The Effect of AI-Driven Platforms on Medical Students' Retention of English Medical Terminology in EMP Courses

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Abstract

The study investigated how artificial intelligence (AI)-driven platforms affect medical students' ability to retain medical terms in English for Medical Purposes courses at Nguyen Tat Thanh University. There were 63 students participating in the study, assigned to two groups: an experimental group with 32 members and a control group with 31 members. Employing a quasi-experimental study, the researchers used pre-tests, post-tests and semi-structured interviews to collect data. The findings revealed that the experimental group demonstrated better retention rate than the control group. Moreover, the students found the artificial intelligence tools motivating, user-friendly and effective in helping them remember difficult medical terms. These research findings indicate that AI-driven platforms can be integrated into the curriculum for English for Medical Purposes courses to improve students' learning outcomes.

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AI-driven platforms, medical terminology, retention, English for Medical Purposes.

1 Introduction

The era of digital transformation has made English proficiency a necessary requirement for medical students and practitioners in their field. English for Medical Purposes (EMP) curricula are designed to develop medical students' essential abilities to read medical English materials and use English effectively in clinical communication. However, students are facing numerous difficulties in learning specialized medical vocabulary which particularly affects those who are from non-English speaking backgrounds [1]. More importantly, the use of traditional teaching methods which mainly focuses on lecture-based teaching without providing chances to review and practice vocabulary also results in reduced long-term vocabulary retention abilities among students [1].

These challenges have led to a demand for innovative teaching strategies to help students achieve better learning outcomes. One of the most popular trends is using Artificial intelligence (AI) in teaching English as a foreign language (EFL). The emergence of AI-driven tools which include adaptive flashcards, chatbots and personalized learning platforms help teachers to create different content delivery methods and provide instant feedback to students who can choose their own learning pace at the same time [1]. These tools have proven their effectiveness by helping students acquire and remember vocabulary in foreign language learning environments [2].

This study was conducted to examine how the use of AI-driven platforms affected medical students' ability to retain medical terms in EMP courses at Nguyen Tat

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Thanh University (NTTU). To achieve this aim, two research questions were formulated:

To what extent does using AI-driven platforms improve students' retention of medical terminology in EMP courses at NTTU?

How do students perceive the use of AI-driven platforms in learning medical English terminology?

2 Literature review

2.1 AI in language education

AI is a form of digital technology that performs tasks using its own intelligence, which is the same way that people typically use their intelligence to perform these types of tasks. In education, various types of AI technologies, including intelligent tutoring systems and Natural Language Processing systems, are used to adjust the teachers' teaching methods and assessments to improve their classroom experiences and students' performance [3].

AI platforms are also applied in students' own learning. Among the most popular AI learning platforms, AI-powered gamified learning platforms such as Gimkit, Blooket, Quizizz, Quizlet and Kahoot! are well suited for vocabulary acquisition and retention because of their optimal features with AI support [2]. The tools enable learning through quizzes and competitive games and interactive activities that deliver instant feedback and allow learners to practice repeatedly [2]. The platforms offer basic adaptive features and AI-supported functions through their progress tracking and spaced repetition features. The platforms serve as practice tools which effectively help learners acquire and retain vocabulary in the long run [4].

2.2 Vocabulary retention

Vocabulary retention is defined as the long-term memory in which the learned information is stored and then retrieved when it is needed [4]. In the context of EFL, a learner needs to acquire the capacity to initially learn the words and remember them for a long term and use them in the right contexts [8]. Similarly, it is found that the process of vocabulary retention is not only about learning but also the proper and appropriate use of the words for a long period of time [9]. Additionally, retention is also seen as a complicated memory process consisting of memorizing, recall and recognition of vocabulary, which reinforces both short-term and long-term memory. From these insights, all of these researchers pointed out the same thing that vocabulary retention is an essential aspect of EFL learning which requires the learners to acquire, retain the words for a period of time and be able to use them appropriately and meaningfully.

Vocabulary retention is measured through two types of knowledge, including receptive knowledge (recognition) and productive knowledge (recall and use) [8]. Recognition means understanding a term and recall refers to the ability to retrieve it from memory [8]. Effective retention also involves accurate use of vocabulary which means learners can effectively apply vocabulary correctly in specific contexts [8].

In this study, vocabulary retention is measured based on these three aspects: recognition, recall and use. In the context of EMP, recognition shows students' capacity to comprehend medical terminology while recall requires them to retrieve the terms from their memory and accurate use demonstrates their skill to use the terms correctly in sentences. The components help to effectively assess students' receptive and productive vocabulary knowledge of retaining medical terminology.

2.3 English medical terminology

English medical terminology is the specialized language that includes medical terms related to anatomy, pathology, diagnosis and treatment used in the healthcare field [10]. Acquiring English medical terms causes difficulty for medical students, especially those from non-native English-speaking countries [11]. It is revealed that medical students often struggle with decoding unfamiliar words, pronouncing long and complex terms and using the terminology in clinical contexts [11]. Moreover, English medical terminology follows the same morphological rules that are formed from different components, namely affixes, roots and combining

forms [12]. Many terms are borrowed or derived from Greek and Latin, which also creates significant problems with spelling, stress, and pronunciation for students [8].

2.4 Previous studies

Recently, several studies have demonstrated the positive impacts of AI in promoting vocabulary development among students in the medical fields. It was claimed that AI chatbots designed with Dialogflow enhanced students' EFL vocabulary by offering synonyms and simple word definitions [11]. Similarly, Poe-AI chatbot use was proved to have improved medical vocabulary retention among students [12]. In Vietnamese context, it was reported that an AI-embedded Padlet platform on the English language proficiency of medical students had favorable outcomes in terms of students' engagement and their medical vocabulary acquisition [13]. Furthermore, a study was conducted on AI-assisted flipped classroom approaches in EMP classes in a private Vietnamese university. The results revealed numerous teaching benefits which improved vocabulary retention and medical knowledge retention through AI-based learning activities [13]. A systematic review which analyzed 30 studies using AI for EFL vocabulary acquisition also revealed three major problems that students often faced, including technical difficulties with unreliable Wi-Fi, incompatible devices and system errors which created certain obstacles for the students during their learning process [14].

3 Research Methodology

3.1 Pedagogical setting and participants

The study was conducted at NTTU in Ho Chi Minh City. It involved a sample of two second-year medical student classes with the students' ages ranging from 19 to 21 years old. At the time of the research, all the participants were taking English Medical Terminology 2 classes and had already completed English for Medical Terminology 1 course where they had previously learned the basic vocabulary related to medical English.

The experimental class (n = 32) was the first group of the students who received AI-based teaching and learning through the use of AI-driven platforms. The students used interactive vocabulary activities designed by the teacher to complete quizzes and contextualized tasks and receive instant feedback. The platforms provided personalized practice opportunities which enabled the students to review difficult terms at their own learning speed. The second class (n = 31) was the control group and was taught in a traditional way without any AI activities. This class involved PowerPoint slides with the teacher's explanation and translation. The practice activities were merely textbook exercises. Both of the classes were taught using the same textbooks over the same period of time.

3.2 Research design and instruments

The research employed a quasi-experimental design to collect both quantitative and qualitative data.

For quantitative data, pre-tests and post-tests were designed and used. The tests followed the official format of examination used in the university. The questions were designed by the teachers of the medical English department and approved by the leader of the department. Accordingly, both tests consisted of 40 questions covering all four body systems in the course with the selection of 40 key terms. Each test contained 15 multiple-choice questions (which tested recognition), 15 fill-in-the-blank exercises (which tested recall), and 10 short sentence completion tasks (which tested use). The time allotted for each test was 45 minutes and the scoring was processed on a scale of 10. The pre-test, which aimed to examine the vocabulary knowledge that the students in both groups had learnt in the previous course, was given to the two groups of students at the beginning of the course. On the other hand, the post-test was administered to them to determine the level of their retention of English medical terms after the three-month English for Medical Terminology 2 course ended.

Regarding qualitative data, semi-structured interviews were conducted with eight volunteer students from the experimental group to explore their perceptions and experiences with the AI tools in their learning. There

were eight open-ended questions in the interview, divided into three major parts, namely students' perceptions of the effects of using AI platforms on their retention of medical English terms, their learning engagement with the AI tools and the challenges they faced during their learning process. The students were coded from S1 to S8. In order to assure content validity, the interview was piloted with a small sample of students ($N = 5$). There were slight modifications made, which would improve the clarity and validity of the interview questions. The interviews were then conducted by another teacher at the department of Medicine who was also teaching Medical English to maintain objectivity and reduce bias.

3.3 Data Analysis

Quantitative data from the pre-tests and post-tests was analyzed using Statistical Package for the Social Sciences (SPSS). Descriptive and inferential statistics (means, standard deviations, and t-tests) were calculated to explore differences in terms of scores between the two groups. For the qualitative data from the interviews, the students' responses were transcribed, coded, and thematically analyzed to find common patterns and themes relating to the students' experiences and attitudes towards AI-driven platforms in their learning.

3.4 Description of the intervention

The intervention took place over eight weeks, with the students attending one session consisting of five periods per week. Although the English for Medical Terminology 2 course lasted 12 weeks, the final four sessions were allocated to mock tests and students' presentations, which were not included in the intervention. The textbook used for the course was The Language of Medicine by Davi-Ellen Chabner (13th edition).

The English for Medical Terminology 2 course was designed to increase students' acquisition and retention of specialized medical terminology regarding four body systems, namely Cardiovascular System, Respiratory System, Blood and lymphatic system and Musculoskeletal system. Each system was taught across two sessions. The first session provided a theoretical introduction about basic medical terms related to physiology, anatomy, pathology, laboratory tests and medical procedures associated with that system. The second session emphasized the application of the terminology in which the students participated in reading comprehension and review activities to reinforce the previously learned terminology about the system. In the experimental group, the teacher incorporated AI-driven activities in the forms of interactive vocabulary games, quizzes, and flashcard-based reviews with the aim of supporting their learning and retention of English medical terms. Table 1 below is the brief description of the AI-driven activities employed by the teacher during the course.

Table 1 Description of the AI-driven activities employed in the course

Body systems	Session 1	Session 2
Cardiovascular System	- Quizlet flashcards and "Blast" game - Blooket review: group competition	- Quizizz self-paced practice quizzes - Blooket word-definition matching - Kahoot!: multiple-choice quizzes
Respiratory System	- Quizlet flashcards - Quizizz competitive quiz - Kahoot! team challenge	- Quizizz individual challenge - Blooket Gold Quest - Gimkit team competition - Blooket Tower Defense game
Blood and lymphatic system	- Quizlet flashcards and test mode - Kahoot! live quizzes	- Quizizz: True/False quiz on disease definitions - Blooket: Battle Royale for laboratory tests and procedures
Musculoskeletal system	- Quizlet AI: spelling and pronunciation drills - Gimkit Classic Mode for review	- Quizlet: Quizlet Live for review in groups - Kahoot!: Submarine game on medical physiological terms - Quizizz: Self-paced quiz on anatomy and pathology

4 Findings

4.1 Quantitative data

Table 2 Comparison of Pre-test results of the two groups

Group	*N*	Mean	*MD*	*SD*	*SE*	Effect Size (Cohen's *d*)
Experimental Group	32	5.62	0.05	0.74	0.131	0.10
Control Group	31	5.57	0.05	0.71	0.128	

The results from the independent-samples *T*-test on the pre-test scores indicated there was no statistically significant difference between the experimental group and the control group before the intervention (Table 2). The experimental group ($N = 32$) achieved a mean score of 5.62 ($SD = 0.74$) and the control group ($N = 31$) attained a mean score of 5.57 ($SD = 0.71$). The minimal difference in mean scores (0.05) between the two groups was found to be statistically insignificant. These findings mean that the two groups had similar knowledge of English medical terminology before the intervention.

Table 3 Comparison of Post-test results of the two groups

Group	*N*	*M*	*MD*	*SD*	*SE*	Effect Size (Cohen's *d*)
Experimental Group	32	8.31	1.38	0.65	0.115	1.08
Control Group	31	6.93	1.38	0.74	0.133	

It can be seen that the post-test results showed the experimental group ($M = 8.31$, $SD = 0.65$) outperformed the control group ($M = 6.93$, $SD = 0.74$) by a mean difference of 1.38 ($t(61) = 7.16$, $p < .001$) (Table 3). The large effect size (Cohen's $d = 1.08$) means there is a significant impact of AI-driven learning tools on the students' retention of English medical terminology in the experimental group. For this reason, it can be concluded that the AI-based activities considerably improved the students' ability to retain English medical terms.

Table 4 *T*-test for equality of means in vocabulary retention by group

Component	Group	*M*	*SD*	*t*	*p*	Effect Size (Cohen's *d*)
Recognition	Experimental	8.47	0.91	2.47	< .05	0.63
	Control	7.85	1.07			
Recall	Experimental	7.92	1.16	3.59	< .01	0.91
	Control	6.83	1.24			
Use	Experimental	7.64	1.09	4.55	< .01	1.15
	Control	6.38	1.11			

According to the table, the experimental group showed better performance compared to the control group in all three aspects of vocabulary retention.

In detail, the experimental group achieved higher mean scores in recognition ($M = 8.47$, $SD = 0.91$) than the control group ($M = 7.85$, $SD = 1.07$) with medium effect size ($d = 0.63$), meaning that the use of AI platforms had a moderate impact on the students' recognition of the terms (Table 4).

Similarly, in terms of the other two aspects, i.e. recall and use, the experimental group gained better mean scores ($M = 7.92$ and 7.64 respectively) than the control group ($M = 6.83$ and 6.38 respectively) with large effect size ($d > 0.90$). This indicates that the intervention with the use of AI platforms significantly enhanced the students' ability to recall and use medical terms.

4.2 Qualitative data

The interview data revealed that all participants believed the AI-platform activities supported their learning of English medical terminology. The students stated that this benefit came from the repeated exposure to the medical terms with different formats: flashcards, quizzes, games, etc. As S1 said, "seeing

the same words in different activities helped me to retain them better". Interestingly, a number of students showed their preference for the use of Quizlet in learning medical terms. In particular, AI-based activities on Quizlet were believed to be especially useful and effective (S1, S3, S4, S5, S6, S7 and S8). For instance, S6 reflected: "Quizlet showed the meaning of each word with just one click. So it was easier to learn medical terms one by one rather than from a list of words in the textbook". Sharing the same idea, S4 noted that there were images added along with definitions on Quizlet, which helped to enhance the learning process. She shared that: "The teacher sometimes added pictures for clarification along with the definition of the terms. This made the words easier to learn and remember".

Another theme emerging from the interview is the increased motivation and engagement derived from the AI-driven learning experiences (S1, S2, S4, S5, S7 and S8). From the interviews, the participants especially showed their interest in the use of gaming components such as leaderboards, timed challenge and scoring boosters, which promoted friendly competition and a sense of achievement (S1, S2, S5 and S7). For example, S7 shared: "Sometimes we played team games on the platforms. Working in teams was exciting because we were motivated to work together to win". Additionally, the students also valued the interactive and colorful design of the platforms, sharing that certain features of the platforms such as animations, sound effects and visual images made the learning experiences especially enjoyable (S2, S3, S4, S6 and S8).

The students were also impressed with the wide range of activities and game modes designed on the platforms (S1, S2, S3, S4, S5, S6, S7 and S8). From their sharing, the teacher flexibly employed a variety of modes on the platforms, including flashcard review and practice, matching games, and spelling quizzes. The flexibility and diversity of the activities were thought to bring an exciting atmosphere to the classroom, making the lessons less stressful, as S5 shared "It was so stressful to study complicated terms in this course but the teacher's use of a wide range of activities on the platforms helped to reduce the pressure of learning".

The students also revealed some challenges with AI-driven learning experiences (S1, S2, S3, S4, S5 and S7). A recurring problem involved technical hindrances, specifically unstable internet connection, system error, and screen disruptions. As shared by S4: "I think the only problem with AI-driven activities was the Wi-Fi connection. We had to connect to the university's Wi-Fi to do the activities, but it was weak. Sometimes I got logged out in the middle of the game". Similarly, S1 noted that, "Sometimes when the teacher started the game, the page on my phone froze and I had to rejoin. It interrupted my progress". In addition, some features in the platforms were also claimed to pose restrictions. For example, in Blooket's Royal Battle game mode, the students were unable to join once the session had started, which limited participation and inclusivity: "The Royal Battle in Blooket platform does not allow late joining. If we join in late or have some problems with the internet, you cannot join the game and have to watch others play". Besides, the students also pointed to errors in content preparation from the teachers (S3, S5). Some of the activities, from their sharing, contained incorrect terms that could lead to confusion about meaning and accuracy. As S5 noted, "Sometimes the questions and the answers didn't match because the teacher put the wrong answers, which made us confused". This issue was pointed by S3 who believe that it might result in a serious problem regarding knowledge acquisition: "I think the mistakes of preparing wrong answers might have negative consequences. For example, when someone is not critical enough but just depends on the answers provided on the platforms, they might end up acquiring the wrong words because the answers are repeated over and over again on the platforms".

5 Discussion

The findings of this current study confirm the previous findings that AI-assisted learning tools improve vocabulary acquisition and retention,

especially in EMP contexts. The significant improvement in vocabulary retention in the experimental group in this study aligns with the findings of several studies [2, 11-13], which reported that AI platforms supported vocabulary learning and improved long-term retention.

The main features of AI-driven platforms significantly contribute to these better outcomes because they contain adaptive practice, which allows students to focus on vocabulary items they struggle with. Moreover, instant feedback provided by the platforms also helps them identify errors immediately and reinforce correct usage and contextualized learning activities designed on these platforms enable them to practice applying medical terms in meaningful sentences. In other words, these combined factors result in students' better recognition, recall and use of the terms in real contexts. The control group, on the other hand, solely rely on traditional teaching of the teacher with the absence of opportunities for retrieval practice, thus reducing the students' abilities to retain vocabulary.

This study also confirmed the finding that AI-driven platforms significantly boosted students' motivation and engagement in learning vocabulary [13]. The technical challenges reported in this study, namely weak internet connections, system errors and device freezes are partly in line with the findings on certain difficulties facing students when using AI for EFL vocabulary acquisition, including unstable Wi-Fi connectivity, limited access and integration issues [15].

However, this research also provides a number of new contributions to the literature on the use of AI in EMP vocabulary learning. First, although the results are consistent with previous study on the effects of AI on students' vocabulary retention, this study offers a new design (quasi-experimental design) in assessing the level of vocabulary retention among students in EMP courses, which is different from other designs from previous studies. Moreover, the setting of this study, a private university in Vietnamese contexts, also gives a fresh insight into the use of AI in EMP courses in a specific region when AI is widely used across the globe. Among the findings of the study, it is interestingly found that the students are particularly interested in the wide variety of activities and game modes chosen by the teacher in every lesson, which helps to reduce the boredom and pressure of learning complex medical terms. This insight is new compared to the previous studies in the same field. In addition, one notable problem revealed by the students in the interviews is the design error in the platforms when the teacher mistakenly puts the wrong answers for the terms. According to the students, this may lead to serious consequences like incorrect vocabulary acquisition if they lack critical thinking. This finding is also fresh as no other previous studies have mentioned this issue before.

6 Conclusion

This study aimed to examine the effects of AI-driven platforms on medical students' retention of English medical vocabulary in EMP courses. The findings showed that the students who studied with AI-driven platforms demonstrated a statistical increase in their retention level of English medical terms over an 8-week period. The qualitative data from the interviews also supported the quantitative result. While the findings of this study confirm those of previous research on the positive impacts of AI platforms on enhancing students' vocabulary retention, the methods and setting of this study set it apart. There are also other new insights emerging from the data such as students' appreciation of the diversity of activities and game modes designed on the platforms and the problem regarding design error from the teacher which may result in serious consequences.

However, the study has certain limitations that future research could be carried out to achieve more comprehensive findings. Firstly, it was conducted in a single university for over a relatively short time, meaning the findings may not be fully generalizable. Secondly, while the sample was small, students' self-reported responses from the interviews are rather subjective and incomprehensive. Therefore, future studies could be conducted with larger and more

diverse participants with a longer period of intervention. Moreover, it would be more holistic to include teachers' perspectives on the use of AI as well to yield more valuable insights into the research topic. This study suggests, pedagogically, that the use of AI-driven platforms can be utilized in EMP courses to promote students' retention of medical terms. Teachers should consider integrating multiple applications of AI platforms to maintain students' motivation and engagement in the learning process as well. Moreover, technical literacy should be provided for both teachers and students before the courses to achieve optimal benefits of using the AI tools in EMP courses.

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Ảnh hưởng của các nền tảng dựa trên trí tuệ nhân tạo đến khả năng ghi nhớ thuật ngữ y khoa tiếng Anh của sinh viên y khoa trong các khóa học tiếng Anh chuyên ngành Y khoa

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Tóm tắt Nghiên cứu điều tra ảnh hưởng của các nền tảng dựa trên trí tuệ nhân tạo đến khả năng ghi nhớ thuật ngữ y khoa của sinh viên y khoa trong các khóa học tiếng Anh chuyên ngành y tại Trường Đại học Nguyễn Tất Thành. Có 63 sinh viên tham gia nghiên cứu: nhóm thực nghiệm gồm 32 sinh viên và nhóm đối chứng gồm 31 sinh viên. Với phương pháp nghiên cứu bán thực nghiệm, nghiên cứu đã sử dụng các bài kiểm tra và các phỏng vấn bán cấu trúc để thu thập dữ liệu. Kết quả cho thấy nhóm thực nghiệm có khả năng ghi nhớ tốt hơn nhóm đối chứng. Hơn nữa, sinh viên nhận thấy các công cụ trí tuệ nhân tạo có tính động viên, thân thiện với người dùng và hiệu quả trong việc giúp họ ghi nhớ các thuật ngữ y khoa. Những phát hiện nghiên cứu này cho thấy các nền tảng dựa trên trí tuệ nhân tạo có thể được tích hợp vào chương trình giảng dạy các khóa học tiếng Anh chuyên ngành y để cải thiện kết quả học tập của sinh viên.

Từ khóa Nền tảng dựa trên trí tuệ nhân tạo; thuật ngữ y khoa; khả năng ghi nhớ; tiếng Anh chuyên ngành y khoa.