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# A deep learning system for differential diagnosis of skin diseases

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# **Supplementary Information**

#### Supplementary Methods

#### Labeler onboarding and certification

In addition to formal board certification, all study participants (dermatologists, PCPs, and NPs) underwent an onboarding process to familiarize with the grading tools. In particular, the dermatologists comprising the reference standard graded 147 cases randomly sampled from the development set as an assessment to ensure consistent grading. For each case, their leading diagnosis was compared to the aggregated opinion of a panel of three experienced U.S. board-certified dermatologists, and only dermatologists who had an top-3 accuracy exceeding 60% participated in determining the reference standard for the validation set. This threshold was chosen based on the statistics of dermatologist grader accuracy, so as to leave room for disagreement in complex cases while ensuring a minimum consistency in grading following guidelines (e.g. specificity of diagnoses) and familiarity with the tool. Among 53 dermatologists who completed the test, the average score was 69%. Three dermatologists did not meet the 60% threshold; none of these dermatologists graded the validation set.

#### Reference standard voting procedure and reproducibility

Here, we detail the voting procedure<sup>47</sup> used to improve reproducibility of our reference standard (Supplementary Fig. 10). First, each dermatologist provided up to three differential diagnoses and accompanying confidence values in the range [1, 5] for each of the diagnosis. Next, each diagnosis was mapped to a condition. If duplicates occurred (i.e. multiple diagnoses were mapped to the same condition), the highest confidence was retained. The relative ranks of the mapped conditions were used to rank the conditions into a differential diagnosis (i.e. primary, secondary, and tertiary diagnosis). Each mapped condition was then assigned a weight: the inverse of the rank. If multiple mapped conditions shared the same confidence, then the weight was evenly distributed across the conditions. Answers from the dermatologists were then aggregated to form the reference standard, by summing up the weights, before limiting the skin condition classes to 27 (26 conditions plus "Other") and normalizing their weights to sum to 1. Distribution of the number of conditions in the differential diagnosis for each set is shown in Supplementary Fig. 8. Detailed analysis of the secondary and tertiary diagnoses that are provided alongside every primary diagnosis is shown in Supplementary Fig. 9.

To investigate the reproducibility of the reference standard, for validation set B, three other random dermatologists from the same pool (who had not seen the case

previously) graded the cases independently, following the exact same labeling procedure as before. Reference standard differential diagnoses from the two panels of three dermatologists had an AO of 0.63 and an agreement of 0.74 for the primary diagnosis (compared to an AO of 0.54 and an agreement of 0.61 between two random individual dermatologists, one per panel), when considered in the space of 419 mapped conditions. Within the space of 27 conditions handled by DLS, the two panels had an AO of 0.70 and an agreement of 0.77 (compared to an AO of 0.60 and an agreement of 0.66 between two random individual dermatologists, one per panel).

### **Supplementary Figures**



Supplementary Fig. 1 | STARD diagram illustrating the flow of cases used in this work. Patient counts do not add up perfectly because removal of cases only removes patients if no other cases from those patients remain. A small number of cases were not annotated due to technical issues (3 cases in the development set and 1 case in the validation set).



BCC; SCC/SCCIS / Scar condition	BCC: 0.57; Scar condition: 0.29; SCC/SCCIS: 0.07	Malignant: 0.69; Benign: 0.00	Other (hypertrophic skin); Scar condition	AK; Other (skin lesion); Psoriasis	BCC / SCC/SCCIS; Melanoma	Psoriasis	BCC	BCC
b Origin	al Image	Ove	werlay Integrated Gradient Mas   Werlay Integrated Gradient Mas			63 y.o. Male Self-reported Mole Duration: Th always prese Symptoms: I burning, pair ROS: No F/C mouth sores Drugs: Treat Medical histo cancer, mela or biopsy Family histo Drug allergie Medication: Follow-up ca	n: Growth or months, size, itching, at pain, of breath DTC y of skin na, psoriasis, er	
Reference standard	DLS (top 3)	DLS (growth subgroup)	NP (2 <sup>nd</sup> diagnosis)	NP (tied 1 <sup>st</sup> diagnosis)	PCP (missed)	PCP (missed)	Derm	Derm
SCC/SCCIS; BCC	SCC/SCCIS: 0.69; BCC: 0.19; AK: 0.07	Malignant: 0.93; Benign: 0.07	BCC; SCC/SCCIS; Melanoma	Other (skin lesion) / SCC/SCCIS; BCC	Cannot diagnose	Other (pyoderma)	SCC/SCCIS; BCC	SCC/SCCIS
C Origin	nal Image	Ove	erlay	Integrated Gr	adient Mask	61 y.o. Fema Self-reported Duration: Or present Symptoms: I ROS: No F/C mouth sores Drugs: Treat Medical histo cancer, mela or biopsy Family histo Drug allergie Medication:	ale, Hispanic d skin problen te to four wee tching C, fatigue, joir , or shortness ted by Rx or C ory: No history anoma, eczen ry: Skin cance es: None None	or Latino n: Rash ks, always at pain, of breath DTC y of skin na, psoriasis,

Origin	nal Image	Ove	erlay erlay	Integrated Gr	adient Mask	Follow-up ca	ase?: No	
Reference standard	DLS (top 3)	DLS (erythematosq uamous and papulosquamo us subgroup)	NP (missed)	NP (missed)	PCP (tied 1 <sup>st</sup> diagnosis)	PCP (missed)	Derm	Derm
Tinea	Tinea: 0.68; Eczema: 0.14; Other: 0.03	Infectious: 0.80; Non-infectious: 0.16	Eczema / Other (Chronic contact dermatitis); Psoriasis	Other (Generalized granuloma annulare)	Other (Granuloma annulare) / Tinea	Eczema	Tinea; Other (Granuloma annulare)	Tinea
d Origin	L Al Image	Ove	rlay	Integrated Gr	radient Mask	29 y.o. Male Pacific Islan Duration: Th always press Symptoms: appearance ROS: No F/0 mouth sores Drugs: Trea Medical histo cancer, mela or biopsy Family histo Drug allergie Medication: Follow-up ca	I , Native Hawa der iree to twelve ent Bothersome in , increasing in C, fatigue, joir s, or shortness ted by Rx or C ory: No histor anoma, eczen ry: Skin cance es: None None ase?: Yes	iian or months, size, itching t pain, of breath DTC y of skin na, psoriasis, er



e Origin	al Image		under the second s	Integrated Gr	adient Mask	26 y.o. Fema Self-reported Duration: Mo present Symptoms: I appearance, ROS: No F/o mouth sores Drugs: Has I OTC Medical histo	ale, Hispanic d skin problem ore than five y Bothersome in itching C, fatigue, joir , or shortness not been treat	or Latino n: Hair loss rears, always n nt pain, s of breath ted by Rx or
				integrated of		cancer, mela or biopsy Family histo Drug allergie Medication: Follow-up ca	anoma, eczer ry: Skin cance es: None OTC ase?: No	er, eczema
Origin	al Image	Ove	rlay	Integrated Gr	adient Mask			
Reference standard	DLS (top 3)	DLS (hair loss subgroup)	NP (missed, non- specific)	NP (missed, non- specific)	PCP (tied 2 <sup>d</sup> diagnosis)	PCP (missed)	Derm	Derm
AGA; AA; Other	AGA: 0.73; Other: 0.13; Seborrheic Dermatitis: 0.08	AGA: 0.78; AA: 0.00	Other (Diffuse alopecia)	Other (Alopecia)	Other (Telogen effluvium); AA / AGA	AA	AGA; Other (Drug- related alopecia)	AGA

**Supplementary Fig. 2 | All the images and metadata for examples shown in Fig. 3.** Abbreviations for diagnoses follow those from Fig. 3: basal cell carcinoma (BCC), squamous cell carcinoma (SCC/SCCIS), Alopecia Areata (AA), and Androgenetic Alopecia (AGA). Some images were cropped to zoom in on the condition for clarity.



Supplementary Fig. 3 | Importance of each individual clinical metadata to the deep learning system (DLS). For each clinical metadata, its values are permuted across validation set A examples, and the effect of this permutation on the top-1 accuracy using the same trained DLS are shown. Boxplot meanings are identical to Fig. 4a (which shows only the top 10 features here).



Supplementary Fig. 4 | Effect of training dataset size (excluding tune set) on the performance of the deep learning system (DLS). For each experiment, a random subset of the cases was used for training. This DLS was then evaluated on the validation set A and its change in the top-1 accuracy relative to the original DLS (trained with all available training data) is shown. Error bars indicate 95% confidence intervals across all cases in validation set A (n=3,756).



Supplementary Fig. 5 | Performance of the deep learning system (DLS) and clinicians in cases where at least two out of the three dermatologists determining the reference standard agreed on the primary diagnosis, broken down for each of the 26 categories of skin conditions. a, Top-1 and top-3 sensitivity of the DLS on validation set A (n=3,756). b,

Top-1 and top-3 sensitivity of the DLS and three types of clinicians: dermatologists (Derm), primary care physicians (PCP), and nurse practitioners (NP) on validation set B (n=963). The number of cases per condition are presented in Supplementary Table 6. The rightmost columns indicate the average sensitivity for the 26 conditions. Error bars indicate 95% confidence intervals (see Statistical Analysis).



Supplementary Fig. 6 | Performance of the deep learning system (DLS) and clinicians in cases where all three dermatologists determining the reference standard agreed on the primary diagnosis, broken down for each of the 26 categories of skin conditions. a, Top-1

and top-3 sensitivity of the DLS on validation set A (n=3,756). **b**, Top-1 and top-3 sensitivity of the DLS and three types of clinicians: dermatologists (Derm), primary care physicians (PCP), and nurse practitioners (NP) on validation set B (n=963). The number of cases per condition are presented in Supplementary Table 6. The empty bars for the DLS and all clinicians for allergic contact dermatitis are due to the lack of cases that achieved full consensus for that condition. The rightmost columns indicate the average sensitivity for the 26 conditions. Error bars indicate 95% confidence intervals (see Statistical Analysis).



# Supplementary Fig. 7 | Labeling tool interface that was designed to present all information that would be available in a teledermatology case. Questions prompts (Supplementary Table 9) are displayed in the left panel, whereas clinical metadata (Supplementary Table 1) are shown in the top right panel and images (up to six per case) are shown in the bottom right panel. Any image could be panned, zoomed, and magnified for closer review. The tool did not enforce any time constraint.



**Supplementary Fig. 8 | Histogram of the number of conditions in the reference standard differential diagnoses.** Within each set (development set: n=16,114; validation set A: n=3,756; and validation set B: n=963), the differential diagnoses has a 25<sup>th</sup> percentile length of 2 and a 75<sup>th</sup> percentile length of 3. The median length was slightly different at 2, 2, 3 for the development set, validation set A, and validation set B, respectively.

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Acne ·	- 0	1	6	0	0	0	9	16	130	З	З	2	0	106	19	1	0	1	20	8	0	0	1	0	0	2	0	
Actinic Keratosis	- 0	0	2	0	0	11	0	6	0	0	2	1	0	9	0	6	13	7	0	З	0	0	0	0	0	З	0	
Allergic Contact Dermatitis	- 1	0	0	0	0	0	0	11	0	0	0	0	0	20	1	1	0	0	0	0	0	1	2	0	2	0	0	
Alopecia Areata	1	0	0	0	11	0	1	0	З	0	0	0	0	47	0	0	0	0	0	1	0	0	4	0	0	0	0	
Androgenetic Alopecia	0	0	0	7	0	0	0	2	1	0	0	0	0	39	0	2	0	0	0	2	0	0	0	0	0	0	0	-
Basal Cell Carcinoma	0	7	0	0	0	0	1	0	1	0	0	2	7	12	0	2	17	6	4	1	0	0	0	0	0	0	0	-
Cyst ·	6	1	1	0	0	6	0	1	1	2	0	8	1	45	1	2	2	4	6	1	2	0	0	0	0	0	0 -	-
Eczema ·	- 1	2	86	0	0	0	2	0	15	0	2	4	0	301	21	177	1	4	З	5	0	20	42	10	21	5	1	-
Folliculitis ·	25	1	2	0	0	2	2	10	0	2	1	2	0	37	5	4	0	2	1	7	0	1	0	0	1	2	0	-
Hidradenitis ·	2	0	2	0	0	0	4	0	6	0	0	0	0	19	0	1	0	0	0	0	1	0	0	0	0	0	0	-
Lentigo ·	- 1	6	0	1	0	0	0	0	0	0	0	З	5	4	5	1	0	20	0	0	1	0	0	0	0	0	0	-
Melanocytic Nevus	0	0	0	0	0	5	3	1	0	0	1	0	21	69	1	0	0	39	1	0	9	0	0	0	0	з	0	-
Melanoma	0	1	0	0	0	2	0	1	0	0	0	4	0	12	0	0	1	1	0	0	0	0	0	0	0	0	0	-
∑ re Other∙	- 25	7	30	11	18	21	30	105	30	1	9	40	19	0	35	62	9	18	17	15	9	18	9	15	18	16	2 -	-
Post-Inflammatory hyperpigmentation ·	2	0	з	0	0	0	0	10	1	0	1	0	0	27	0	2	0	2	2	0	0	з	1	з	0	0	0	-
Psoriasis ·	- 0	0	13	0	0	0	1	116	з	0	0	0	0	120	1	0	1	2	1	30	0	4	13	0	1	1	0	-
SCC/SCCIS	- 0	6	0	0	0	12	2	0	0	0	0	0	0	8	0	1	0	6	0	0	1	0	0	0	0	4	0	-
SK/ISK ·	- 0	5	2	0	0	7	2	1	1	0	18	65	22	25	0	2	10	0	0	6	6	0	1	0	0	25	0	-
Scar Condition ·	6	0	1	0	0	2	6	0	4	1	0	2	1	16	1	0	0	2	0	0	0	0	0	0	0	1	0	-
Seborrheic Dermatitis	0	1	4	3	5	1	0	17	10	0	0	1	0	24	1	45	1	2	0	0	0	0	4	1	0	0	3	-
Skin Tag ·	0	0	0	0	0	0	1	1	0	0	0	20	0	15	1	0	1	14	0	0	0	0	0	0	0	4	0	-
Stasis Dermatitis	- 0	0	1	0	0	0	0	14	0	0	0	0	0	13	0	6	0	1	0	0	0	0	0	0	1	0	0	-
Tinea ·	- 0	0	1	0	0	0	0	12	0	0	0	0	0	12	0	13	0	0	0	0	0	0	0	0	0	0	0 -	-
Tinea Versicolor	- 0	0	1	0	0	0	0	5	0	0	0	0	0	18	6	1	0	1	0	2	0	0	1	0	2	0	з -	-
Urticaria ·	- 0	0	6	0	0	0	0	8	0	0	0	0	0	14	0	2	0	1	0	0	0	0	0	0	0	0	0	-
Verruca vulgaris ·	- 0	З	0	0	0	1	0	4	0	0	0	з	2	29	1	1	11	14	0	0	4	0	0	0	0	0	0	-
Vitiligo ·	- 0	0	0	0	0	0	0	1	0	0	0	0	0	35	9	1	0	0	0	2	0	0	0	з	0	0	0 -	-
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	Acne –	0	0	4	0	0	0	2	7	22	1	0	1	0	37	11	0	0	0	8	0	0	0	0	1	2	0	0	-
	Actinic Keratosis –	2	0	1	0	0	4	2	3	0	0	2	0	2	9	0	1	8	6	0	1	0	0	0	0	0	3	0	-
Allerg	ic Contact Dermatitis –	0	0	0	0	0	0	0	6	1	0	0	0	1	5	1	3	0	1	0	0	0	0	1	0	2	0	0	-
	Alopecia Areata -	0	0	0	0	1	0	0	0	0	0	0	0	0	4	0	1	0	0	0	0	0	0	0	0	0	0	0	-
А	ndrogenetic Alopecia –	0	0	2	10	0	0	0	1	0	0	0	0	0	7	0	0	0	0	0	2	0	0	0	0	0	0	0	-
	Basal Cell Carcinoma –	0	4	0	0	0	0	1	1	0	0	0	4	4	8	0	1	З	1	0	0	0	0	0	0	0	0	0	-
	Cyst –	4	0	0	0	0	0	0	0	3	1	0	2	1	5	2	0	0	2	1	0	1	0	0	0	0	0	0	-
	Eczema –	3	1	87	0	0	0	1	0	2	0	0	0	0	106	16	74	1	2	2	9	1	12	34	2	7	0	1	-
	Folliculitis –	9	0	3	0	0	1	2	4	0	0	0	0	0	6	3	1	0	2	0	1	0	0	0	1	0	1	0	-
	Hidradenitis –	2	0	0	0	0	0	1	0	2	0	0	0	0	4	1	0	0	0	0	0	0	0	0	0	0	0	0	-
	Lentigo –	0	1	0	0	0	0	0	0	0	0	0	0	6	2	1	0	0	З	0	1	0	0	0	1	0	0	1	-
	Melanocytic Nevus –	0	1	0	0	0	9	0	0	0	0	4	0	20	21	0	0	1	15	0	0	5	0	0	0	0	4	0	-
>	Melanoma –	0	0	0	0	0	2	0	0	0	0	1	4	0	4	0	0	0	З	1	0	0	0	0	0	0	1	0	-
imar	Other –	13	5	28	8	7	9	14	48	15	1	4	14	17	0	21	27	13	9	З	14	0	6	14	1	5	8	З	-
を Post-Inflammator	y hyperpigmentation –	1	0	2	0	0	0	0	1	З	0	З	0	1	7	0	4	0	1	0	2	0	1	0	2	0	0	1	-
	Psoriasis -	0	0	16	0	0	0	0	32	1	0	0	0	0	36	З	0	0	1	0	9	0	0	8	1	1	0	0	-
	SCC/SCCIS -	0	1	1	0	0	7	0	1	0	0	0	1	4	2	0	0	0	5	0	0	1	0	0	0	0	4	0	-
	SK/ISK -	1	6	0	0	0	4	1	2	0	0	5	17	17	12	0	1	10	0	0	1	5	0	0	0	0	14	0	-
	Scar Condition -	1	0	0	0	0	1	0	0	0	0	0	0	0	5	0	0	0	1	0	0	0	0	0	0	0	0	0	-
5	Seborrheic Dermatitis –	2	1	6	1	2	1	1	7	4	0	0	0	0	10	1	13	0	0	0	0	0	0	2	1	1	0	0	-
	Skin Tag -	0	0	1	0	0	0	1	0	0	1	0	7	1	5	0	0	1	6	0	0	0	0	0	0	0	1	0	-
	Stasis Dermatitis –	0	0	4	0	0	0	0	4	0	0	0	0	0	5	1	0	0	1	0	0	0	0	1	0	0	0	0	-
	Tinea -	0	0	2	0	0	0	0	10	0	1	0	0	0	5	1	5	0	0	0	0	0	0	0	0	0	0	0	-
	Tinea Versicolor –	0	0	0	0	0	0	0	5	0	0	0	0	0	4	З	2	0	0	0	1	0	0	0	0	0	0	2	-
	Urticaria -	0	0	з	0	0	0	0	2	0	0	0	0	0	З	0	0	0	0	0	0	0	0	1	0	0	0	0	-
	Verruca vulgaris –	0	2	1	0	0	0	1	1	0	0	0	5	0	11	0	0	5	5	1	0	2	0	0	0	0	0	0	-
	Vitiligo –	0	0	0	0	0	0	0	0	0	0	0	0	0	4	6	0	0	0	1	0	0	0	0	0	0	0	0	-
		- eu	sis -	tis -	ta -	cia -	- eu	/st -	- eu	tis I	tis -	l of	- sn	- er	er -	- uo	sis -	- SI	- XS	- uo	tis -	- ge	tis -	ea -	lor -	la -	ris I	- of	
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Supplementary Fig. 9 | Relationship between the primary, secondary, and tertiary diagnoses in the reference standard differential diagnosis in validation set A (n=3,756). a, Co-occurrence matrix representing the secondary diagnosis for each primary diagnosis. b, Co-occurrence matrix representing the tertiary diagnosis for each primary diagnosis. Eczema and psoriasis frequently appear together in the differential, and the same applies for other pairs like eczema and tinea, melanocytic nevus and Seborrheic keratosis / irritated seborrheic keratosis

(SK/ISK), and acne and folliculitis. These pairs share visual similarities which can account for their co-occurrence in the same differential diagnosis.



#### Supplementary Fig. 10 | Illustration of the establishment of reference standard differential

**diagnosis.** In this example, each of the three dermatologists reviewed the case independently and provided a list of diagnoses, each with a confidence value ranging from 1 to 5. Weight for each diagnosis (mapped to the 419421 conditionslist) was determined as the inverse of the rank within each labeler. For the first labeler, since there was a tie between eczema and psoriasis, weights for those were adjusted to evenly distribute between these two (( $\frac{1}{2} + \frac{1}{3}$ ) / 2 = 0.42). Answers from different labelers were then aggregated by summing up the weights, before limiting the skin condition classes to 27 and normalizing their weights to sum to 1.

## Supplementary Tables

### Supplementary Table 1 | Clinical metadata used in this study

Name	Description	Possible values
Self-reported de	mographic information	
Age	The age of the patient in years, at the time the case was submitted.	A float value ranging from 18 to 90. Values larger than 90 are capped at 90.
Sex	The sex of the patient.	One of: [Female   Male   Other   Unknown]
Race and ethnicity	The race/ethnicity of the patient.	One of: [American Indian or Alaska Native   Asian   Black or African American   Hispanic or Latino   Native Hawaiian or Pacific Islander   White   Neither Hispanic Nor Latino   Not specified   Unknown]
History of the pr	esent illness	
Self-reported skin problem	The high level skin problem the patient is seeking help for.	One of: [Acne   Growth or mole   Hair loss   Hair or nail problem   Hair problem   Nail problem   Pigmentary problem   Rash   Other   Unknown]
Symptoms	Any symptoms perceived by the patient.	A list of 8 symptoms (bothersome in appearance, bleeding, increasing in size, darkening, itching, burning, painful, none of the above) with each symptom being one of: [Yes   No   Unknown].
Signs	Any medical signs perceived by the patient.	A list of 7 signs (fever, chills, fatigue, joint pain, mouth sores, shortness of breath, none of the above) with each sign being one of [Yes   No   Unknown].
Duration	The time that the skin problem has persisted.	One of: [One day   Less than one week   One week   Two weeks   One to four weeks   One month   One to three months   Three months   Three to twelve months   Six months   One year   More than one year   More than five years   Since childhood   Since birth   Unknown]
Frequency	Frequency of occurrence of the skin problem.	One of: [Always present   Comes and goes   Unknown]
Past medical his	tory	

Personal history	Personal medical history.	A list of four aspects of the personal history (skin cancer, melanoma, eczema, psoriasis) with each being one of [Yes   No   Unknown].
Family history	Family medical history.	A list of four aspects of the family history (skin cancer, melanoma, eczema, psoriasis) with each being one of [Yes   No   Unknown].
Patient state		
Allergy	Medications the patient is allergic to.	A list of 6 allergies (penicillin, cephalosporin, sulfa, tetracycline, aspirin, other) with each being one of [Yes   No   Unknown].
Drug	If the patient is currently taking any medications.	One of [Yes   No   Unknown].
Pregnancy	If the patient is pregnant.	One of [Yes   No   Unknown].
Nursing	If the patient is nursing.	One of [Yes   No   Unknown].
Medical problem	Whether the patient currently has any medical problems.	One of [Yes   No   Unknown].
Previous treatme	ent state	
Follow-up case	If this is a follow up case.	One of [Yes   No   Unknown].
Biopsy	If there has been a previous biopsy.	One of [Yes   No   Unknown].
Past medication	Whether the patient used medications for the skin problem.	A list of two past medications (prescription drugs, over the counter drugs) with each being one of [Yes   No   Unknown].
Patient adhered to treatments	Whether the patient is following the treatment If the patient received treatment before.	One of: [No   Partially   Yes   Unknown]
Condition after treatments	Progression of the skin problem If the patient received treatment before.	One of: [Improved   Not changed   Worsened   Unknown]

Supplementary Table 2 | Performance of the deep learning system (DLS) and different types of clinicians, on validation set A and validation set B. The reference standard differential diagnoses for each case was determined by the votes of a panel of three board-certified dermatologists. Performance was measured by the agreement of the top-1 and top-3 diagnoses with the primary diagnosis of the panel. The average overlap (AO) directly compares the DLS or clinician-provided ranked differential diagnoses with the panel's full differential diagnoses. The AO ranges from 0 to 1, with higher values indicating better agreement. Numbers in square braces indicate 95% confidence intervals (see Statistical Analysis). Bold indicates the highest value within each column for validation set B.

_		Т	op-1	Tc	Average	
Dataset	Grader	Accuracy	Average Sensitivity	Accuracy	Average Sensitivity	Overlap (AO)
Validation set A (n=3,756)	DLS	0.71 [0.69, 0.72]	0.58 [0.56, 0.60]	0.93 [0.92, 0.94]	0.83 [0.81, 0.85]	0.67 [0.67, 0.68]
	DLS	0.66 [0.64, 0.69]	0.56 [0.54, 0.59]	0.90 [0.88, 0.92]	0.82 [0.79, 0.84]	0.63 [0.62, 0.65]
Validation set B (enriched	Derm	0.63 [0.60, 0.65]	0.51 [0.49, 0.54]	0.75 [0.72, 0.77]	0.64 [0.61, 0.66]	0.58 [0.56, 0.59]
subset of set A, n=963)	PCP	0.44 [0.42, 0.47]	0.35 [0.33, 0.38]	0.60 [0.58, 0.62]	0.49 [0.47, 0.52]	0.46 [0.44, 0.47]
	NP	0.40 [0.38, 0.43]	0.32 [0.30, 0.34]	0.55 [0.53, 0.58]	0.45 [0.42, 0.47]	0.43 [0.41, 0.44]

Supplementary Table 3 | Performance of the deep learning system (DLS), sliced by selfreported demographic information (including age, sex, race and ethnicity), and Fitzpatrick skin type on validation set A (n=3,756). Metrics used are identical to the ones in Supplementary Table 2. Numbers in square braces indicate 95% confidence intervals (see Statistical Analysis).

Break Category		Т	op-1	Τορ	o-3	Average
down	Category	Accuracy	Average Sensitivity	Accuracy	Average Sensitivity	Overlap (AO)
	[18, 30)	0.76	0.55	0.95	0.80	0.71
	(29.5%)	[0.73, 0.78]	[0.52, 0.62]	[0.93, 0.96]	[0.76, 0.87]	[0.69, 0.72]
	[30, 40)	0.70	0.51	0.93	0.79	0.67
	(19.9%)	[0.66, 0.73]	[0.47, 0.58]	[0.91, 0.94]	[0.73, 0.84]	[0.65, 0.69]
Age	[40, 50)	0.70	0.59	0.93	0.84	0.67
	(17.3%)	[0.66, 0.73]	[0.54, 0.65]	[0.91, 0.94]	[0.80, 0.88]	[0.65, 0.69]
	[50, 60)	0.68	0.61	0.92	0.81	0.66
	(18.6%)	[0.65, 0.72]	[0.54, 0.65]	[0.90, 0.94]	[0.76, 0.85]	[0.64, 0.68]
	[60, 90]	0.66	0.47	0.93	0.80	0.65
	(14.6%)	[0.62, 0.70]	[0.41, 0.53]	[0.91, 0.95]	[0.74, 0.85]	[0.63, 0.67]
Sov	Female	0.71	0.58	0.93	0.83	0.67
	(63.1%)	[0.69, 0.73]	[0.55, 0.61]	[0.92, 0.94]	[0.81, 0.86]	[0.66, 0.68]
Sex	Male	0.71	0.60	0.93	0.83	0.68
	(36.9%)	[0.68, 0.73]	[0.56, 0.64]	[0.91, 0.94]	[0.80, 0.86]	[0.66, 0.69]
	American Indian or Alaska Native (1.1%)	0.64 [0.50, 0.79]	0.54** [0.41, 0.73]	0.93 [0.86, 1.00]	0.92** [0.81, 1.00]	0.68 [0.61, 0.75]
	Asian	0.75	0.56	0.95	0.85	0.68
	(12.6%)	[0.71, 0.79]	[0.49, 0.65]	[0.93, 0.97]	[0.79, 0.90]	[0.66, 0.70]
Race and ethnicity	Black or African American (6.1%)	0.70 [0.63, 0.75]	0.54 [0.46, 0.66]	0.95 [0.92, 0.97]	0.78 [0.74, 0.90]	0.69 [0.65, 0.72]
	Hispanic or Latino (43.4%)	0.71 [0.69, 0.73]	0.55 [0.51, 0.59]	0.93 [0.92, 0.94]	0.81 [0.78, 0.85]	0.68 [0.67, 0.69]
	Native Hawaiian or Pacific Islander (1.6%)	0.70 [0.59, 0.82]	0.58 [0.42, 0.69]	0.97 [0.92, 1.00]	0.78 [0.64, 0.88]	0.65 [0.59, 0.72]

	White	0.69	0.60	0.92	0.81	0.67
	(31.3%)	[0.66, 0.72]	[0.55, 0.63]	[0.90, 0.93]	[0.77, 0.84]	[0.66, 0.68]
	Not specified (3.9%)	0.70 [0.63, 0.77]	0.57 [0.49, 0.68]	0.93 [0.88, 0.97]	0.83 [0.74, 0.92]	0.67 [0.63, 0.70]
	Type I	0.44	0.58**	0.78	0.83**	0.50
	(0.2%)	[0.11, 0.78]	[0.25, 1.00]	[0.44, 1.00]	[0.67, 1.00]	[0.40, 0.62]
	Type II	0.71	0.61	0.91	0.79	0.66
	(10.2%)	[0.66, 0.75]	[0.54, 0.69]	[0.88, 0.94]	[0.74, 0.85]	[0.63, 0.69]
	Type III	0.71	0.60	0.94	0.85	0.68
	(64.2%)	[0.69, 0.73]	[0.57, 0.62]	[0.93, 0.95]	[0.83, 0.87]	[0.67, 0.69]
Fitzpatrick	Type IV	0.70	0.51	0.93	0.76	0.68
skin type	(19.3%)	[0.67, 0.73]	[0.45, 0.57]	[0.91, 0.94]	[0.70, 0.82]	[0.66, 0.70]
	Type V	0.74	0.59**	0.95	0.83**	0.69
	(2.7%)	[0.65, 0.83]	[0.48, 0.75]	[0.90, 0.99]	[0.78, 0.98]	[0.65, 0.74]
	Type VI (0.0%)	1.00*	1.00* **	1.00*	1.00* **	0.75*
	Unknown	0.65	0.50	0.94	0.83	0.63
	(3.4%)	[0.55, 0.74]	[0.42, 0.65]	[0.89, 0.98]	[0.76, 0.94]	[0.58, 0.68]

\* : There was only 1 case labeled as Type VI, so confidence intervals were not meaningful. \*\*: At least ten of the 26 conditions were absent from this subanalysis, resulting in an ill-defined sensitivity for those conditions and an unreliable estimate for average sensitivity. Supplementary Table 4 | Performance of the deep learning system (DLS) and different types of clinicians on the 419-way classification, on validation sets A and B. The average sensitivity metric was not computed because not all 419 categories had significant representation; missing or rare conditions would skew the numbers. In validation set A for example, 204 unique skin conditions were present as primary diagnoses, and 321 conditions were present as any diagnosis (e.g. secondary, tertiary, etc). Numbers in square braces indicate 95% confidence intervals. Bold indicates the highest value within each column for validation set B.

Dataset	Grader	Top-1 accuracy	Top-3 accuracy	Average Overlap (AO)
Validation set A (n=3,756)	DLS	0.67 [0.66, 0.69]	0.86 [0.85, 0.87]	0.61 [0.60, 0.62]
	DLS	0.64 [0.61, 0.67]	0.84 [0.82, 0.86]	0.57 [0.55, 0.59]
Validation set B	Derm	0.61 [0.58, 0.63]	0.72 [0.70, 0.75]	0.52 [0.51, 0.54]
of set A, n=963)	PCP	0.42 [0.40, 0.45]	0.56 [0.53, 0.58]	0.39 [0.38, 0.41]
	NP	0.40 [0.37, 0.42]	0.51 [0.49, 0.54]	0.37 [0.35, 0.38]

Data set	Malignancy (%)	Basal cell carcinoma (%)	Melanoma (%)	SCC/SCCIS (%)
Validation set A (n=3,756)	52 (100%)	32 (61.5%)	6 (11.5%)	14 (26.9%)
Validation set B (n=963)	37 (100%)	19 (51.3%)	5 (13.5%)	13 (35.1%)

Supplementary Table 5 | Distribution of conditions post biopsy. Abbreviations per Table 2.

# Supplementary Table 6 | Number of cases per category of skin condition, filtered by different levels of agreement on the primary diagnosis among dermatologists determining the reference standard.

	Validation set A			Validation set B			
Condition name	No. of cases	No. of cases with agreement by ≥2 dermatologists (%)	No. of cases with agreement by all 3 dermatologists (%)	No. of cases	No. of cases with agreement by ≥2 dermatologists (%)	No. of cases with agreement by all 3 dermatologists (%)	
Acne	428	381 ( 89.0%)	267 ( 62.4%)	47	36 (76.6%)	21 (44.7%)	
Actinic Keratosis	62	40 ( 64.5%)	19 ( 30.6%)	43	25 (58.1%)	10 (23.3%)	
Allergic Contact Dermatitis	49	27 ( 55.1%)	2 ( 4.1%)	36	15 (41.7%)	0 (0.0%)	
Alopecia Areata	98	90 ( 91.8%)	73 ( 74.5%)	39	35 (89.7%)	31 (79.5%)	
Androgenetic Alopecia	56	46 ( 82.1%)	23 ( 41.1%)	36	29 (80.6%)	16 (44.4%)	
Basal Cell Carcinoma	48	43 ( 89.6%)	27 ( 56.2%)	31	27 (87.1%)	17 (54.8%)	
Cyst	97	80 ( 82.5%)	47 ( 48.5%)	37	29 (78.4%)	16 (43.2%)	
Eczema	719	565 ( 78.6%)	229 ( 31.8%)	71	38 (53.5%)	11 (15.5%)	
Folliculitis	111	64 ( 57.7%)	20 ( 18.0%)	43	21 (48.8%)	6 (14.0%)	
Hidradenitis	47	41 ( 87.2%)	31 ( 66.0%)	37	32 (86.5%)	23 (62.2%)	
Lentigo	37	25 ( 67.6%)	12 ( 32.4%)	36	29 (74.4%)	12 (33.3%)	
Melanocytic Nevus	194	168 ( 86.6%)	96 ( 49.5%)	39	29 (72.5%)	16 (41.0%)	
Melanoma	27	15 ( 55.6%)	4 ( 14.8%)	22	13 (59.1%)	4 (18.2%)	
Post Inflammatory Hyperpigmentation	66	37 ( 56.1%)	8 ( 12.1%)	38	19 (50.0%)	4 (10.5%)	
Psoriasis	365	316 ( 86.6%)	199 ( 54.5%)	49	32 (65.3%)	22 (44.9%)	
SCC/SCCIS	39	39 (100.0%)	12 ( 30.8%)	35	33 (94.3%)	12 (34.3%)	
SK/ISK	224	203 ( 90.6%)	118 ( 52.7%)	44	39 (88.6%)	22 (50.0%)	
Scar Condition	69	55 ( 79.7%)	35 ( 50.7%)	38	29 (76.3%)	20 (52.6%)	
Seborrheic Dermatitis	112	82 ( 73.2%)	31 ( 27.7%)	43	27 (62.8%)	11 (25.6%)	
Skin Tag	73	68 ( 93.2%)	39 ( 53.4%)	35	34 (97.1%)	20 (57.1%)	
Stasis Dermatitis	30	18 ( 60.0%)	6 ( 20.0%)	29	17 (58.6%)	6 (20.7%)	
Tinea	38	27 ( 71.1%)	14 ( 36.8%)	35	26 (74.3%)	13 (37.1%)	
Tinea Versicolor	37	31 ( 83.8%)	17 ( 45.9%)	36	30 (83.3%)	16 (44.4%)	
Urticaria	39	28 ( 71.8%)	14 ( 35.9%)	38	27 (71.1%)	13 (34.2%)	
Verruca vulgaris	88	82 ( 93.2%)	53 ( 60.2%)	38	33 (86.8%)	22 (57.9%)	
Vitiligo	78	70 ( 89.7%)	51 ( 65.4%)	38	34 (89.5%)	25 (65.8%)	
Other	910	844 ( 92.7%)	389 ( 42.7%)	139	107 (77.0%)	32 (23.0%)	

Supplementary Table 7 | Top-1 and top-3 sensitivity averaged across all the skin conditions categories, and with different exclusions on validation set B (n=963). Allergic Contact Dermatitis (ACD) and Post-inflammatory Hyperpigmentation (PIH) are included in this analysis because of the low sensitivity for these conditions by both the deep learning system (DLS) and the three types of clinicians (dermatologists, Derms; primary care physicians, PCPs; and nurse practitioners, NPs). Bold indicates the highest value within each row and each evaluation metric.

Conditions	Average Top-1 Sensitivity				Average Top-3 Sensitivity			
average	DLS	Derm	PCP	NP	DLS	Derm	PCP	NP
All 27 conditions	0.56	0.51	0.35	0.32	0.82	0.64	0.49	0.45
26 conditions (excludes "Other")	0.56	0.51	0.35	0.32	0.82	0.64	0.49	0.45
25 conditions (excludes ACD and PIH)	0.59	0.55	0.38	0.35	0.84	0.68	0.54	0.49
24 conditions (excludes ACD, PIH, and "Other")	0.60	0.55	0.38	0.34	0.84	0.68	0.53	0.48

Supplementary Table 8 | Top-1 and top-3 diagnostic accuracy for the three types of clinicians (dermatologists, Derm; primary care physicians, PCP; and nurse practitioners, NP) on validation set B (n=963). Each clinician graded approximately one-third of the cases (number of cases graded: median = 321, range 320-322). For each clinician, performance of the deep learning system (DLS) is also reported on the same cases graded by that clinician (shaded in gray). Bold indicates the higher of the two: clinician or DLS based on each evaluation metric. In particular, Accuracy<sub>any</sub> measures the agreement of the top-1 and top-3 diagnoses with *any* of the panel of three dermatologists comprising the reference standard.

	Top 1			Тор 3				Average		
Clinician Type / ID	Accı	iracy	Accur	<b>aCy</b> any	Accu	iracy	Accur	<b>aCy</b> any	(A	o)
	Clinician	DLS	Clinician	DLS	Clinician	DLS	Clinician	DLS	Clinician	DLS
Derm 1	0.57	0.68	0.70	0.79	0.68	0.93	0.79	0.98	0.54	0.65
Derm 2	0.66	0.64	0.83	0.75	0.80	0.87	0.93	0.95	0.62	0.61
Derm 3	0.66	0.67	0.81	0.83	0.78	0.91	0.91	0.98	0.59	0.64
Derm 4	0.58	0.66	0.74	0.80	0.69	0.92	0.82	0.97	0.54	0.63
Derm 5	0.64	0.67	0.74	0.79	0.80	0.90	0.88	0.95	0.60	0.62
Derm 6	0.63	0.66	0.75	0.79	0.73	0.88	0.84	0.97	0.56	0.64
PCP 1	0.44	0.70	0.55	0.82	0.67	0.93	0.80	0.97	0.46	0.66
PCP 2	0.49	0.66	0.64	0.77	0.74	0.87	0.86	0.95	0.54	0.61
PCP 3	0.43	0.64	0.61	0.79	0.53	0.90	0.70	0.98	0.43	0.62
PCP 4	0.48	0.66	0.62	0.78	0.50	0.90	0.63	0.96	0.42	0.63
PCP 5	0.43	0.65	0.57	0.78	0.51	0.90	0.65	0.97	0.43	0.63
PCP 6	0.38	0.68	0.53	0.82	0.65	0.90	0.81	0.97	0.47	0.64
NP 1	0.42	0.70	0.57	0.81	0.53	0.93	0.66	0.97	0.43	0.65
NP 2	0.35	0.63	0.46	0.74	0.55	0.87	0.72	0.95	0.42	0.61
NP 3	0.43	0.67	0.56	0.83	0.58	0.91	0.73	0.98	0.44	0.64
NP 4	0.38	0.64	0.54	0.76	0.40	0.90	0.56	0.95	0.36	0.63

NP 5	0.41	0.71	0.50	0.83	0.60	0.93	0.72	0.98	0.43	0.65
NP 6	0.43	0.64	0.59	0.78	0.65	0.87	0.81	0.97	0.47	0.62

### Supplementary Table 9 | Labeling tool prompts and instructions.

Question		Possible answers (underlined), with explanations if applicable	
Are multiple conditions present in this case?		Yes*: if more than one condition related to this patient's chief complaint is present <u>Possibly</u> *: if more than one condition may be present <u>No</u> : if there is a single skin condition	
Can you describe a differential given the case?		<u>Yes</u> : if one can provide a diagnosis. <u>No</u> *: if one cannot provide any diagnosis. This can be due to poor image quality, minimum pathology, insufficient medical information, etc.	
Please provide your top three differential diagnosis:	What is the condition?	<u>SNOMED texts synonyms</u> : an autocomplete menu that contains all synonyms for SNOMED entries pertaining to cutaneous disease is available to select from. If there are several variations of the condition, use the most specific condition that applies to the case. If none found, then: <u>Free text</u> : an additional text field is provided for labelers to enter any free-form text.	
	Confidence of diagnosis	5: most certain about the condition. 4: 3: 2: 1: least certain about the condition.	

\* If these answers are selected, the remaining questions are skipped.

# Supplementary Table 10 | Full list of 419 skin conditions that answers from dermatologists, PCPs, and NPs were mapped to. The top 26 conditions on which the DLS was trained and evaluated on are highlighted in bold. The remaining 393 conditions (in aggregate comprising roughly 20% of the cases in this dataset) were mapped to "Other".

A-C	D-H	I-M	N-P	R-Z
Abscess	Deep fungal infection	1 - h 4 h	Nail dystrophy due to trauma	RMSF - Rocky Mountain
Acanthoma fissuratum	Dental fistula	ICRINYOSIS	Nasal polyp	spotted fever
Acanthosis nigricans	Dermatitis herpetiformis	Idiopathic extollative chellius	Nasolabial dyssebacia	Radiation dermatitis
Accessory nipple	Dermatofibroma		Necrobiosis lipoidica	Raynaud's phenomenon
Acne	Dermatofibrosarcoma		Necrolytic acral erythema	Relapsing polychondritis
Acne keloidalis	protuberans	Impotigo	Necrotizing fasciitis	Remove from labeling tool
Acquired digital	Dermatomyositis	Inpeligo	Neuralgia paresthetica	Retention hyperkeratosis
fibrokeratoma	Dermatosis caused by lice	Induced hypopigmentation	Neutrophilic eccrine	Reticular erythematous
Acral keratosis	Dermoid cyst of skin	Infected eczema	hidradenitis	mucinosis
Acral peeling skin syndrome	Desmoplastic	Infected skin ulcer	Nevus anemicus	Reticulate erythematous
Acrocyanosis	trichoepithelioma	Inflammatory linear	Nevus comedonicus	mucinosis
Acrodermatitis atrophicans	Diabetic dermopathy	verrucous epidermal nevus	Nevus depigmentosus	Reticulohistiocytosis
chronica	Diabetic ulcer	Inflicted skin lesions	Nevus lipomatosus	Rheumatoid nodule
Acropustulosis of infancy	Digital Myxoid Cyst	Ingrown hair	cutaneous superficialis	Rhytides
Actinic Keratosis	Digital mucous cyst	Injection site disorder	Nevus of Ito	Rosacea
Actinic granuloma	Dissecting cellulitis of scalp	Insect Bite	Nevus of Ota	
Acute generalised	Dowling-degos syndrome	Interstitial granulomatous	Nevus sebaceous	SJS/TEN
exanthematous pustulosis	Drug Rash	dermatitis	Nevus spilus	SK/ISK
Adnexal neoplasm	Eccrine carcinoma of skin	Intertrigo	Nodular vasculitis	Scables
Adult onset still disease	Ectnyma	Inverted follicular keratosis	Non-melanin pigmentation	Scar Condition
	Ectnyma gangrenosum	Irritant Contact Dermatitis	due to exogenous substance	Scieredema
Allergic Contact		Juvenile xanthogranuloma	(disorder)	Scierodactyly
Dermatitis	Edema bulla	Kaposi's sarcoma of skin		Sebaceous adenoma of skin
	Epidermal nevus	Keratoderma	O/E - eccrymoses present	Sebaceous carcinoma
Alopecia mucinosa	Epidermolysis bullosa	Keratolysis exfoliativa	Ochronosis	Sebaceous hyperplasia
	Eruptivo vanthoma	Keratosis pilaris	Onychogryphosis	Sebormeic Dermatitis
	Encipolos	Knuckle pads	Onycholycic	Skin and soft tissue atypical
Androgenetic Alonecia	Erythema ah igne	Lentigo	Onychomadesis	mycobacterial infection
Anetoderma	Erythema annulare	Leprosy	Onychomalacia	Skin atronhy
Angina bullosa	centrifugum	Leukemia cutis	Onychomatricoma	Skin changes due to
hemorrhagica	Frythema dyschromicum	Leukocytoclastic Vasculitis	Onychomycosis	malnutrition
Angioedema	perstans	Leukonychia	Onychopapilloma	Skin lesion in drug addict
Angiofibroma	Ervthema elevatum diutinum	Leukoplakia of skin	Onychorrhexis	Skin striae
Angiokeratoma of skin	Ervthema gyratum repens	Lichen Simplex Chronicus	Onvchoschizia	Small plague parapsoriasis
Angiolymphoid hyperplasia	Erythema marginatum	Lichen nitidus	Oral fibroma	Small vessel thrombosis of
with eosinophilia	Erythema migrans	Lichen planopilaris	Osteoarthritis	skin
Angiosarcoma of skin	Erythema multiforme	Lichen planus/lichenoid	Osteoma	Sneddon-Wilkinson disease
Animal bite - wound	Erythema nodosum		Osteoma cutis	Stasis Dermatitis
Apocrine cystadenoma	Erythrasma		Otitis externa	Subungual fibroma
Arsenical keratosis	Erythromelalgia		Paget disease	Sweet syndrome
Arterial ulcer	Erythromelanosis follicularis		Palisaded neutrophilic	Symmetrical dyschromatosis
Arteriovenous malformation	faciei et colli	Lichenoid myxedema	granulomatous dermatitis	of extremities
Atrophic glossitis	Fat necrosis	Linear IgA disease	Palmar pit	Syphilis
Atrophoderma	Fibrofolliculoma	Lipoatrophy	Papilloma of skin	TMEP - telangiectasia
Atrophoderma vermiculatum	Flagellate erythema	Lipodermatosclerosis	Parapsoriasis	macularis eruptiva perstans
Atypical Nevus	Flegels disease	Lipoid proteinosis	Paronychia	Tattoo
Atypical fibroxanthoma of		Lipoma	Pearly penile papules	Telangiectasia disorder
skin	Focal epithelial hyperplasia	Lipschütz ulcer	Pemphigoid gestationis	
B-Cell Cutaneous		Livedo reticularis	Pemphigus foliaceus	
Lymphoma		Livedoid vasculopathy	Pemphigus paraneoplastica	
Basal Cell Carcinoma	Folliculitis decaivans	Lobomycosis	Pempnigus vulgaris	Tinea Versicolor
Beau's lines	Fordyce spots	Local infection of wound	Perforating dermatosis	
Becker's nevus	Foreign body	Longitudinal melanonychia	Perichondritis of auricle	Trachyonychia
Benign neoplasm of nall	Foreign body reaction of the	Lymphadenopathy	Perioral Dermatitis	
apparatus Benian neural tumor	SKIII Fox-Fordvee disease	Lymphangioma	Perleche	Traumatic ulcer
Benign selivery dend tumor	Frontal fibrosing alongois	Lymphedema	Phimosis	Triangular alongoio
Blistering distal dactylitie	Ganalion cyst	Lymphomatoid papulosis	Photodermatitie	Trichostasis spinulosa
Blue sacral spot	Geographic tongue	Madarosis	Phrynoderma	Trichotillomania
Bowenoid papulosis	Giant cell tumor	Malignant cylindroma	Piezogenic pedal papule	Trigeminal trophic syndrome

Brachioradial pruritus	Glomus tumour of skin	Malignant eccrine	Pigmented fungiform	Tripe palms
Breast cancer	Gout	spiradenoma	nanillae	Tuberculosis of skin and
Bullosis diaboticorum	Graft vorsus bost disease	Mastocytoma	Pigmontod purpuric oruntion	
Bullous Pomphigoid	Granular parakoratosis	Mastocytoria	Pilomatricoma	Lileoration in Robert disease
Burn of okin		Madian rhambaid alaasitia	Pilonidal evet	
Burnitio		Median mombolid glossilis	Pilotitual Cyst	Urticaria multiformo
Cofe ou leit meaule		weianin pigmentation due to	Pincer hall deformity	
Cale au fait macule		exogenous substance	Pinkus lumor	varicose veiris of lower
	Grover's disease		Pilled keralolysis	
	Halley Halley disease		Pityriasis alba	Venous Stasis Ulcer
Candida			Pityriasis amiantacea	
Canker sore	Hair sinus	Melasma	Pityriasis lichenoides	Viral Exanthem
Carotene pigmentation of	Hairy tongue	Merkel Cell Carcinoma	Pityriasis rosea	Vitiligo
skin	Half-and-half nail	Microcystic adnexal	Pityriasis rotunda	Warty dyskeratoma
Cellulitis	Hand foot and mouth	carcinoma	Pityriasis rubra pilaris	Wells' syndrome
Central centrifugal cicatricial	disease	Milia	Pleomorphic fibroma	Wooly hair
alopecia	Head lice	Miliaria	Poikiloderma	Xanthoma
Chancroid	Hemangioma	Molluscum Contagiosum	Porokeratosis	Xerosis
Chemical leukoderma	Hematoma of skin	Morphea/Scleroderma	Porphyria cutanea tarda	Yellow nail syndrome
Chicken pox exanthem	Hemorrhoid	Morsicatio buccarum	Post-Inflammatory	Zoon's balanitis
Chilblain	Hemosiderin pigmentation of	Mucocele	hyperpigmentation	Zosteriform reticulate
Chondrodermatitis nodularis	skin	Mucocutaneous venous	Post-Inflammatory	hyperpigmentation
Cicatricial Pemphigoid	Herpes Simplex	malformation	hypopigmentation	
Clavus	Herpes Zoster		Pressure ulcer	
Clear cell acanthoma	Hidradenitis		Pressure-induced	
Clubbing of fingers	Hirsutism		dermatosis	
Collagenoma	Hordeolum internum		Pretibial myxedema	
Colloid milium	Hyperhidrosis		Primary cutaneous sarcoma	
Comedone	Hypersensitivity		Progressive macular	
Condyloma acuminatum	Hypertrichosis		hypomelanosis	
Confluent and reticulate	51		Prurigo nodularis	
papillomatosis			Pruritic urticarial papules	
Congenital alopecia			and plaques of pregnancy	
Connective tissue nevus			Pseudocyst of auricle	
Crohn disease of skin			Pseudolymphoma	
Cutaneous T Cell			Pseudopelade	
Lymphoma			Psoriasis	
Cutaneous capillary			Psychogenic alopecia	
malformation			Ptervojum of nail	
			Puncture wound - injury	
vasculopathy			Purpura	
Cutaneous larva migrans			Pyoderma Gangrenosum	
			Pyogenic granuloma	
			r yogenie grandioma	
Cutaneous motastasis				
Cutaneous salcoluosis				
Culls laxa				
Culls verticis gyrata				
Cyst				

# Supplementary Table 11 | Hyperparameters for training the deep learning system.

Image augmentations	Image size: 459×459 pixels Saturation delta: [0.5597, 1.2749] Contrast delta: [0.9997, 1.7705] Brightness max delta: 0.1148 Hue max delta: 0.0251 Rotation: [-150, 150] (degrees) Flipping: horizontal, vertical
Bounding box augmentations	Minimum overlap with any pathologic region: 0.2 Aspect ratio: [0.9, 1.1] Proportion over the original image: [0.05, 1.0]
Metadata augmentations	Dropout rate: 0.1
Learning rate schedule (exponential decay schedule)	Base rate: 0.001 Decay rate: 0.99 Number of epochs per decay: 2.0
Adam optimizer	Decay for the first moment estimates: 0.9 Decay for the second moment estimates: 0.999 Epsilon: 0.1
Batch size	8
Regularization	Prelogits dropout rate: 0.2 Weight decay: 0.00004 Batch norm decay: 0.9997
Loss function	Softmax cross-entropy with class-specific weights
Class weighting	Weight for each class is determined as: $1 / c^{1-s}$ Where c is the class counts over the training set, and s is a smoothing factor of 0.7.

Supplementary Table 12 | Performance of the deep learning system (DLS) and different types of clinicians, on validation sets A and B. This is similar to Supplementary Table 2, except performance was measured by the agreement of the top-1 and top-3 diagnoses with *any* of the panel of three dermatologists comprising the reference standard. In other words, whether the top k predictions of the DLS or clinician captures the primary diagnosis of any member of the panel. For agreement with a differential diagnosis based on the "votes" of the panel, see Supplementary Table 2. Numbers in square braces indicate 95% confidence intervals (see Statistical Analysis). Bold indicates the highest value within each column for validation set B.

Dataset	"Grader"	Top-1	Top-3	
	Grader	Accuracyany	Accuracyany	
Validation set A (n=3,756)	DLS	0.82 [0.81, 0.83]	0.98 [0.97, 0.98]	
	DLS	0.79 [0.77, 0.82]	0.97 [0.96, 0.98]	
Validation set B	Derm	0.76 [0.74, 0.78]	0.86 [0.84, 0.88]	
n=963)	PCP	0.59 [0.56, 0.61]	0.74 [0.72, 0.76]	
	NP	0.54 [0.51, 0.56]	0.70 [0.68, 0.72]	

Supplementary Table 13 | Performance of the deep learning system (DLS), stratified by self-reported demographic information (including age, sex, race and ethnicity), and Fitzpatrick skin type on validation set A (n=3,756). Metrics used are identical to the ones in Supplementary Table 12. Numbers in square braces indicate 95% confidence intervals (see Statistical Analysis).

Breakdown	Category	Top-1	Top-3	
Dicardowii	Calegory	Accuracyany	Accuracyany	
	[18, 30) (29.5%)	0.85 [0.83, 0.87]	0.98 [0.97, 0.99]	
	[30, 40) (19.9%)	0.81 [0.78, 0.83]	0.97 [0.96, 0.98]	
Age	[40, 50) (17.3%)	0.83 [0.80, 0.86]	0.98 [0.98, 0.99]	
	[50, 60) (18.6%)	0.81 [0.79, 0.84]	0.97 [0.96, 0.98]	
	[60, 90] (14.6%)	0.78 [0.75, 0.82]	0.98 [0.96, 0.99]	
Sex	Female (63.1%)	0.83 [0.82, 0.85]	0.98 [0.97, 0.98]	
	Male (36.9%)	0.81 [0.79, 0.83]	0.97 [0.96, 0.98]	
	American Indian or Alaska Native (1.1%)	0.76 [0.64, 0.880]	0.95 [0.88, 1.00]	
	Asian (12.6%)	0.85 [0.82, 0.88]	0.98 [0.97, 0.99]	
	Black or African American (6.1%)	0.82 [0.77, 0.87]	0.98 [0.96, 1.00]	
Race and ethnicity	Hispanic or Latino (43.4%)	0.82 [0.81, 0.84]	0.98 [0.97, 0.98]	
	Native Hawaiin or Pacific Islander (1.6%)	0.77 [0.66, 0.87]	1.00 [1.00, 1.00]	
	White (31.3%)	0.81 [0.79, 0.83]	0.97 [0.97, 0.98]	
	Not specified (3.9%)	0.83 [0.78, 0.89]	0.99 [0.97, 1.00]	
Fitzpatrick skin type	Type I (0.2%)	0.78 [0.56, 1.00]	0.89 [0.67, 1.00]	

Type II (10.2%)	0.83 [0.79, 0.87]	0.97 [0.96, 0.99]
Type III (64.2%)	0.82 [0.81, 0.84]	0.98 [0.97, 0.99]
Type IV (19.3%)	0.82 [0.79, 0.85]	0.97[0.96, 0.98]
Type V (2.7%)	0.84 [0.77, 0.91]	0.98 [0.95, 1.00]
Type VI (0.0%)	1.00*	1.00*
Unknown (3.4%)	0.76 [0.68, 0.84]	0.97 [0.93, 1.00]

\* : There was only 1 case labeled as Type VI, so confidence intervals were not meaningful.