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Research Article

Open AI Chat GPT as a Patient-Facing Translator: Evaluating Artificial Intelligence-Generated Spanish and English Summaries of Breast Imaging Reports

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Abstract

Objective: Breast imaging reports are typically written for healthcare professionals using technical language that limits patient comprehension. This study evaluated ChatGPT's ability to simplify breast radiology reports into Spanish while maintaining clinical accuracy.

Methods: We collected 50 publicly posted breast imaging reports from Reddit, an online discussion platform, and used GPT-40 (March 2025 version) to generate simplified versions in both English and Spanish. Readability was assessed using Flesch Reading Ease Score (FRES) and Flesch Kincaid Grade Level (FKRL) for English outputs and Fernández-Huerta and Szigriszt-Pazos indices for Spanish outputs. A bilingual, fellowship-trained academic breast radiologist reviewed all outputs for clinical accuracy. Analysis included paired t-tests and Wilcoxon signed-rank tests.

Results: ChatGPT significantly improved English readability, reducing FKRL from 11.6 ± 1.8 to 9.6 ± 1.1 and increasing FRES from 33.9 ± 11.8 to 59.7 ± 5.4 (both p < .001). Word count was slightly higher for English outputs (248 ± 80 vs. 240 ± 140 words, p = .03), indicating gains were due to language simplification rather than content reduction. Spanish translations achieved Fernández-Huerta and Szigriszt-Pazos scores of 87.0 ± 5.1 and 83.5 ± 5.2 , respectively both in the "easy" readability range with no outputs exceeding the equivalent of an 8th-grade FKRL score. All English and Spanish outputs (100%) preserved clinical accuracy. Subgroup analysis showed that even the most complex reports, such as those involving biopsy, were effectively simplified without loss of meaning.

Conclusion: ChatGPT enhances the readability of breast imaging reports in English and Spanish while preserving fidelity.

Keywords: Breast Imaging; Radiology Report Simplification; ChatGPT; Artificial Intelligence; Spanish Translation; Health Literacy

Introduction

Radiology reports for mammography and breast ultrasound are typically written for healthcare providers rather than patients, using dense medical terminology, abbreviations, and complex sentence structures that significantly impair lay understanding [1]. This communication barrier is especially concerning in breast imaging,

where high patient anxiety often accompanies potential cancer diagnoses [2]. The implementation of the 21st Century Cures Act in the United States has further complicated this dynamic by granting patients immediate access to their radiology results, including breast imaging reports, often before any physician has reviewed the findings with them [3, 4]. Many patients find themselves faced with technically written results, prompting them to search the internet including forums, social media, and patient networks for explanations [5,6]. This phenomenon is visible on platforms like Reddit, an online forum and discussion platform (www.reddit.

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com), where users frequently post de-identified breast imaging reports seeking help interpreting their results. These real-world data points reflect authentic patient confusion and information needs [1,7].

Compounding this issue is the language barrier. Spanish is the most spoken non-English language in the United States, with approximately 13% of households speaking Spanish at home representing about 62% of all non-English speakers [8]. Yet, high-quality breast imaging education materials in Spanish remain limited [9]. Furthermore, most English-language breast imaging educational content is written at a 10th to 11th grade reading level well above the 6th grade level recommended by the AMA and NIH for health information materials [10, 11].

Large language models (LLM) like ChatGPT (www.chatGPT. com) offer a promising solution. Studies have demonstrated their capacity to simplify complex clinical text while retaining core meaning, with ChatGPT performing especially well in radiology and breast imaging contexts [12, 13]. Tools like ChatGPT, Gemini, and Microsoft Copilot have also shown the ability to accurately respond to frequently asked breast imaging questions, albeit with variability in readability levels [13]. Prior research has primarily examined readability improvements in English, using curated or synthetic cases, rather than real-world, patient-generated data [14-20]. Critically, no published study to date has evaluated ChatGPT's ability to translate breast imaging reports into Spanish from actual reports posted online by patients—a clear gap given the communication challenges faced by the Spanish-speaking population.

To address this, we evaluated ChatGPT's ability to simplify and translate into Spanish a set of 50 publicly posted breast imaging reports, originally written in English and shared online by patients. The outputs were assessed across three domains: readability, word counts, and clinical accuracy. We hypothesized that ChatGPT would generate Spanish-language outputs that are significantly more readable than the original English reports, while maintaining clinical fidelity—potentially offering a scalable solution to address a widespread communication gap in breast radiology.

Materials and Methods

Study Design and Ethical Approval

This cross-sectional, observational study evaluated the ability of OpenAI's ChatGPT to translate and simplify breast radiology reports, specifically mammography and breast ultrasound, into patient-friendly Spanish and English summaries. The study protocol was deemed exempt by The University of Texas MD Anderson Cancer Center institutional review board, and a waiver of informed consent was granted due to the retrospective design and the use of publicly available, de-identified data.

Data Source and Report Selection

A total of 50 breast imaging reports were collected from Reddit (www.reddit.com), a publicly accessible online platform where patients often post medical content and seek interpretation. Reports were identified by searching for the single keyword "mammogram report." To be included, posts had to contain full-text imaging reports written in English, include a direct request for clarification, and be free of identifiable patient information. Reports that did not meet these criteria were excluded. All reports were anonymized before analysis.

ChatGPT Translation and Simplification

The English text from each publicly posted report was entered into ChatGPT (version GPT-4o, San Francisco, OpenAI) to produce two distinct patient-facing outputs: a simplified English version and a Spanish translation with simplified language. Standardized prompts were used for consistency. For English simplification, the prompt was: "Explain this radiology report to a patient in layman's terms in second person: <Report Text>". For Spanish translation and simplification, the prompt was: "Explica este informe de radiología al paciente en términos simples y en segunda persona: <Report Text>." All ChatGPT outputs were saved for further analysis.

Readability and Word Count Assessment

Word counts and readability metrics were computed for both the original reports and the ChatGPT-generated outputs using Python (www.python.org) with the textstat package (pypi.org/project/textstat). For English texts, the Flesch Reading Ease Score (FRES) and Flesch–Kincaid Grade Level (FKRL) were calculated. For Spanish outputs, the Fernández-Huerta index and INFLESZ (Índice de legibilidad de Szigriszt-Pazos) were applied. All metrics were obtained using standardized textstat functions.

Accuracy and Fidelity Review

Accuracy was defined as the presence or absence of any clinically significant deviation from the impression and management recommendations stated within the original breast imaging reports. A bilingual, fellowship-trained academic breast radiologist (not an author of this study) with 16 years of clinical radiology experience, who is certified in both English and Spanish by LanguageLine Solutions, an on-demand interpretation and translation service (www.LanguageLine.com), reviewed all ChatGPT-generated outputs.

Readability Reference Framework

To categorize and interpret readability scores across the three outputs (original, ChatGPT English, and ChatGPT Spanish), we used multiple readability formulas: the Flesch-Kincaid Reading Level (FKRL), Flesch Reading Ease Score (FRES), Fernández-

Huerta, and Szigriszt-Pazos. We developed a unified reference table (Table 1) aligning these formulas with commonly accepted U.S. grade-level equivalents and qualitative readability descriptors (e.g., "Easy," "Difficult") based on prior literature [21-25]. This framework allowed for consistent binning of readability data across English and Spanish texts and facilitated side-by-side comparison.

| FRES | FKRL | Fernández-Huerta | Szigriszt-Pazos | Grade Level | Readability Level |
|--------|---------|------------------|-----------------|-------------|----------------------|
| 91-100 | 4 | 91-100 | 86-100 | 4 | Very Easy |
| 81-90 | 5 | 81-90 | 76-85 | 5 | Easy |
| 71-80 | 6 | 71-80 | 66-75 | 6 | Relatively Easy |
| 61-70 | 7-8 | 61-70 | 51-65 | 7-8 | Standard |
| 51-60 | 9-10 | 51-60 | 36-50 | 9-10 | Relatively Difficult |
| 31-50 | 11-12 | 31-50 | 16-35 | 11-12 | Difficult |
| 0-30 | College | 0-30 | 0-15 | College | Very Difficult |

Table 1: Reference table comparing the Flesch Reading Ease Score (FRES), Flesch-Kincaid Reading Level (FKRL), Fernández-Huerta, and Szigriszt-Pazos indices for cross comparison with commonly accepted U.S. grade-level equivalents and qualitative readability descriptors.

Statistical Analysis

We compared 50 original reports with their corresponding AI-simplified versions across three key characteristics: Word count, Flesch Reading Ease Score (FRES), and Flesch-Kincaid Reading Level (FKRL). For each characteristic, descriptive statistics were calculated, including measures of central tendency (mean, median) and variability (standard deviation, range). The distribution of differences between paired samples was assessed, and Shapiro-Wilk tests were performed to evaluate normality. Paired t-tests were used to test for statistically significant differences when normality assumptions were met, and Wilcoxon signed-rank tests were applied as a non-parametric alternative when normality was violated. This analytical framework for readability comparison was adapted from Li et al.⁵. All analyses were performed using Python (www.python.org).

Results

Table 2 details the study characteristics and readability metrics for the fifty breast imaging reports included in this study.

| l 1 * * * | | | | | ChatGPT Output: English | | | | ChatGPT Output: Spanish | | | | |
|-----------------|-----|------|------|----------|-------------------------|----------|---------------|------|-------------------------|----------|---------------|----------------------|---------------------|
| # Word Count | | FRES | FKRL | Modality | BI-RADS | Accuracy | Word Count | FRES | FKRL | Accuracy | Word Count | Fernández- Huerta | Szigriszt- Pazos |
| 1 | 476 | 34.1 | 12.8 | Mg/US | 5 | Yes | 419 | 67.2 | 8.4 | Yes | 434 | 93 | 89.7 |
| 2 | 478 | 29.9 | 12.9 | Mg/US | 4 | Yes | 485 | 61.4 | 9.5 | Yes | 371 | 88.1 | 84.7 |
| 3 | 378 | 43.9 | 9.5 | Mg/US | 4 | Yes | 327 | 60.6 | 9.3 | Yes | 302 | 89.5 | 85.9 |
| 4 | 220 | 29.3 | 11.9 | Scr | 0 | Yes | 288 | 56.7 | 9.8 | Yes | 252 | 88.8 | 85.2 |
| 5 | 202 | 34.1 | 11.1 | Mg/US | 4 | Yes | 272 | 63.9 | 8.6 | Yes | 292 | 87.6 | 83.9 |
| 6 | 61 | 26.3 | 13.4 | Scr | 0 | Yes | 155 | 55.6 | 10.3 | Yes | 119 | 83.2 | 79.7 |
| 7 | 157 | 35.5 | 11.8 | Mg/US | 4 | Yes | 241 | 54.1 | 10.7 | Yes | 187 | 85.1 | 81.5 |
| 8 | 103 | 36.1 | 11.4 | Scr | 0 | Yes | 141 | 51.4 | 11.1 | Yes | 165 | 80.3 | 76.7 |
| 9 | 300 | 27.6 | 12.6 | Scr | 0 | Yes | 292 | 52 | 10.8 | Yes | 288 | 84 | 80.7 |
| 10 | 188 | 42 | 9.9 | Mg/US | 0 | Yes | 310 | 59.8 | 9.2 | Yes | 356 | 90 | 86.6 |

| | r | 1 | | ı . | Y | T | 1 | ı | ı | 1 | | Y | |
|----|-----|------|------|----------------|---|-----|-----|------|------|-----|-----|------|------|
| 11 | 128 | -9.9 | 17.5 | Mg/US | 0 | Yes | 226 | 42 | 13 | Yes | 229 | 81 | 77.6 |
| 12 | 108 | 49 | 9.4 | Scr | 0 | Yes | 186 | 57.8 | 9.4 | Yes | 215 | 84.5 | 80.9 |
| 13 | 130 | 15.2 | 13.4 | Scr | 0 | Yes | 196 | 64.1 | 9.1 | Yes | 198 | 82.1 | 78.5 |
| 14 | 187 | 52.9 | 8.6 | US | 3 | Yes | 215 | 62.7 | 9 | Yes | 220 | 91.9 | 88.5 |
| 15 | 256 | 32.3 | 11.5 | Scr + US | 0 | Yes | 266 | 62.8 | 8.9 | Yes | 298 | 95.2 | 91.8 |
| 16 | 288 | 38.3 | 10.8 | Mg/US | 0 | Yes | 363 | 61.3 | 9 | Yes | 342 | 87 | 83.6 |
| 17 | 147 | 17 | 14.5 | Scr | 0 | Yes | 348 | 65.7 | 8.4 | Yes | 206 | 92.3 | 88.8 |
| 18 | 173 | 29.1 | 11.9 | Scr | 0 | Yes | 272 | 58.7 | 9.9 | Yes | 271 | 77.8 | 74 |
| 19 | 381 | 34.5 | 11.8 | Mg/US | 0 | Yes | 371 | 58.3 | 9.3 | Yes | 433 | 84.8 | 81.2 |
| 20 | 73 | 23.1 | 13 | Scr | 0 | Yes | 159 | 55.4 | 9.9 | Yes | 166 | 90.5 | 87 |
| 21 | 81 | 31.7 | 13.9 | Mg/US | 4 | Yes | 176 | 59.2 | 9.4 | Yes | 158 | 89.1 | 85.7 |
| 22 | 151 | 43.7 | 9.2 | Mg/US | 5 | Yes | 222 | 56.1 | 9.6 | Yes | 186 | 87.3 | 83.7 |
| 23 | 199 | 43.7 | 9 | Mg/US | 3 | Yes | 190 | 62.9 | 9.2 | Yes | 226 | 92.5 | 89.1 |
| 24 | 120 | 16.7 | 13.7 | Scr | 6 | Yes | 154 | 48.9 | 11.2 | Yes | 189 | 82.5 | 78.8 |
| 25 | 128 | 25.8 | 12.5 | Scr | 0 | Yes | 155 | 52.8 | 9.4 | Yes | 191 | 91.3 | 87.8 |
| 26 | 217 | 39.7 | 10.7 | Scr | 0 | Yes | 251 | 52.4 | 10.7 | Yes | 208 | 87.5 | 84 |
| 27 | 127 | 40.1 | 10.8 | Scr | 0 | Yes | 217 | 66.1 | 8.5 | Yes | 172 | 85.8 | 82.7 |
| 28 | 111 | 14.5 | 14.3 | Scr | 0 | Yes | 157 | 56.4 | 9.7 | Yes | 162 | 78.8 | 75.2 |
| 29 | 103 | 35.5 | 10.4 | US | 4 | Yes | 195 | 66.7 | 8 | Yes | 129 | 81.1 | 77.3 |
| 30 | 154 | 30.4 | 13.8 | Mg/US | 4 | Yes | 205 | 68.3 | 7.7 | Yes | 188 | 90.3 | 87 |
| 31 | 330 | 31.6 | 11.7 | Mg/US | 3 | Yes | 260 | 59.2 | 9.6 | Yes | 355 | 87.2 | 83.7 |
| 32 | 105 | 56.1 | 9.8 | Mg/US | 3 | Yes | 227 | 64.4 | 9.4 | Yes | 248 | 91.2 | 88.1 |
| 33 | 719 | 54.6 | 8.5 | Bx + Mg/ US | 5 | Yes | 302 | 53.8 | 10.2 | Yes | 260 | 91.1 | 87.7 |
| 34 | 241 | 42 | 9.6 | Mg/US | 3 | Yes | 265 | 61.6 | 8.8 | Yes | 276 | 89.2 | 85.8 |
| 35 | 166 | 30 | 11.8 | Scr | 0 | Yes | 228 | 59.2 | 10.6 | Yes | 196 | 79.7 | 76 |
| 36 | 163 | 20.6 | 14 | Scr | 0 | Yes | 222 | 57.3 | 10.7 | Yes | 236 | 82.3 | 78.6 |
| 37 | 190 | 41.7 | 11.3 | Mg/US | 5 | Yes | 246 | 65.9 | 8.4 | Yes | 213 | 88.2 | 84.8 |
| 38 | 245 | 39.4 | 10.9 | Mg/US | 3 | Yes | 169 | 59 | 9.2 | Yes | 192 | 93.2 | 90 |
| 39 | 472 | 43.9 | 9.6 | Mg/US | 4 | Yes | 295 | 55.7 | 9.8 | Yes | 290 | 82.1 | 78.5 |
| 40 | 105 | 23.4 | 12.9 | Dx Mg | 4 | Yes | 157 | 53.7 | 11.3 | Yes | 149 | 70.9 | 67.5 |

| 147 | 31.6 | 11.5 | Dx Mg | 3 | Yes | 223 | 65 | 7.9 | Yes | 232 | 83.1 | 79.4 |
|-------|---|--|---|---|---|--|--|--|--|--|--|--|
| 194 | 37.1 | 10.8 | Scr | 0 | Yes | 279 | 66.2 | 9 | Yes | 220 | 88.3 | 84.9 |
| 306 | 46.2 | 10.8 | Mg/US | 4 | Yes | 380 | 61.8 | 10.5 | Yes | 353 | 87.5 | 84.2 |
| 243 | 48.8 | 9.6 | Mg/US | 4 | Yes | 358 | 65.2 | 9.4 | Yes | 368 | 99.1 | 96 |
| 127 | 32.3 | 11.3 | Dx Mg | 0 | Yes | 170 | 61.4 | 10 | Yes | 189 | 90.6 | 87.1 |
| 78 | 32.3 | 11.9 | Scr | 0 | Yes | 181 | 60.7 | 9.8 | Yes | 158 | 87.5 | 84 |
| 201 | 32.5 | 12.6 | Mg/US | 3 | Yes | 224 | 60.5 | 10.4 | Yes | 131 | 84.4 | 81.2 |
| 617 | 44.7 | 10 | Mg/US | 5 | Yes | 335 | 61.4 | 10.2 | Yes | 315 | 92.6 | 89.2 |
| 297 | 42.9 | 12.2 | Mg/US | 4 | Yes | 311 | 62 | 9.4 | Yes | 259 | 88.7 | 85.4 |
| 81 | 23.2 | 12.5 | Scr | 1 | Yes | 110 | 68.3 | 6.8 | Yes | 132 | 89.3 | 85.6 |
| 217.0 | 33.9 | 11.6 | | | | 247.9 | 59.7 | 9.6 | | 238.5 | 87.0 | 83.5 |
| 140.4 | 11.8 | 1.8 | | | | 79.6 | 5.4 | 1.1 | | 78.6 | 5.1 | 5.2 |
| 180 | 34.1 | 11.6 | | | | 227.5 | 60.6 | 9.4 | | 220 | 87.6 | 84.1 |
| 61 | -9.9 | 8.5 | | | | 110 | 42 | 6.8 | | 119 | 70.9 | 67.5 |
| 719 | 56.1 | 17.5 | | | 1: 1 | 485 | 68.3 | 13 | | 434 | 99.1 | 96 |
| | 194 306 243 127 78 201 617 297 81 217.0 140.4 180 61 719 | 194 37.1 306 46.2 243 48.8 127 32.3 78 32.3 201 32.5 617 44.7 297 42.9 81 23.2 217.0 33.9 140.4 11.8 180 34.1 61 -9.9 719 56.1 | 194 37.1 10.8 306 46.2 10.8 243 48.8 9.6 127 32.3 11.3 78 32.3 11.9 201 32.5 12.6 617 44.7 10 297 42.9 12.2 81 23.2 12.5 217.0 33.9 11.6 140.4 11.8 1.8 180 34.1 11.6 61 -9.9 8.5 719 56.1 17.5 | 194 37.1 10.8 Scr 306 46.2 10.8 Mg/US 243 48.8 9.6 Mg/US 127 32.3 11.3 Dx Mg 78 32.3 11.9 Scr 201 32.5 12.6 Mg/US 617 44.7 10 Mg/US 297 42.9 12.2 Mg/US 81 23.2 12.5 Scr 217.0 33.9 11.6 140.4 11.8 1.8 180 34.1 11.6 61 -9.9 8.5 719 56.1 17.5 | 194 37.1 10.8 Scr 0 306 46.2 10.8 Mg/US 4 243 48.8 9.6 Mg/US 4 127 32.3 11.3 Dx Mg 0 78 32.3 11.9 Scr 0 201 32.5 12.6 Mg/US 3 617 44.7 10 Mg/US 5 297 42.9 12.2 Mg/US 4 81 23.2 12.5 Scr 1 217.0 33.9 11.6 1 140.4 11.8 1.8 1 180 34.1 11.6 1 61 -9.9 8.5 1 719 56.1 17.5 1 | 194 37.1 10.8 Scr 0 Yes 306 46.2 10.8 Mg/US 4 Yes 243 48.8 9.6 Mg/US 4 Yes 127 32.3 11.3 Dx Mg 0 Yes 78 32.3 11.9 Scr 0 Yes 201 32.5 12.6 Mg/US 3 Yes 617 44.7 10 Mg/US 5 Yes 297 42.9 12.2 Mg/US 4 Yes 81 23.2 12.5 Scr 1 Yes 217.0 33.9 11.6 1 140.4 11.8 1.8 180 34.1 11.6 11.6 11.6 1 61 -9.9 8.5 1 17.5 1 | 194 37.1 10.8 Scr 0 Yes 279 306 46.2 10.8 Mg/US 4 Yes 380 243 48.8 9.6 Mg/US 4 Yes 358 127 32.3 11.3 Dx Mg 0 Yes 170 78 32.3 11.9 Scr 0 Yes 181 201 32.5 12.6 Mg/US 3 Yes 224 617 44.7 10 Mg/US 5 Yes 335 297 42.9 12.2 Mg/US 4 Yes 311 81 23.2 12.5 Scr 1 Yes 110 217.0 33.9 11.6 247.9 140.4 11.8 1.8 79.6 180 34.1 11.6 227.5 61 -9.9 8.5 110 719 56.1 17.5 485 | 194 37.1 10.8 Scr 0 Yes 279 66.2 306 46.2 10.8 Mg/US 4 Yes 380 61.8 243 48.8 9.6 Mg/US 4 Yes 358 65.2 127 32.3 11.3 Dx Mg 0 Yes 170 61.4 78 32.3 11.9 Scr 0 Yes 181 60.7 201 32.5 12.6 Mg/US 3 Yes 224 60.5 617 44.7 10 Mg/US 5 Yes 335 61.4 297 42.9 12.2 Mg/US 4 Yes 311 62 81 23.2 12.5 Scr 1 Yes 110 68.3 217.0 33.9 11.6 247.9 59.7 140.4 11.8 1.8 79.6 5.4 180 34.1 11.6 227.5 60.6 61 -9.9 8.5 110 485 68.3 | 194 37.1 10.8 Scr 0 Yes 279 66.2 9 306 46.2 10.8 Mg/US 4 Yes 380 61.8 10.5 243 48.8 9.6 Mg/US 4 Yes 358 65.2 9.4 127 32.3 11.3 Dx Mg 0 Yes 170 61.4 10 78 32.3 11.9 Scr 0 Yes 181 60.7 9.8 201 32.5 12.6 Mg/US 3 Yes 224 60.5 10.4 617 44.7 10 Mg/US 5 Yes 335 61.4 10.2 297 42.9 12.2 Mg/US 4 Yes 311 62 9.4 81 23.2 12.5 Scr 1 Yes 110 68.3 6.8 217.0 33.9 11.6 1.6 247.9 59.7 9.6 140.4 11.8 1.8 79.6 5.4 1.1 | 194 37.1 10.8 Scr 0 Yes 279 66.2 9 Yes 306 46.2 10.8 Mg/US 4 Yes 380 61.8 10.5 Yes 243 48.8 9.6 Mg/US 4 Yes 358 65.2 9.4 Yes 127 32.3 11.3 Dx Mg 0 Yes 170 61.4 10 Yes 78 32.3 11.9 Scr 0 Yes 181 60.7 9.8 Yes 201 32.5 12.6 Mg/US 3 Yes 224 60.5 10.4 Yes 617 44.7 10 Mg/US 5 Yes 335 61.4 10.2 Yes 297 42.9 12.2 Mg/US 4 Yes 311 62 9.4 Yes 81 23.2 12.5 Scr 1 Yes 110 68.3 6.8 Yes 217.0 33.9 11.6 247.9 59.7 9.6 <td< td=""><td>194 37.1 10.8 Scr 0 Yes 279 66.2 9 Yes 220 306 46.2 10.8 Mg/US 4 Yes 380 61.8 10.5 Yes 353 243 48.8 9.6 Mg/US 4 Yes 358 65.2 9.4 Yes 368 127 32.3 11.3 Dx Mg 0 Yes 170 61.4 10 Yes 189 78 32.3 11.9 Scr 0 Yes 181 60.7 9.8 Yes 158 201 32.5 12.6 Mg/US 3 Yes 224 60.5 10.4 Yes 131 617 44.7 10 Mg/US 5 Yes 335 61.4 10.2 Yes 315 297 42.9 12.2 Mg/US 4 Yes 311 62 9.4 Yes 259 81</td><td>194 37.1 10.8 Scr 0 Yes 279 66.2 9 Yes 220 88.3 306 46.2 10.8 Mg/US 4 Yes 380 61.8 10.5 Yes 353 87.5 243 48.8 9.6 Mg/US 4 Yes 358 65.2 9.4 Yes 368 99.1 127 32.3 11.3 Dx Mg 0 Yes 170 61.4 10 Yes 189 90.6 78 32.3 11.9 Scr 0 Yes 181 60.7 9.8 Yes 158 87.5 201 32.5 12.6 Mg/US 3 Yes 224 60.5 10.4 Yes 131 84.4 617 44.7 10 Mg/US 5 Yes 335 61.4 10.2 Yes 315 92.6 297 42.9 12.2 Mg/US 4 Yes 311 62 9.4 Yes 259 88.7 81 <td< td=""></td<></td></td<> | 194 37.1 10.8 Scr 0 Yes 279 66.2 9 Yes 220 306 46.2 10.8 Mg/US 4 Yes 380 61.8 10.5 Yes 353 243 48.8 9.6 Mg/US 4 Yes 358 65.2 9.4 Yes 368 127 32.3 11.3 Dx Mg 0 Yes 170 61.4 10 Yes 189 78 32.3 11.9 Scr 0 Yes 181 60.7 9.8 Yes 158 201 32.5 12.6 Mg/US 3 Yes 224 60.5 10.4 Yes 131 617 44.7 10 Mg/US 5 Yes 335 61.4 10.2 Yes 315 297 42.9 12.2 Mg/US 4 Yes 311 62 9.4 Yes 259 81 | 194 37.1 10.8 Scr 0 Yes 279 66.2 9 Yes 220 88.3 306 46.2 10.8 Mg/US 4 Yes 380 61.8 10.5 Yes 353 87.5 243 48.8 9.6 Mg/US 4 Yes 358 65.2 9.4 Yes 368 99.1 127 32.3 11.3 Dx Mg 0 Yes 170 61.4 10 Yes 189 90.6 78 32.3 11.9 Scr 0 Yes 181 60.7 9.8 Yes 158 87.5 201 32.5 12.6 Mg/US 3 Yes 224 60.5 10.4 Yes 131 84.4 617 44.7 10 Mg/US 5 Yes 335 61.4 10.2 Yes 315 92.6 297 42.9 12.2 Mg/US 4 Yes 311 62 9.4 Yes 259 88.7 81 <td< td=""></td<> |

Note: Bx + Mg/US = diagnostic mammogram with ultrasound and biopsy combined report, Dx Mg = diagnostic mammogram, FKRL = Flesch-Kincaid Reading Level, FRES = Flesch Reading Ease Score, Mg/US = diagnostic mammogram and ultrasound combined report, Scr = screening mammogram, Scr + US = screening mammogram and ultrasound combined report, SD = standard deviation, US = ultrasound.

Table 2: Readability data for each original post from Reddit and ChatGPT outputs in English and Spanish.

Readability Improvement and Fidelity

ChatGPT English outputs (Figure 1) were significantly easier to read than the original report text from Reddit. Mean Flesch Reading Ease Score (FRES) increased from 33.9 ± 11.8 to 59.7 ± 5.4 (p < .001), and mean Flesch-Kincaid Reading Level (FKRL) decreased from 11.6 ± 1.8 to 9.6 ± 1.1 (p < .001) (Table 3). Word count was slightly higher in the ChatGPT English outputs compared to the original reports (248 ± 80 vs. 240 ± 140 words), and this difference was statistically significant (p = .03), suggesting

that readability gains were achieved through simplification of language rather than content reduction. Clinical accuracy, as assessed by the bilingual breast radiologist, was preserved in all 50/50 (100%) English outputs. ChatGPT's Spanish outputs were similarly effective. Fernández-Huerta scores averaged 87.0 ± 5.1 and Szigriszt-Pazos scores averaged 83.5 ± 5.2 , both falling in the "easy" readability range. Mean word count (239 \pm 79) was again comparable to English outputs (p = .15). All 50 Spanish outputs were deemed 100% accurate.

Original Report

FINDINGS:
MAMMOGRAMS:
Breast Composition: The breasts are heterogeneously dense, which may obscure small masses.

Focal asymmetry in the upper inner left breast middle to posterior depth with associated distortion persists on spot compression tomosynthesis.

ULTRASOUND:

OLI (ASSOCIAL). Technique/Findings: Targeted left breast axillary ultrasound performed. No definite suspicious sonographic correlate is identified to the focal asymmetry seen on mammogram. No evidence of axillary adenopathy.

IMPRESSION:
Focal asymmetry with associated architectural distortion persists on spot compression tomosynthesis, however no definite suspicious radiographic abnormalities are identified. Mammographic morphology is suspicious. Recommend contrast enhanced MRI for additional evaluation. If a suspicious lesion is identified on MRI, recommend MRI guided biopsy. If no suspicious MR correlates are identified, recommend attempt at stereotactic biopsy of architectural distortion.

ASSESSMENT: BI-RADS Category 0: Incomplete: Need additional imaging evaluation.

(1A)

ChatGPT Output: English

What your mammogram and ultrasound showed

Your breast tissue is described as heterogeneously dense, which means it has a mix of dense and fatty tissue. This can sometimes make it harder to see small abnormalities on a mammogram.

On the mammogram, the radiologist saw an area in the upper inner part of your left breast that looks different from the surrounding tissue. This area, called a focal asymmetry, is slightly distorted in shape and shows up even after a closer look with special compression views.

They also did a targeted ultrasound of that same area and your underarm (axilla), but did not see anything clearly abnormal on the ultrasound, and your lymph nodes looked normal.

While the area on the mammogram looks somewhat suspicious, nothing clearly worrisome was found on the ultrasound. Because of the persistent unusual appearance on the mammogram, your doctor recommends a contrast-enhanced breast MRI to get a more detailed look. If the MRI shows a suspicious spot, a biopsy guided by MRI would be the next step. If the MRI doesn't show anything clearly concerning, they still recommend trying a biopsy using mammogram guidance (setreotactic biopsy) to make sure everything is okay.

Current Status:

Your case is classified as BI-RADS 0, which means the results are incomplete—more imaging (the MRI) is needed before a final assessment can be made.

(1B)

ChatGPT Output: Spanish

En tu mamografía, se observó que tienes tejido mamario denso, lo cual es común pero puede hacer más dificil detectar anormalidades pequeñas.

Se encontró una área en tu mama izquierda (parte superior interna, más hacia el fondo del pecho) que se ve un poco diferente del resto del tejido. Esta área se llama "asimetría focal" y viene acompañada de una leve distorsión del tejido, lo cual puede ser una señal sutil de algo anormal. Al hacer imágenes adicionales más detalladas (llamadas tomosintesis), esta área seguia viendose igual.

Después, se hizo un ultrasonido dirigido en esa zona y en la axila izquierda para ver si algo anormal aparecía en ese tipo de imagen. No se encontró ningún bulto u otra anormalidad clara en el ultrasonido, ni tampoco ganglios inflamados en la axila

Aunque en las imágenes de mamografía esta zona se ve sospechosa, aún no hay una confirmación clara de que sea algo preocupante, por eso el informe sugiere que necesitas una resonancia magnética con contraste (MRI) para mirar mejor esa área.

Según lo que muestre la resonancia: Si se encuentra una lesión sospechosa, se recomendará hacer una biopsia guiada por MRI. Si no se ve nada preocupante en la MRI, se recomienda intentar una biopsia usando la mamografia como guia.

El estudio fue clasificado como BI-RADS 0, lo cual significa que necesitas más estudios para llegar a una conclusión

(1C)

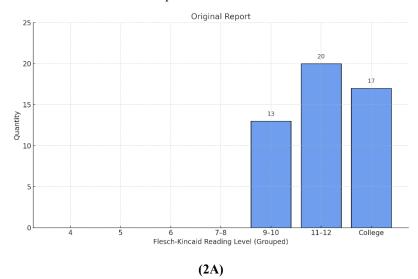
Figure 1: Sample breast imaging report from Reddit (A) with correspoding ChatGPT outputs in English (B) and Spanish (C).

| | Word Count (Mean ± SD) | FRES (Mean ± SD) | FKRL (Mean ± SD) | Accuracy |
|-------------------------|---------------------------|---------------------------------|--------------------------------|---------------|
| Report Text from Reddit | 240 ± 140 | 33.9 ± 11.8 | 11.6 ± 1.8 | |
| ChatGPT Output: English | 248 ± 80 | 59.7 ± 5.4 | 9.6 ± 1.1 | 50/50 (100%) |
| P value | .03 | <.001 | <.001 | |
| | Word Count (Mean ± SD) | Fernández-Huerta (Mean ± SD) | Szigriszt-Pazos (Mean ± SD) | Accuracy |
| Report Text from Reddit | 240 ± 140 | | | |
| ChatGPT Output: Spanish | 239 ± 79 | 87.0 ± 5.1 | 83.5 ± 5.2 | 50/50 (100%) |
| P value | .15 | | | |
| P value | .15 | Flesch Reading Ease Score, | | 13.13 (10076) |

Table 3: Word counts, Flesch Reading Ease Score (FRES), Flesch-Kincaid Reading Level (FKRL), Fernández-Huerta, and Szigriszt-Pazos indices for the original report post from Reddit, English ChatGPT output, and the Spanish ChatGPT output.

Distribution of Reading Level Categories

Histogram visualizations (Figure 2) further highlighted these readability improvements. For FKRL, the distribution of grade levels in the original reports skewed toward 11th-12th grade and college-level reading, with 70% of samples above the 9th-grade threshold. In contrast, the ChatGPT English outputs showed a clear shift leftward, with the majority of reports clustering in the 7th-10th grade range, closer to recommended public health standards. For the Spanish outputs, Fernández-Huerta scores were converted to FKRL-equivalent bins for comparison using validated thresholds per Table 1. The Spanish translations overwhelmingly fell into categories equivalent to 4th-6th grade FKRL scores, with no samples exceeding the "7-8" grade band. This shift not only surpassed the English readability gains but also aligned with NIH and AMA recommendations for patient education materials.



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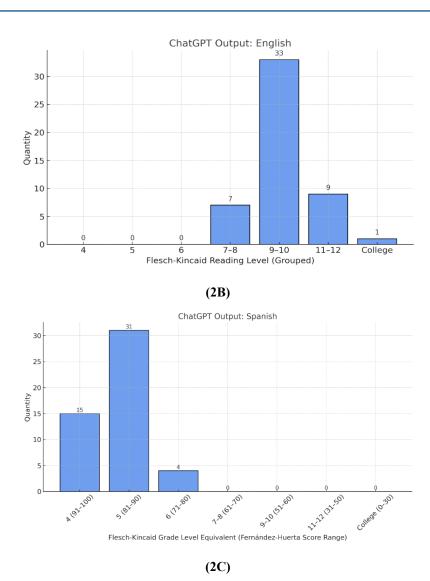


Figure 2: Histogram of the reading level of the original report posted on Reddit (A), ChatGPT-simplified English Outputs (B), and ChatGPT-simplified Spanish Outputs (C).

Subgroup Analysis by Imaging Modality

We stratified reports by imaging modality and procedure complexity to explore whether certain report types were more difficult to simplify (Table 4). Reports involving diagnostic mammography and ultrasound (n=24) were the longest (271 \pm 137 words) and had higher FKRL (11.3 \pm 2.0) and lower FRES (37.6 \pm 12.0) compared to simpler screening mammograms (n=19; 142 \pm 60 words; FKRL = 12.3 \pm 1.4; FRES = 28.0 \pm 9.4). This suggests that complexity and wordiness correlated with lower readability. However, ChatGPT effectively simplified even the longest, most technical reports across all subgroups.

| N | Overall BI-RADS Category (N) | Mean Word Count (SD) | Mean FRES (SD) | Mean FKRL (SD) |
|----|-----------------------------------|--|--|---|
| 19 | 0 (18) 1 (1) | 142 (60) | 28.0 (9.4) | 12.3 (1.4) |
| 1 | 0 (1) | 256 | 32.3 | 11.5 |
| 3 | 0 (1) 3 (1) 4 (1) | 126 (21) | 29.1 (4.9) | 11.9 (0.9) |
| 2 | 3 (1) 4 (1) | 145 (59) | 44.2 (12.3) | 9.5 (1.3) |
| 1 | 5 (1) | 719 | 54.6 | 8.5 |
| 24 | 0 (4) 3 (6) 4 (10) 5 (4) | 271 (137) | 37.6 (12.0) | 11.3 (2.0) |
| | 19 1 3 2 | Category (N) 19 0 (18) 1 (1) 1 0 (1) 3 0 (1) 3 (1) 4 (1) 2 3 (1) 4 (1) 1 5 (1) 24 0 (4) 3 (6) 4 (10) | N Category (N) Count (SD) 19 0 (18) 1 (1) 142 (60) 1 0 (1) 256 3 3 (1) 4 (1) 126 (21) 2 3 (1) 4 (1) 145 (59) 1 5 (1) 719 24 3 (6) 4 (10) 271 (137) | N Category (N) Count (SD) Mean FRES (SD) 19 0 (18) 1 (1) 142 (60) 28.0 (9.4) 1 0 (1) 256 32.3 3 3 (1) 4 (1) 126 (21) 29.1 (4.9) 2 3 (1) 4 (1) 145 (59) 44.2 (12.3) 1 5 (1) 719 54.6 24 3 (6) 4 (10) 271 (137) 37.6 (12.0) |

Table 4: Readability indices of the original reports posted on Reddit by imaging modality.

Discussion

Collectively, these findings demonstrate that ChatGPT significantly improves the readability of breast imaging reports in both English and Spanish without sacrificing clinical accuracy. Improvements were consistent across all assessed readability metrics and across a diverse set of report types, including screening mammograms, diagnostic studies, ultrasounds, and reports involving biopsy. In English, ChatGPT reduced the reading level by approximately two grade levels on average (from FKRL 11.6 to 9.6), shifting many reports from a "difficult" readability range into a more "standard" or "relatively difficult" range, closer to public health recommendations for patient materials. The distribution histogram confirms that these shifts were not isolated to a few outliers but rather reflected a widespread pattern across the sample. In Spanish, the effect was even more striking. Based on the Fernández-Huerta and Szigriszt-Pazos scales, the vast majority of translated reports achieved "very easy" or "easy" readability (scores ≥ 80), with no translations falling into the "very difficult" or "difficult" ranges. This resulted in a noticeable shift toward lower-grade equivalents compared to the original English reports. Importantly, despite these simplifications, all 50 translated outputs retained full clinical accuracy, as verified by the bilingual breast radiologist.

Together, these findings suggest that ChatGPT can be a powerful tool to bridge the communication gap in breast imaging, particularly for Spanish-speaking populations who may face compounded barriers due to both language and literacy challenges. By significantly lowering readability scores and maintaining

medical accuracy, ChatGPT outputs may help patients better understand their imaging results, potentially reducing anxiety, improving informed decision-making, and supporting shared decision-making conversations with healthcare providers [26].

Several recent studies have explored the use of LLMs to improve patient understanding of radiology reports, primarily through automated summarization and rewording strategies. In 2016, Hassanpour and Langlotz pioneered this area by developing natural language processing methods to extract key findings from radiology reports for structured summarization [27]. Furthermore, Van Veen et al. introduced RadAdapt, an LLM pipeline using lightweight domain adaptation to fine-tune models specifically on radiology reports [28]. Their model produced concise impressions that aligned with expert radiologist assessments, demonstrating both fluency and factual coherence in summarization tasks. Building on this trajectory, in 2025, Yang et al. employed reinforcement learning from AI feedback to align LLM-generated chest CT impressions with radiologist-preferred summaries, achieving ~78% agreement and measurable gains in precision, recall, and F1 scores over unaligned models [29].

Recent work has also begun to examine LLM performance in producing patient-directed summaries. In 2024, Jeblick et al. evaluated ChatGPT for rewriting radiology reports into plain language and found substantial improvements in readability while maintaining high factual accuracy—though some minor omissions were observed in less clinically significant details [12]. Kuckelman et al. examined ChatGPT-4 in the context of musculoskeletal

radiology and demonstrated that the model could consistently produce simplified summaries that retained key diagnostic content, indicating its potential utility in patient communication workflows [30]. Similarly, Park et al. developed a generative-AI pipeline specifically tailored for creating patient-centered radiology reports [31]. Their study reported notable improvements in patients' perceived clarity and ease of understanding, without compromising clinical accuracy or diagnostic integrity. These findings collectively suggest that LLMs may offer scalable solutions for improving the accessibility of radiologic information. However, despite these encouraging advances, most prior research has focused exclusively on English-language reports and clinician-facing summarization tasks, rather than addressing the dual challenges of improving lay readability and meeting the needs of multilingual patient populations. Further work here is indicated.

While this study demonstrates the potential of ChatGPT to improve accessibility of breast imaging reports through simplified Spanish translations, several limitations merit discussion. First, there is no single readability metric validated for both English and Spanish text, limiting true statistical comparison of English and Spanish readability indices. Second, the dataset consisted of de-identified mammography and ultrasound reports, which may not represent the full range of breast imaging language encountered in diverse clinical settings. The selection may still be biased toward reports with ambiguous or complex wording, given the nature of patientgenerated content, and may not capture the variability present in institutional documentation styles. Third, the readability metrics used, Flesch-Kincaid Reading Level (FKRL) and Fernández-Huerta, offer useful benchmarks but are inherently limited in their ability to assess true patient comprehension. These indices are based on surface-level textual features like sentence and word length, rather than semantic clarity, numeracy, or cultural relevance. Moreover, while both are well-established, they were developed for general prose and may not fully capture the complexities of bilingual or health-specific communication. Fourth, the study assessed translation quality and clinical accuracy based on expert review by a single bilingual, fellowship-trained academic breast radiologist. While this ensured a high level of clinical consistency, it limits the generalizability of our findings. Broader validation by panels including native Spanish-speaking patients, patient advocates, and multidisciplinary clinicians will be important to assess real-world utility and trust. Fifth, we evaluated only one LLM, ChatGPT-40, at a single time point. As LLMs continue to evolve rapidly, future research should compare performance across different models (e.g., Gemini, Claude, Copilot) and evaluate the impact of newer model versions, system prompts, and fine-tuning strategies tailored to radiology or patient education.

Conclusion

This study demonstrates that ChatGPT can effectively simplify

breast imaging reports in both English and Spanish, substantially improving readability while preserving clinical accuracy. By reducing the average reading level by approximately two grades in English and achieving "easy" or "very easy" readability in Spanish, ChatGPT addresses a critical communication gap for patients with varying health literacy and language needs. These findings highlight the potential of LLMs to enhance patient engagement and comprehension, particularly in breast imaging, where anxiety and misunderstanding of reports are common. As generative AI technologies continue to advance, integrating them into patient-centered communication strategies, while ensuring expert oversight, may help bridge linguistic and literacy barriers, ultimately improving informed decision-making and trust in radiologic care.

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Ethical Considerations

This study was deemed exempt from IRB review by the IRB. Informed consent was waived because this study was determined not to be research involving human subjects by the IRB.

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Data Availability

The original contributions presented in this study are included in the article/supplementary material. Further inquiries can be directed to the corresponding author.

Conflicts of Interest

The authors declare no conflict of interest.

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