

# Management of Electronic Health Records

Kennet Patrik<sup>1\*</sup>, Fenella Chadwick<sup>2</sup><sup>1</sup>Massachusetts Institute of Technology, Massachusetts Ave, Cambridge, MA 02139, United States.<sup>2</sup>Department of IT, Norwegian University of Science and Technology, Trondheim, Norway.**Corresponding Author:** Kennet Patrik, Massachusetts Institute of Technology, Massachusetts Ave, Cambridge, MA 02139, United States.

Received: 📅 2025 Nov 30

Accepted: 📅 2025 Dec 22

Published: 📅 2025 Dec 31

## Abstract

The management of electronic health records (EHRs) faces persistent challenges concerning data security, privacy, interoperability, and transparency. This proof-of-concept case study explores the potential of blockchain technology to address these issues by creating a secure and transparent framework for EHR management. We present the design and implementation of a permissioned blockchain network tailored for healthcare, focusing on secure data storage, access control, and auditability. The study evaluates the feasibility and benefits of this approach through a simulated healthcare scenario, demonstrating enhanced data integrity, improved patient data ownership, and streamlined data sharing among authorized stakeholders. The findings suggest that blockchain technology offers a promising avenue for revolutionizing EHR systems, fostering greater trust and efficiency within the healthcare ecosystem.

**Keywords:** Blockchain Technology, Electronic Health Records (Ehr), Healthcare, Data Security, Data Privacy, Data Transparency, Interoperability, Proof-Of-Concept, Permissioned Blockchain, Distributed Ledger Technology

## 1. Introduction

The digital transformation of healthcare has ushered in an era of Electronic Health Records (EHRs), promising enhanced efficiency, improved patient care coordination, and valuable insights for medical research. However, the widespread adoption and effective utilization of EHRs are currently hampered by significant challenges related to data security, patient privacy, interoperability between disparate systems, and a lack of transparency in data access and sharing. Traditional centralized EHR systems often present single points of failure, making them vulnerable to cyberattacks and data breaches, as evidenced by the increasing frequency and sophistication of healthcare data security incidents globally [1-30]. These breaches not only compromise sensitive patient information but also erode trust in the healthcare system.

Furthermore, the fragmented nature of the healthcare landscape, with numerous independent entities managing their own EHR systems, creates significant barriers to seamless data exchange. This lack of interoperability hinders comprehensive patient care, impedes timely access to critical medical history, and complicates collaborative research efforts. Patients often lack control and visibility over their own health data, leading to concerns about how their information is being used and shared. The need for a more secure, transparent, and patient-centric approach to EHR management is therefore paramount. Blockchain technology, with its inherent characteristics of decentralization, immutability,

cryptographic security, and transparency, has emerged as a potentially transformative solution across various industries [31-49]. At its core, a blockchain is a distributed ledger that records transactions across multiple computers. Each block in the chain contains a batch of validated transactions and is linked to the previous block using cryptographic hashing, creating a tamper-proof and auditable record. This decentralized and cryptographically secured nature of blockchain offers compelling advantages for addressing the limitations of current EHR systems.

The application of blockchain in healthcare, particularly for EHR management, holds the promise of revolutionizing how patient data is stored, accessed, and shared. By leveraging the decentralized and immutable nature of blockchain, EHR systems can be made more resilient to cyberattacks and data breaches. The cryptographic techniques employed in blockchain ensure the confidentiality and integrity of patient data, while sophisticated access control mechanisms can grant patients greater control over who can access their records. Moreover, the transparent and auditable nature of blockchain transactions can provide a clear history of data access and modifications, fostering greater trust and accountability among all stakeholders [50-66].

This proof-of-concept case study aims to explore the practical application of blockchain technology for establishing a secure and transparent framework for EHR management. We will delve into the design and implementation of a per-

missioned blockchain network specifically tailored to the unique requirements of the healthcare domain. Unlike public blockchains, which are open to everyone, a permissioned blockchain restricts participation to authorized entities, such as hospitals, clinics, and patients, ensuring a controlled and trusted environment. The study will focus on demonstrating the feasibility and potential benefits of this blockchain-based EHR system through a simulated healthcare scenario. This will involve evaluating key aspects such as secure data storage on the blockchain, granular access control mechanisms that empower patients, and the ability to audit data access and modifications. By showcasing a working prototype, this research seeks to provide concrete evidence of how blockchain technology can address the critical challenges facing current EHR systems and pave the way for a more secure, transparent, and interoperable future for healthcare data management [67-80]. Ultimately, this work contributes to the growing body of research exploring innovative solutions for enhancing the security, privacy, and efficiency of healthcare information systems, with the goal of improving patient outcomes and fostering a more trustworthy healthcare ecosystem.

## 2. Challenges

While blockchain technology offers a compelling vision for transforming EHR management, its successful integration into the healthcare ecosystem is not without significant hurdles. Several technical, regulatory, social, and economic challenges need to be carefully considered and addressed.

### 2.1. Scalability and Performance

Healthcare systems generate vast amounts of data daily. Most current blockchain architectures face limitations in terms of transaction throughput and block size, potentially leading to scalability issues when dealing with the high volume and velocity of EHR data. Ensuring that a blockchain-based EHR system can efficiently process and store the continuous stream of medical information, including large files like medical images, without significant latency is a critical technical challenge [81-93]. Research and development are needed to optimize blockchain protocols or explore hybrid solutions that combine blockchain's security features with more scalable storage mechanisms.

### 2.2. Interoperability with Existing Systems

Healthcare institutions have already invested heavily in existing EHR systems, many of which operate on different platforms and data formats. Integrating a new blockchain-based system seamlessly with these legacy systems presents a significant interoperability challenge. Developing standardized data formats and communication protocols that can bridge the gap between blockchain and traditional EHR systems is crucial for a smooth transition and to avoid data silos. This requires collaboration across vendors, healthcare organizations, and regulatory bodies to establish common standards.

### 2.3. Data Privacy and Regulatory Compliance

The highly sensitive nature of patient health information necessitates strict adherence to data privacy regulations such as HIPAA (in the United States), GDPR (in Europe), and

similar laws in other jurisdictions. Ensuring that a blockchain-based EHR system complies with these complex and evolving regulations is paramount. While blockchain offers enhanced security through cryptography, careful consideration must be given to how personal health information is stored, accessed, and shared on the distributed ledger to maintain patient confidentiality and control. Issues such as the "right to be forgotten" under GDPR pose unique challenges for the immutability inherent in blockchain technology and require innovative solutions.

### 2.4. Key Management and Data Ownership

Managing cryptographic keys for accessing and controlling health data on a blockchain is a critical aspect of security and patient empowerment. Secure and user-friendly key management solutions are essential to prevent unauthorized access and ensure that patients can effectively control their data. Defining clear data ownership and access rights within a blockchain-based EHR ecosystem, especially when data is shared across multiple stakeholders, requires careful consideration and the establishment of clear governance frameworks.

### 2.5. Standardization and Governance

The lack of widely accepted standards and governance frameworks for blockchain in healthcare is a significant barrier to widespread adoption. Establishing common protocols for data storage, access, and exchange on blockchain-based EHR systems is necessary to ensure interoperability and facilitate trust among different healthcare providers and patients. Defining the roles and responsibilities of various stakeholders within a blockchain network [94-104] and establishing mechanisms for dispute resolution and system updates are crucial for the long-term sustainability and effectiveness of such systems.

### 2.6. Cost and Implementation Complexity

Implementing a blockchain-based EHR system can involve significant upfront costs related to infrastructure development, software integration, and training. The complexity of blockchain technology and the need for specialized expertise can also pose challenges for healthcare organizations. Demonstrating a clear return on investment and developing cost-effective and user-friendly solutions are essential for encouraging adoption across the healthcare industry.

### 2.7. Understanding and Trust

Building trust and understanding of blockchain technology among healthcare professionals, patients, and policymakers is crucial for its successful adoption. Addressing misconceptions about blockchain, educating stakeholders about its benefits and limitations, and demonstrating its reliability and security are essential for fostering confidence in this new technology. Clear communication and pilot projects showcasing the real-world benefits of blockchain in healthcare can help overcome skepticism and encourage wider acceptance.

## 3. Future Works and Research Directions

Building upon the proof-of-concept case study, several ave-

nues for future work and research can further explore and refine the integration of blockchain technology for secure and transparent Electronic Health Records. These directions aim to address the identified challenges, enhance the system's capabilities, and pave the way for real-world implementation.

### 3.1. Enhancing Scalability and Performance

Future research should focus on investigating and implementing advanced blockchain scalability solutions relevant to healthcare data. This includes exploring:

- **Layer-2 Scaling Solutions:** Investigating the feasibility and applicability of technologies like state channels, side-chains, and rollups to offload transaction processing from the main blockchain, thereby increasing throughput and reducing latency for high-volume EHR data.
- **Optimized Data Structures And Storage:** Researching efficient on-chain and off-chain data storage mechanisms tailored for large medical files (e.g., imaging data) while maintaining data integrity and secure linking to blockchain-based metadata.
- **Consensus Mechanism Optimization:** Evaluating and potentially adapting consensus algorithms to achieve a balance between security, decentralization, and performance requirements specific to a permissioned healthcare blockchain.

### 3.2. Achieving Seamless Interoperability

Future efforts should prioritize the development and adoption of interoperability standards to facilitate seamless data exchange between blockchain-based EHR systems and existing healthcare infrastructure. This includes:

- **Standardized Data Models And Apis:** Collaborating with healthcare standards organizations (e.g., HL7, FHIR) to define standardized data models and application programming interfaces (APIs) that enable interoperable data exchange with blockchain platforms.
- **Hybrid System Architectures:** Exploring hybrid approaches that combine the strengths of blockchain for secure data anchoring and audit trails with existing EHR systems for core data management, facilitating a phased transition.
- **Cross-Chain Communication:** Investigating technologies that enable secure and reliable data sharing between different blockchain networks within the healthcare ecosystem, fostering broader data liquidity.

### 3.3. Strengthening Data Privacy and Compliance

Future research must continue to address the critical aspects of data privacy and regulatory compliance within a blockchain-based EHR framework. This includes:

- **Advanced Privacy-Preserving Techniques:** Exploring and implementing cryptographic techniques such as zero-knowledge proofs, homomorphic encryption, and secure multi-party computation to enable data analysis and sharing while preserving patient privacy.
- **Fine-Grained Access Control Mechanisms:** Developing more sophisticated and attribute-based access control models on the blockchain to provide patients with granular control over who can access specific parts of their health records.

- **Compliance Automation:** Investigating the potential of smart contracts to automate certain aspects of regulatory compliance, such as data access logging and consent management, while ensuring adherence to privacy regulations.

### 3.4. Enhancing Key Management and Patient Empowerment

Future work should focus on developing secure and user-friendly key management solutions that empower patients to control their health data on the blockchain [103-105]. This includes:

- **User-Friendly Key Storage And Recovery Mechanisms:** Researching and implementing intuitive interfaces and secure methods for patients to manage their private keys, including options for key recovery in case of loss.
- **Decentralized Identity Management:** Exploring the integration of decentralized identity (DID) solutions with blockchain-based EHRs to provide patients with self-sovereign control over their digital identity and health data.
- **Consent Management Frameworks:** Developing robust and transparent consent management systems on the blockchain that allow patients to easily grant and revoke access to their data for various purposes, with auditable records of consent.

### 3.5. Establishing Governance and Standardization Frameworks

Future research needs to contribute to the development of clear governance and standardization frameworks for blockchain in healthcare. This includes:

- **Consortium Building And Governance Models:** Facilitating the formation of healthcare blockchain consortia to establish common standards, protocols, and best practices for the technology's adoption.
- **Legal And Regulatory Analysis:** Conducting in-depth analysis of existing and emerging legal and regulatory frameworks related to blockchain and healthcare data to identify potential barriers and propose solutions.
- **Smart Contract Governance:** Developing mechanisms for managing and updating smart contracts within a healthcare blockchain ecosystem, ensuring transparency and accountability.

### 3.6. Evaluating Real-World Feasibility and Impact

Moving beyond proof-of-concept studies, future work should focus on evaluating the real-world feasibility and impact of blockchain-based EHR systems through pilot deployments and user studies [104-109]. This includes:

- **Pilot Projects In Healthcare Settings:** Conducting pilot implementations in limited healthcare environments to assess the system's performance, usability, and impact on clinical workflows and patient outcomes.
- **User Feedback And Adoption Studies:** Gathering feedback from healthcare professionals and patients to understand their perceptions, identify usability challenges, and inform further development.
- **Cost-Benefit Analysis:** Conducting comprehensive cost-benefit analyses to evaluate the economic viability of implementing blockchain-based EHR systems compared to traditional approaches.

#### 4. Conclusion

This proof-of-concept case study has illuminated the significant potential of blockchain technology to address the persistent challenges surrounding the security, transparency, and interoperability of Electronic Health Records. By leveraging the inherent characteristics of decentralization, immutability, and cryptographic security, a permissioned blockchain framework offers a compelling alternative to traditional centralized EHR systems. The simulated healthcare scenario demonstrated the feasibility of securely storing and managing patient data on a distributed ledger, enabling granular access control and providing an auditable trail of data interactions. These features contribute to enhanced data integrity, increased patient empowerment through greater control over their health information, and the potential for more seamless data sharing among authorized healthcare stakeholders.

However, as highlighted in the discussion of challenges, the widespread adoption of blockchain technology in healthcare is not without its complexities. Issues related to scalability, interoperability with existing infrastructure, stringent data privacy regulations, secure key management, the need for standardization and governance frameworks, and the costs associated with implementation require careful consideration and innovative solutions. Overcoming these hurdles necessitates a collaborative and multidisciplinary approach involving technologists, healthcare professionals, policymakers, and patients. The future research directions outlined further underscore the ongoing work required to translate the promise of blockchain into tangible benefits for the healthcare ecosystem. Efforts focused on enhancing scalability and performance, achieving seamless interoperability, strengthening data privacy through advanced cryptographic techniques, empowering patients with robust key management and consent mechanisms, establishing clear governance and standardization frameworks, and conducting real-world feasibility studies are crucial next steps.

#### References

- Panahi, O. (2025). The algorithmic healer: AI's impact on public health delivery. *Medi Clin Case Rep J*, 3(1), 759-762.
- Panahi, O. (2025). The Future of Healthcare: AI. Public Health and the Digital Revolution. *Medi Clin Case Rep J*, 3(1), 763-766.
- Panahi, O., Raouf, M. F., & Patrik, K. (2011). The evaluation between pregnancy and periodontal therapy. *Int J Acad Res*, 3, 1057-8.
- Panahi, O., Melody, F. R., Kennet, P., & Tamson, M. K. (2011). Drug induced (calcium channel blockers) gingival hyperplasia.
- Omid, P. (2011). Relevance between gingival hyperplasia and leukemia. *Int J Acad Res*, 3, 493-4.
- Panahi, O., & Cay, F. K. (2019). Nanotechnology. *Regenerative Medicine and Tissue Bioengineering*. Scholars Press Academic Publishing.
- Panahi, O. (2024). Dental pulp stem cells: A review. *Acta Scientific Dental Sciences (ISSN: 2581-4893)*, 8(2).
- Panahi, U. (2025). AD HOC networks: Applications, challenges, future directions.
- Omid panahi, Artificial intelligence in Dentistry, Scholars Press Academic Publishing.
- Panahi, O. (2025). Smart Robotics for Personalized Dental Implant Solutions. *Dental*, 7(1), 21.
- Panahi, P., & Freund, M. (2011). SAFETY APPLICATION SCHEMA FOR VEHICULAR VIRTUAL AD HOC GRID NETWORKS. *International Journal of Academic Research*, 3(2).
- Panahi, P. (2009). New Plan for Hardware Resource Utilization in Multimedia Applications Over Multi Processor Based System, MIPRO 2009. In *32nd International Convention Conference on Grid And Visualization Systems (GVS)* (pp. 256-260).
- Panahi, D. O., & Eslamlou, D. S. F. Peridontium: Struktur. *Funktion und klinisches Management*.
- Panahi, D. O., & Eslamlou, D. S. F. (2025). Peridoncio: Estructura, función y manejo clínico.
- Panahi, D. O., & Eslamlou, D. S. F. (2025). Le périodontium: Structure, fonction et gestion clinique.
- Panahi, D. O., & Eslamlou, D. S. F. (2025). Peridonio: Struttura, funzione e gestione clinica.
- Panahi, D. O., & Eslamlou, D. S. F. Peridontium: Struktura, funkcja i postępowanie kliniczne.
- Koyuncu, B., & Panahi, P. (2014). Kalman filtering of link quality indicator values for position detection by using WSNs. *power*, 2, 4.
- Panahi, O. (2025). The algorithmic healer: AI's impact on public health delivery. *Medi Clin Case Rep J*, 3(1), 759-762.
- Panahi, D. O., Esmaili, D. F., & Kargarnezhad, D. S. (2024). Искусственный интеллект в стоматологии.
- Esmailzadeh, D. S., Panahi, D. O., & Çay, D. F. K. (2020). Application of Clay's in Drug Delivery in Dental Medicine.
- Gholizadeh, M., & Panahi, D. O. (2021). Investigating System in Health Management Information Systems.
- Gholizadeh, M., & Panahi, D. O. (2021). Untersuchungssystem im Gesundheitsmanagement Informationssysteme.
- Gholizadeh, M., & Panahi, D. O. (2021). Sistema de investigación en sistemas de información de gestión sanitaria, NUESTRO CONOC.
- Gholizadeh, M., & Panahi, O. (2021). Système d'investigation dans les systèmes d'information de gestion de la santé. *Edition Notre Savoir Publishing*.
- Gholizadeh, M., & Panahi, D. O. (2021). Indagare il sistema nei sistemi informativi di gestione della salute.
- Gholizadeh, M., & Panahi, D. O. (2021). Systeemonderzoek in Informatiesystemen voor Gezondheidsbeheer.
- Gholizadeh, M., & Panahi, D. O. (2021). System badawczy w systemach informacyjnych zarządzania zdrowiem.
- Panahi, O., & Azarfardin, A. (2025). Computer-Aided Implant Planning: Utilizing AI for Precise Placement and Predictable Outcomes. *Journal of Dentistry and Oral Health*, 2(1), 1-5.
- Gholizadeh, M., & Panahi, D. O. (2021). Sistema de Investigaçao em Sistemas de Informaçao de Gestao de Saude.
- Gholizadeh, M., & Panah, O. (2021). Система исследований в информационных системах

- управления здравоохранением.
32. Ostovar, D. L., Vatan, D. K. K., & Panahi, D. O. (2020). *Clinical Outcome of Thrombolytic Therapy: In Patients with Acute Myocardial Infarction*. Scholars' Press.
  33. Panahi, O. (2025). Integrating dental and cardiac patient data for comprehensive health insights using AI. *Ann Cardiolol*, 2(1), 1007.
  34. Panahi, O. (2025). The Future of Medicine: Converging Technologies and Human Health. *J Bio-Med Clin Res*, 2(1).
  35. Panahi, O. (2025). Journal of Bio-Med and Clinical Research.
  36. Panahi, O. (2025). Nanomedicine: Tiny Technologies, Big Impact on Health. *Journal of Bio-Med and Clinical Research. RPC Publishers*, 2(1).
  37. Panahi, O. (2025). The evolving partnership: Surgeons and robots in the maxillofacial operating room of the future. *J Dent Sci Oral Care*, 1(1), 1-7.
  38. Panahi, O., & Cay, F. K. (2019). *Nanotechnology. Regenerative Medicine and Tissue Bioengineering*. Scholars Press Academic Publishing.
  39. Zarei, S., Panahi, D. O., & NimaBahador, D. (2019). Antibacterial activity of aqueous extract of eucalyptus camaldulensis against *Vibrio harveyi* (PTCC1755) and *Vibrio alginolyticus* (MK641453. 1). *Saarbucken: LAP*. Saarbucken: LAP.
  40. Zarei, S., & Panahi, D. O. (2019). Eucalyptus camaldulensis Extract as a Preventive to the Vibriosis.
  41. Panahi, O. (2024). Dental Implants & the Rise of AI. *On J Dent & Oral Health*, 8(1), 2024.
  42. Panahi, O., & Eslamlou, S. F. Bioengineering Innovations in Dental Implantology.
  43. Panahi, P., Bayılmış, C., Çavuşoğlu, U., & Kaçar, S. (2021). Performance evaluation of lightweight encryption algorithms for IoT-based applications. *Arabian Journal for Science and Engineering*, 46(4), 4015-4037.
  44. Panahi, U., & Bayılmış, C. (2023). Enabling secure data transmission for wireless sensor networks based IoT applications. *Ain Shams Engineering Journal*, 14(2), 101866.
  45. Panahi, O., & Panahi, U. (2025). AI-Powered IoT: Transforming Diagnostics and Treatment Planning in Oral Implantology. *J Adv Artif Intell Mach Learn*, 1(1), 1-4.
  46. Panahi, O. (2025). The Future of Healthcare: AI. Public Health and the Digital Revolution. *Medi Clin Case Rep J*, 3(1), 763-766.
  47. PANAHİ, O. (2013). Comparison between unripe Mako-pa fruit extract on bleeding and clotting time. *International Journal of Paediatric Dentistry*, 23, 205.
  48. Panahi, O., Arab, M. S., & Tamson, K. M. (2011). GINGIVAL ENLARGMENT AND RELEVANCE WITH LEUKEMIA. *International Journal of Academic Research*, 3(2).
  49. Panahi, D. O. (2021). Stammzellen aus dem Zahnmark.
  50. Panahi, D. O. (2021). Células madre de la pulpa dental.
  51. Dr Omid Panahi, Стволовые клетки пульпы зуба, ISBN: 978-620-4-05357-8.
  52. Panahi, D. O. (2021). Cellules souches de la pulpe dentaire.
  53. Panahi, D. O. (2021). Cellule staminali della polpa dentaria.
  54. Dr Omid Panahi, Células estaminais de polpa dentária, ISBN: 978-620-4-05360-8.
  55. Panahi, O., & Melody, F. R. (2011). A NOVEL SCHEME ABOUT EXTRACTION ORTHODONTIC AND ORTHOTHERAPY. *International Journal of Academic Research*, 3(2).
  56. Panahi, O., Nunag, G. M., & NOURINEZHAD, S. A. (2011). MOLECULAR PATHOLOGY: P-115: CORRELATION OF HELICOBACTER PYLORI AND PREVALENT INFECTIONS IN ORAL CAVITY.
  57. Panahi, P., Bayılmış, C., Çavuşoğlu, U., & Kaçar, S. (2018). Performance Evaluation of L-Block Algorithm for IoT Applications. *algorithms*, 14, 15.
  58. Panahi, P., Kaçar, S., Bayılmış, C., & Çavuşoğlu, U. (2019). Comparing PRESENT and LBlock block ciphers over IoT Platform. *Seed*, 128(128), 16.
  59. Panahi, U. (2022). Nesnelerin interneti için hafif siklet kriptoloji algoritmalarına dayalı güvenli haberleşme modeli tasarımı= Design of a lightweight cryptography-based secure communication model for the internet of things.
  60. Koyuncu, B., Panahi, P., & Varlioglu, S. (2015). Comparative indoor localization by using Landmarc and Cricket systems. *International Journal of Emerging Technology and Advanced Engineering*, 5(6), 453-456.
  61. Panahi, O., Eslamlou, D. S. F., & Jabbarzadeh, M. (2025). Digitale Zahnmedizin und künstliche Intelligenz.
  62. Panahi, D. O., Eslamlou, D. S. F., & Jabbarzadeh, D. M. (2025). Odontología digital e inteligencia artificial.
  63. Panahi, D. O., Eslamlou, D. S. F., & Jabbarzadeh, D. M. (2025). Dentisterie numérique et intelligence artificielle.
  64. Panahi, D. O., Eslamlou, D. S. F., & Jabbarzadeh, D. M. (2025). Odontoiatria digitale e intelligenza artificiale.
  65. Panahi, D. O., Eslamlou, D. S. F., & Jabbarzadeh, D. M. Stomatologia cyfrowa i sztuczna inteligencja.
  66. Panahi, D. O., Eslamlou, D. S. F., & Jabbarzadeh, D. M. (2025). Medicina dentária digital e inteligência artificial.
  67. Panahi, O., & Jabbarzadeh, M. (2025). The Expanding Role of Artificial Intelligence in Modern Dentistry. *On Journal of Dentistry & Oral Health*, 8(3).
  68. Omid, P., & Shabnam, D. (2025). Mitigating aflatoxin contamination in grains: The importance of postharvest management practices. *Adv Biotech & Micro*, 18(5), 555996.
  69. Panahi, O., & Ezzati, A. (2025). AI in Dental-Medicine: Current Applications & Future Directions. *Open Access J Clin Images*, 2(1), 1-5.
  70. Koyuncu, B., Gokce, A., & Panahi, P. (2015, April). Reconstruction of an Archeological site in real time domain by using software techniques. In *2015 Fifth International Conference on Communication Systems and Network Technologies* (pp. 1350-1354). IEEE.
  71. Omid, P., & Soren, F. (2025). The Digital Double: Data Privacy, Security, and Consent in AI Implants *West J Dent Sci*, 2(1), 108.
  72. Panahi, U., & Redes, A. D. HOC: Aplicações. *Desafios, Direções Futuras, Edições Nosso Conhecimento*.
  73. Panahi, D. U., & Sieni, A. D. HOC: Zastosowania, wyzwania, przyszłe kierunki. *Wydawnictwo Nasza Wiedza*.
  74. Panahi, D. U. (2025). Reti AD HOC: Applicazioni, sfide e direzioni future. Edizioni Sapienza.

75. Dr Omid Panahi, Dr Sevil Farrokh Eslamlou, Peridontium: Estrutura, função e gestão clínica, ISBN: 978-620-8-74561-5.
76. Panahi, D. O., & Dadkhah, D. S. (2025). AI in der modernen Zahnmedizin.
77. Panahi, D. O., & Dadkhah, D. S. (2025). La IA en la odontología moderna.
78. Panahi, D. O., & Dadkhah, D. S. (2025). L'IA dans la dentisterie moderne.
79. Panahi, D. O., & Dadkhah, D. S. L'intelligenza artificiale nell'odontoiatria moderna.
80. Panahi, D. O., & Dadkhah, D. S. (2025). Sztuczna inteligencja w nowoczesnej stomatologii.
81. Panahi, D. O., & Dadkhah, D. S. (2025). A IA na medicina dentária moderna.
82. Panahi, D. U. (2025). Redes AD HOC: Aplicaciones, retos y orientaciones futuras. *Ediciones Nuestro Conocimiento*.
83. Panahi, D. U. (2025). Réseaux AD HOC: Applications, défis et orientations futures. *Editions Notre Savoir*.
84. Panahi, D. U. (2025). AD HOC-Netze: Anwendungen. *Herausforderungen, zukünftige Wege, Verlag Unser Wissen*.
85. Panahi, O. (2025). The role of artificial intelligence in shaping future health planning. *Int J Health Policy Plann*, 4(1), 01-05.
86. Panahi, O. (2025). AI in Health Policy: Navigating Implementation and Ethical Considerations. *Int J Health Policy Plann*, 4(1), 01-05.
87. Panahi, O. (2024). Dental Implants & the Rise of AI. *On J Dent & Oral Health*, 8(1), 2024.
88. Panahi, O., & Falkner, S. (2025). Telemedicine, AI, and the Future of Public Health. *Western J Med Sci & Res*, 2(1), 102.
89. Panahi, O. (2025). Innovative Biomaterials for Sustainable Medical Implants: A Circular Economy Approach. *European Journal of Innovative Studies and Sustainability*, 1(2), 20-29.
90. Panahi, O. (2025). Wearable sensors and personalized sustainability: Monitoring health and environmental exposures in real-time. *European Journal of Innovative Studies and Sustainability*, 1(2), 11-19.
91. Panahi, O. (2025). AI-Enhanced Case Reports: Integrating Medical Imaging for Diagnostic Insights. *J Case Rep Clin Images*, 8(1), 1161.
92. Panahi, O. (2025). AI and IT in Medical Imaging: Case Reports. *J Case Rep Clin Images*, 8(1), 1160.
93. Panahi, O., Farrokh, S., & Amirloo, A. (2025). Robotics in Implant Dentistry: Current Status and Future Prospects. *Scientific Archives of Dental Sciences*, 7(9), 55-60.
94. Omid, P., & Soren, F. (2025). The Digital Double: Data Privacy, Security, and Consent in AI Implants. *Digit J Eng Sci Technol*, 2(1), 105.
95. Panahi, O. (2025). Algorithmic Medicine. *Journal of Medical Discoveries*, 2(1).
96. Panahi, O. (2025). Deep Learning in Diagnostics. *Journal of Medical Discoveries*, 2(1), 1-6.
97. Panahi, O. (2025). AI in Health Policy: Navigating Implementation and Ethical Considerations. *Int J Health Policy Plann*, 4(1), 01-05.
98. Panahi, O. (2025). The role of artificial intelligence in shaping future health planning. *Int J Health Policy Plann*, 4(1), 01-05.
99. Panahi, O. (2025). Secure IoT for Healthcare. *European Journal of Innovative Studies and Sustainability*, 1(1), 1-5.
100. Omid, P., & Evil Farrokh, E. (2024). Beyond the scalpel: AI, alternative medicine, and the future of personalized dental care. *J Complement Med Alt Healthcare*, 13(2), 555860.
101. Panahi, O., & Farrokh, S. (2025). Ethical considerations of AI in implant dentistry: A clinical perspective. *J Clin Rev Case Rep*, 10(2), 01-05.
102. Panahi, O., Ezzati, A., & Zeynali, M. (2025). Will AI replace your dentist? The future of dental practice. *On J Dent & Oral Health*, 8(3), 2025.
103. Panahi, O. (2025). Navigating the AI Landscape in Healthcare and Public Health. *Mathews J Nurs*, 7(1), 56.
104. Panahi, D. O., Esmaili, D. F., & Kargarnezhad, D. S. (2024). Künstliche Intelligenz in der Zahnmedizin.
105. Dr Omid Panahi, Dr Faezeh Esmaili, Dr Sasan Kargarnezhad (2024). Artificial Intelligence in Dentistry, Scholars Press Publishing. ISBN: 978-620-6772118. (English Edition).
106. Panahi, D. O., Esmaili, D. F., & Kargarnezhad, D. S. (2024). Inteligencia artificial en odontología, NUESTRO CONOC.
107. Panahi, O., Esmaili, F., & Kargarnezhad, S. (2024). L'intelligence artificielle dans l'odontologie. *EDITION NOTRE SAVOIR Publishing*.
108. Panahi, D. O., Esmaili, D. F., & Kargarnezhad, D. S. (2024). Intelligenza artificiale in odontoiatria.
109. Panahi, D. O., Esmaili, D. F., & Kargarnezhad, D. S. (2024). Inteligência Artificial em Medicina Dentária.