal of Computational Intelligence in Digital Systems, 9(01), 20-33.
- [15] Basani, D. K. R., & RS, A. (2018). Integrating IoT and robotics for autonomous signal processing in smart environment. International Journal of Computer Science and Information Technologies, 6(2), 90–99. ISSN 2347–3657.
- [16] Kalusivalingam, A. K., Sharma, A., Patel, N., & Singh, V. (2021). Enhancing Patient Care Through IoT-Enabled Remote Monitoring and AI-Driven Virtual Health Assistants: Implementing Machine Learning Algorithms and Natural Language Processing. International Journal of AI and ML, 2(3).
- [17] Peddi, S., & Aiswarya, RS. (2018). Securing healthcare in cloud-based storage for protecting sensitive patient data. International Journal of Information Technology and Computer Engineering, 6(1)
- [18] Devarajan, M. V. (2020). Improving security control in cloud computing for healthcare environments. J. Sci. Technol. JST, 5(6).
- [19] Natarajan, D. R., & Kurunthachalam, A. (2018). Efficient Remote Patient Monitoring Using Multi-Parameter Devices and Cloud with Priority-Based Data Transmission Optimization. Indo-American Journal of Life Sciences and Biotechnology, 15(3), 112-121.
- [20] Firouzi, F., Farahani, B., Barzegari, M., & Daneshmand, M. (2020). AI-driven data monetization: The other face of data in IoT-based smart and connected health. IEEE Internet of Things Journal, 9(8), 5581-5599.
- [21] Bobba, J., & Prema, R. (2018). Secure financial data management using Twofish encryption and cloud storage solutions. International Journal of Computer Science Engineering Techniques, 3(4), 10–16.
- [22] Bayyapu, S., Turpu, R. R., & Vangala, R. R. (2019). Advancing healthcare decision-making: The fusion of machine learning, predictive analytics, and cloud technology. International Journal of Computer Engineering and Technology (IJCET), 10(5), 157-170.
- [23] Kethu, S. S., & Thanjaivadivel, M. (2018). SECURE CLOUD-BASED CRM DATA MANAGEMENT USING AES ENCRYPTION/DECRYPTION. International Journal of HRM and Organizational Behavior, 6(3), 1-7.
- [24] Chianumba, E. C., Ikhalea, N., Mustapha, A. Y., Forkuo, A. Y., & Osamika, D. (2022). Integrating AI, blockchain, and big data to strengthen healthcare data security, privacy, and patient outcomes. Journal of Frontiers in Multidisciplinary Research, 3(1), 124-129.





- [25] Vasamsetty, C., & Rathna, S. (2018). Securing digital frontiers: A hybrid LSTM-Transformer approach for AI-driven information security frameworks. International Journal of Computer Science and Information Technologies, 6(1), 46–54. ISSN 2347–3657.
- [26] Pentyala, D. K. (2019). Cloud-Centric Data Engineering: AI-Driven Mechanisms for Enhanced Data Quality Assurance. International Journal of Modern Computing, 2(1), 1-25.
- [27] Ganesan, S., & Kurunthachalam, A. (2018). Enhancing financial predictions using LSTM and cloud technologies: A data-driven approach. Indo-American Journal of Life Sciences and Biotechnology, 15(1).
- [28] Gollapalli, V. S. T. (2021). Hybrid Fog-Cloud Architectures for Scalable IoT Healthcare: Improving ECG Analysis, Signal Processing, and AI-Driven Monitoring. International Journal of HRM and Organizational Behavior, 9(2), 30-47.
- [29] Kushala, K., & Rathna, S. (2018). Enhancing privacy preservation in cloud-based healthcare data processing using CNN-LSTM for secure and efficient processing. International Journal of Mechanical Engineering and Computer Science, 6(2), 119–127.
- [30] Pentyala, D. K. (2022). Ensuring Data Integrity in Cloud Computing Using Artificial Intelligence. International Journal of Acta Informatica, 1(1), 116-137.
- [31] Bhadana, D., & Kurunthachalam, A. (2020). Geo-cognitive smart farming: An IoT-driven adaptive zoning and optimization framework for genotype-aware precision agriculture. International Journal in Commerce, IT and Social Sciences, 7(4).
- [32] Reddy, A. R. P. (2021). The role of artificial intelligence in proactive cyber threat detection in cloud environments. NeuroQuantology, 19(12), 764-773.
- [33] Ramar, V. A., & Rathna, S. (2018). Implementing Generative Adversarial Networks and Cloud Services for Identifying Breast Cancer in Healthcare Systems. Indo-American Journal of Life Sciences and Biotechnology, 15(2), 10-18.
- [34] Mandru, S. (2022). How AI can improve identity verification and access control processes. Journal of Artificial Intelligence & Cloud Computing. SRC/JAICC-E101. DOI: doi. org/10.47363/JAICC/2022 (1) E101 J Arti Inte & Cloud Comp, 1(4), 2-3.
- [35] Garikipati, V., & Pushpakumar, R. (2019). Integrating cloud computing with predictive AI models for efficient fault detection in robotic software. International Journal of Engineering Science and Advanced Technology (IJESAT), 19(5).
- [36] Majeed, A., & Hwang, S. O. (2021). Data-driven analytics leveraging artificial intelligence in the era of COVID-19: an insightful review of recent developments. Symmetry, 14(1), 16.
- [37] Ayyadurai, R., & Kurunthachalam, A. (2019). Enhancing financial security and fraud detection using AI. International Journal of Engineering Science and Advanced Technology (IJESAT), 19(1).
- [38] Gudavalli, S., & Tangudu, A. (2020). Al-driven customer insight models in healthcare. International Journal of Research and Analytical Reviews (IJRAR) April, 7(2).
- [39] Basani, D. K. R., & Bharathidasan, S. (2019). IoT-driven adaptive soil monitoring using hybrid hexagonal grid mapping and kriging-based terrain estimation for smart farming robots. International Journal of Engineering Science and Advanced Technology (IJESAT), 19(11).
- [40] Indrajith, N. (2022). AI and Cloud Service Quality: Predictive Analytics for Performance Monitoring and Enhancement. International Journal of Artificial Intelligence, Data Science, and Machine Learning, 3(2), 1-9.
- [41] Kodadi, S., & Purandhar, N. (2019). Optimizing secure multi-party computation for healthcare data protection in the cloud using hybrid garbled circuits. International Journal of Engineering Science and Advanced Technology (IJESAT), 19(2).
- [42] Prasad, N., & Paripati, L. K. (2020). AI-Driven Data Governance Framework For Cloud-Based Data Analytics. Webology (ISSN: 1735-188X), 17(2).
- [43] Devarajan, M. V., & Pushpakumar, R. (2019). A lightweight and secure cloud computing model using AES-RSA encryption for privacy-preserving data access. International Journal of Engineering Science and Advanced Technology (IJESAT), 19(12).
- [44] Reddy, A. R. P. (2022). The Future Of Cloud Security: Ai-Powered Threat Intelligence And Response. International Neurourology Journal, 26(4), 45-52.
- [45] Allur, N. S., & Thanjaivadivel, M. (2019). Leveraging behavior-driven development and data-driven testing for scalable and robust test automation in modern software development. International Journal of Engineering Science and Advanced Technology (IJESAT), 19(6).
- [46] Kaul, D., & Khurana, R. (2021). AI to detect and mitigate security vulnerabilities in APIs: encryption, authentication, and anomaly detection in enterprise-level distributed systems. Eigenpub Review of Science and Technology, 5(1), 34-62.



- [47] Bobba, J., & Kurunthachalam, A. (2020). Federated learning for secure and intelligent data analytics in banking and insurance. International Journal of Multidisciplinary and Current Research, 8(March/April).
- [48] Ravichandran, P., Machireddy, J. R., & Rachakatla, S. K. (2022). AI-Enhanced data analytics for real-time business intelligence: Applications and challenges. Journal of AI in Healthcare and Medicine, 2(2), 168-195.
- [49] Gollavilli, V. S. B. H., & Pushpakumar, R. (2020). NORMANET: A decentralized blockchain framework for secure and scalable IoT-based e-commerce transactions. International Journal of Multidisciplinary and Current Research, 8(July/August)
- [50] Arora, S., & Tewari, A. (2022). AI-Driven Resilience: Enhancing Critical Infrastructure with Edge Computing. Int. J. Curr. Eng. Technol, 12(2), 151-157.
- [51] Grandhi, S. H., & Arulkumaran, G. (2020). AI solutions for SDN routing optimization using graph neural networks in traffic engineering. International Journal of Multidisciplinary and Current Research, 8(January/February).
- [52] Kovacs, M. (2021). AI-Enabled Smart Sensors for Industrial IoT: A Secure and Scalable Framework for Data-Driven Decision Making. International Journal of AI, BigData, Computational and Management Studies, 2(4), 20-33.
- [53] Nippatla, R. P., & Palanisamy, P. (2020). Optimized cloud architecture for scalable and secure accounting systems in the digital era. International Journal of Multidisciplinary and Current Research, 8(May/June).
- [54] Kyle, J. (2022). Protecting Distributed Systems: AI-Driven Forensic Tools for Cloud and Edge Computing. International journal of Computational Intelligence in Digital Systems, 11(01), 29-52.
- [55] Kushala, K., & Thanjaivadivel, M. (2020). Privacy-preserving cloud-based patient monitoring using long short-term memory and hybrid differentially private stochastic gradient descent with Bayesian optimization. International Journal in Physical and Applied Sciences, 7(8).
- [56] Egbuhuzor, N. S., Ajayi, A. J., Akhigbe, E. E., Agbede, O. O., Ewim, C. P. M., & Ajiga, D. I. (2021). Cloud-based CRM systems: Revolutionizing customer engagement in the financial sector with artificial intelligence. International Journal of Science and Research Archive, 3(1), 215-234.
- [57] Garikipati, V., & Bharathidasan, S. (2020). Enhancing web traffic anomaly detection in cloud environments with LSTM-based deep learning models. International Journal in Physical and Applied Sciences, 7(5).
- [58] Kommineni, H. P. (2019). Cognitive Edge Computing: Machine Learning Strategies for IoT Data Management. Asian Journal of Applied Science and Engineering, 8(1), 97-108.
- [59] Kodadi, S., & Pushpakumar, R. (2020). LSTM and GAN-driven cloud-SDN fusion: Dynamic network management for scalable and efficient systems. International Journal in Commerce, IT and Social Sciences, 7(7).
- [60] Talla, R. R., Manikyala, A., Nizamuddin, M., Kommineni, H. P., Kothapalli, S., & Kamisetty, A. (2021). Intelligent Threat Identification System: Implementing Multi-Layer Security Networks in Cloud Environments. NEXG AI Review of America, 2(1), 17-31.
- [61] Gollavilli, V. S. B., & Thanjaivadivel, M. (2018). Cloud-enabled pedestrian safety and risk prediction in VANETs using hybrid CNN-LSTM models. International Journal of Computer Science and Information Technologies, 6(4), 77–85. ISSN 2347–3657.
- [62] Chinta, S. (2019). The role of generative AI in oracle database automation: Revolutionizing data management and analytics. *World Journal of Advanced Research and Reviews*, 4(1), 10-30574.
- [63] Chinta, S. (2019). The role of generative AI in oracle database automation: Revolutionizing data management and analytics. *World Journal of Advanced Research and Reviews*, 4(1), 10-30574.
- [64] Wang, L., & Alexander, C. A. (2020). Big data analytics in medical engineering and healthcare: methods, advances and challenges. *Journal of medical engineering & technology*, 44(6), 267-283.
- [65] Boppana, V. R. (2021). Ethical Considerations in Managing PHI Data Governance during Cloud Migration. *Educational Research (IJMCER)*, *3*(1), 191-203.