Peer Review File

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Reviewer A

**Comment 1:** 

The authors have not cited or acknowledged any relevant work.

Reply 1:

The aim of this study is to investigate the integration of AI in the healthcare system in KSA, the

perceived ease of use and usefulness of AI. Another purpose of this study is to study the impact of

AI accuracy and AI adoption by healthcare professionals on patient outcomes. References dealing

with these elements are: reference 3, 9, 10, 5, 14, 15, 17, 20, 23, 24, 25 (order of quotation in the

document). These references illustrate the impact of AI in medicine and several examples of its

applications. It describes also how AI improves patients' quality of life. And finally, it describes

the perceptions of AI in healthcare sector.

Comment 2

The discussion section is not appropriate/sufficient.

Reply2

Reviewer C also finds that the discussion is too short, and suggested moving some portions of the

introduction to the discussion. So, two paragraphs have been moved from the introduction to the

"discussion" section. They are in blue page 16.

Comment 3

The figures are not scientific and can be replaced by a table.

Reply 3

Thank for this comment. We added, as recommended, a column for frequency in all the tables. Figures are no longer essential. The editor can remove them and this will not change the information.

#### Comment 4

The novelty of this work is missing.

### Reply 4

The new knowledge provided in this study is exploring patients' and doctors' perspectives of AI, focusing on ease of use, usefulness, accuracy, in the saudi arabian context. The relevance of this context has been added to the document, it is described page 4, in blue color.

## Reviewer B

**Comment 1:** The manuscript spends several pages at the outset describing uses of AI that seem rather irrelevant and peripheral to the topic, e.g. line 177, the examples of AI devices in daily life.

#### Reply 1

We wanted to go from the general to the specific. some interesting examples for readers to illustrate the fact that AI is already present in our lives. The healthcare sector is no exception. However we reduced that part to the essential information.

**Comment 2:** The description of the sample quite uninformative. Patients and healthcare providers are put in the same category with no insights as to whether their attitudes/perceptions are different.

### Reply 2

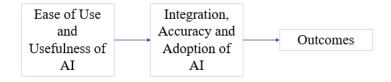
The questionnaires were administered randomly between patients and healthcare professionals. This will be considered as a limit. It is now written in blue page 17.

**Comment 3:** Figure 1 is puzzling. I did not find it helpful and do not understand what point it was trying to convey. Perhaps this figure could be re-visited to more clearly illustrate a finding in the study or some other clearly articulated point that arises from the study.

### Reply 3

The figure can be replaced by the following one. Page6.

Figure 1. Research Model



# Reviewer C

#### **Comment 1:**

Whilst the study design and content are well done, the structure of the manuscript needs further work.

# Reply 1

We've tried to change the structure to make it more coherent. We've also moved some of the paragraphs around to balance them out.

#### **Comment 2:**

The principal findings highlighted in the discussion are different from the results in the abstract. This study did not look into patient outcomes from the use of AI.

# Reply 2

A paragraph has been added in blue page 17, in the section "principal findings" to highlight the patient outcomes from the use of AI.

**Comment 3:** The results in the tables need to be clearly labelled as numbers or percentages.

### Reply 3:

A column for percentages has been added in all tables.

**Comment 4:** It is not clear the survey questions are based to healthcare professionals or patients or both groups. They both will have very different perceptions and knowledge regarding AI. I suggest this be clearly highlighted to the readers.

## Reply 4:

The questionnaires were administered randomly between patients and healthcare professionals. This will be considered as a limit. It is now written in blue page 17.

**Comment 5:** Looking carefully at the results, less than majority agreed on questions regarding ease of use of AI in Table 2. This provides a good point for further discussion

#### Reply 5:

Thank you for drawing our attention to this issue. Actually, table 2 shows that the majority of the respondents agrees, and strongly agrees, that AI is easy to use and functional and facilitates healthcare professionals in decision-making. We reformulated the paragraph page 10.

**Comment 6**: The introduction is too long and the discussion is too short. I suggest moving some portions of the introduction to the discussion

#### Reply 6:

Two paragraphs have been moved from the introduction to the "discussion" section. They are in blue page 16.