# Promoting Safe Medical Device Interoperability

**Anura Fernando – Principal Engineer**

**Underwriters Laboratories**

**January 26, 2015**

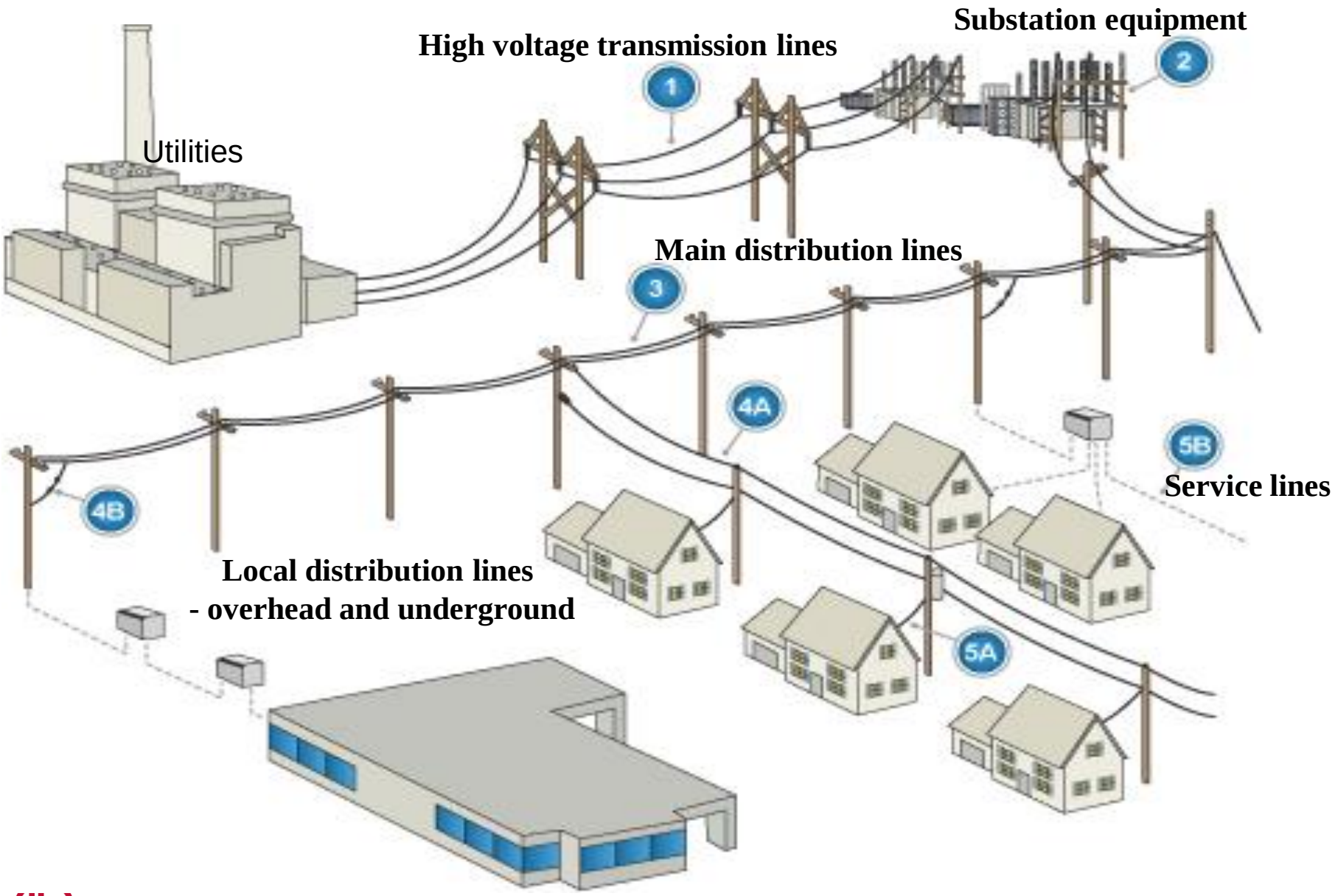
# Data…the new "electricity" for product safety engineers

In the 1890's as fires began plaguing American cities:

A member of the National Board of Fire Underwriters was quoted during that time as saying, "Better buildings are burning in a greater ratio than ever before…and there are mysterious causes at work that we do not understand. I believe (the cause) to be electricity" (Bezane, 1994)

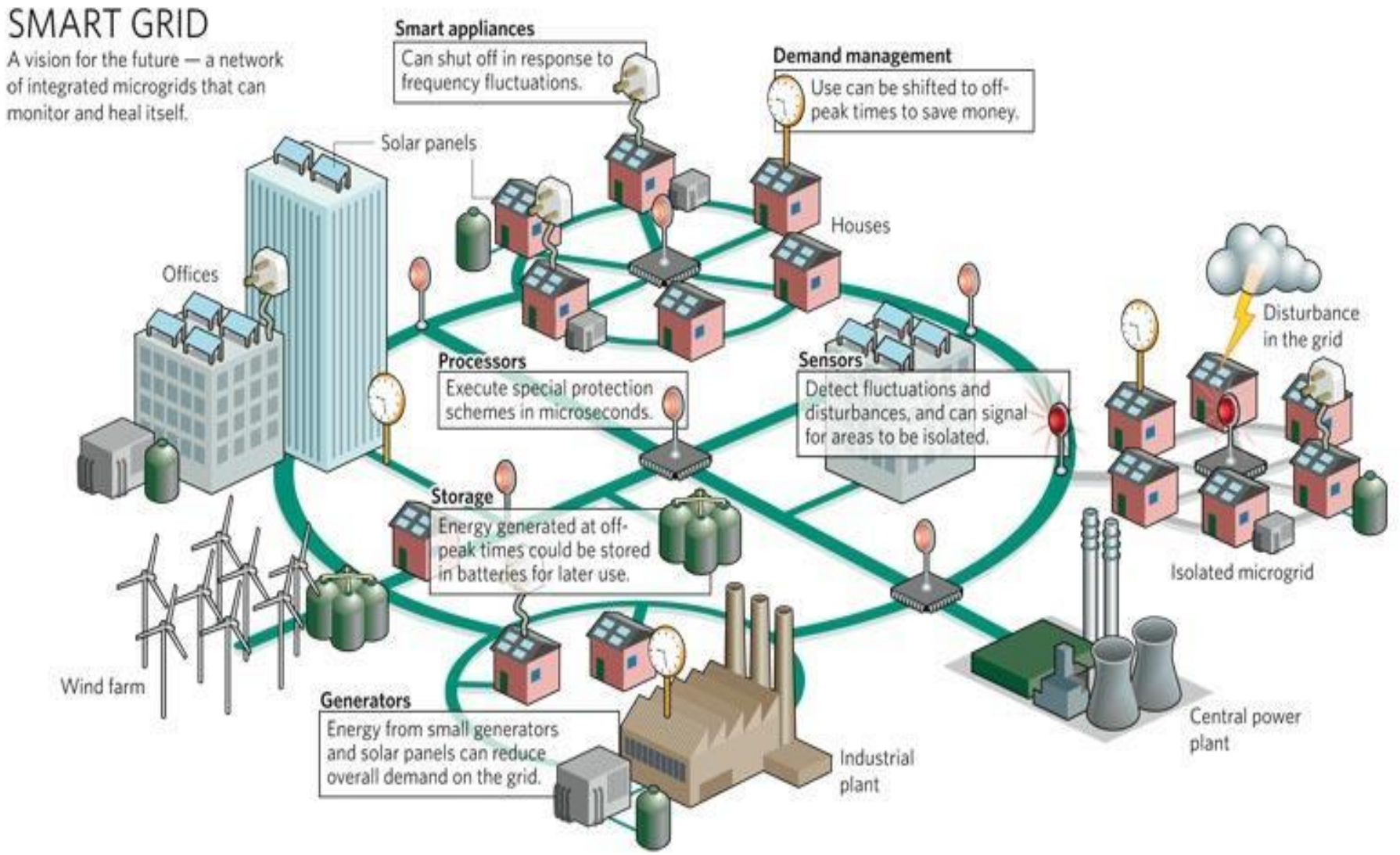
**We now understand electrical safety fairly well, but do we fully understand all of the safety issues associated with the distribution and utility of *data*?**

# Networks are networks




http://www.dteenergy.com/images/restorationGraphic.jpg

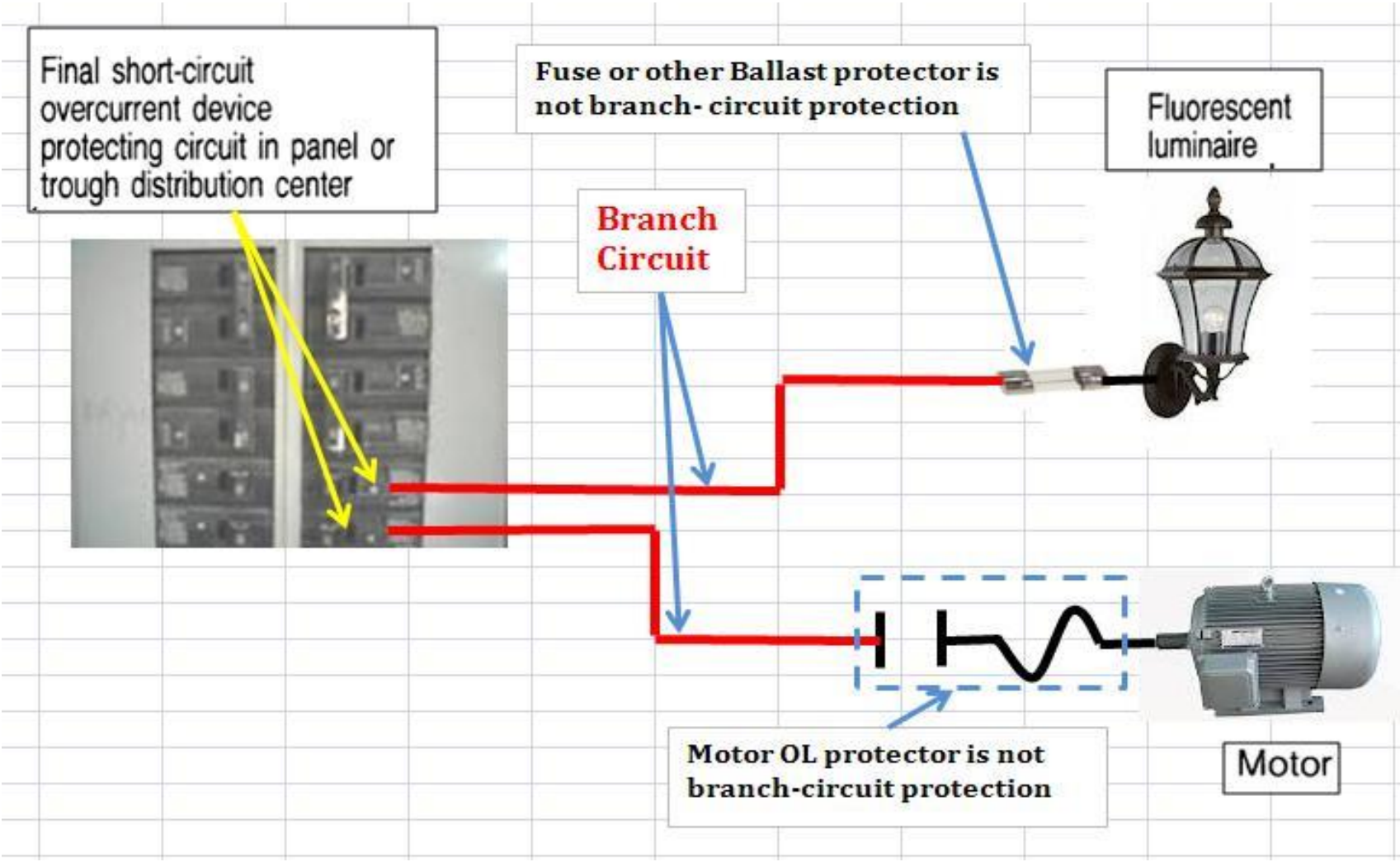
# But there are many Use Cases to be considered…




http://energyinformative.org/wp-content/uploads/2012/01/smart-grid.jpg

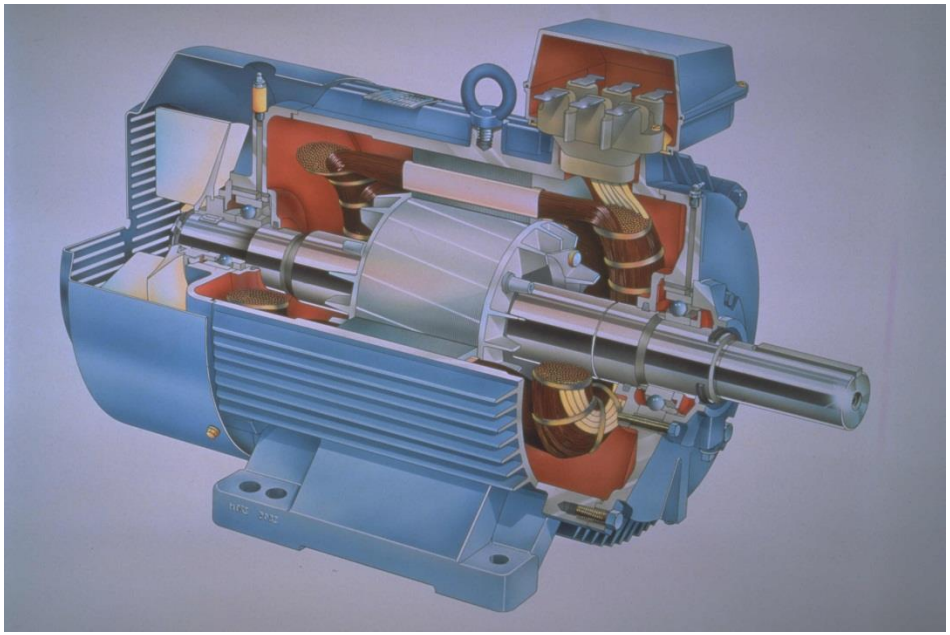
# …and layers of complexity to be tested

# …and more layers…




http://alihassanelashmawy.blogspot.com/2011/12/nec-article-100-branch-circuit.html

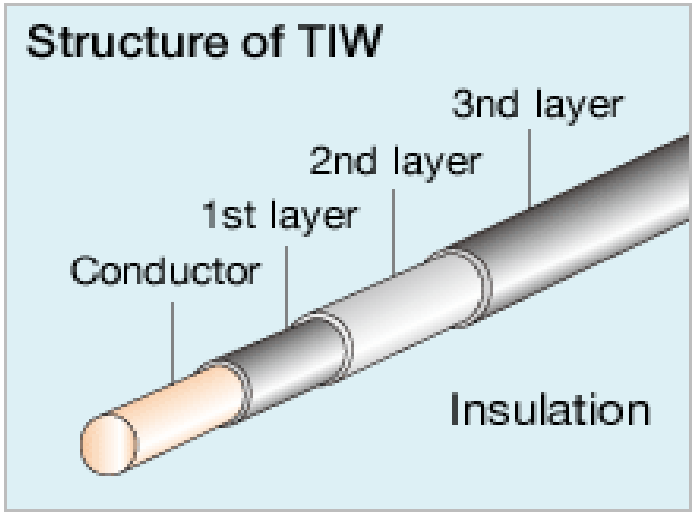
# …and more layers…



http://www.mindconnection.com/library/electrical/motorslip.htm

http://news.thomasnet.com/fullstory/Post-Top-Luminaire-Base-optimizes-safety-during-maintenance-599980

# …and more layers…

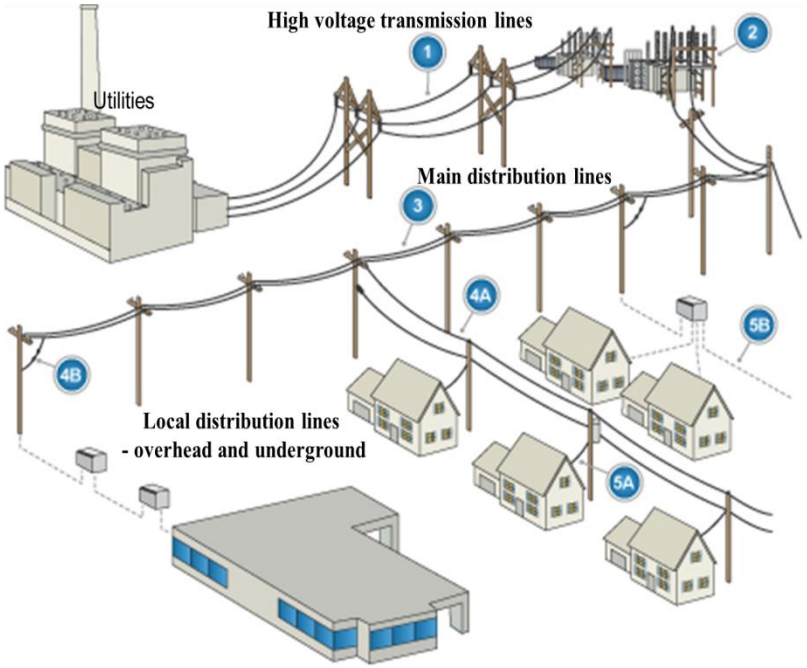


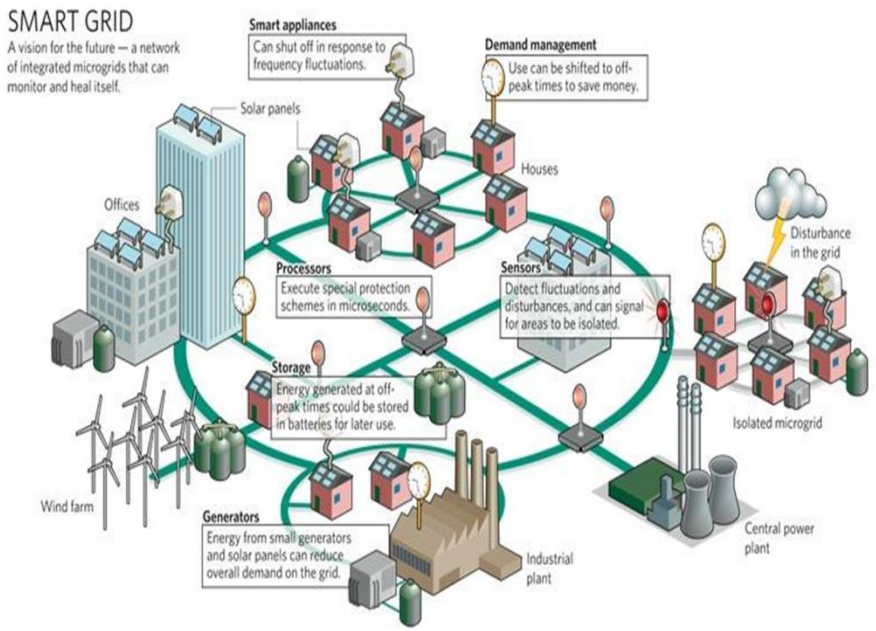

http://www.totoku.com/products/electric_wires/wires/tiw/


http://www.wencosimplex.com/wire_strippers.htm

# But the point is

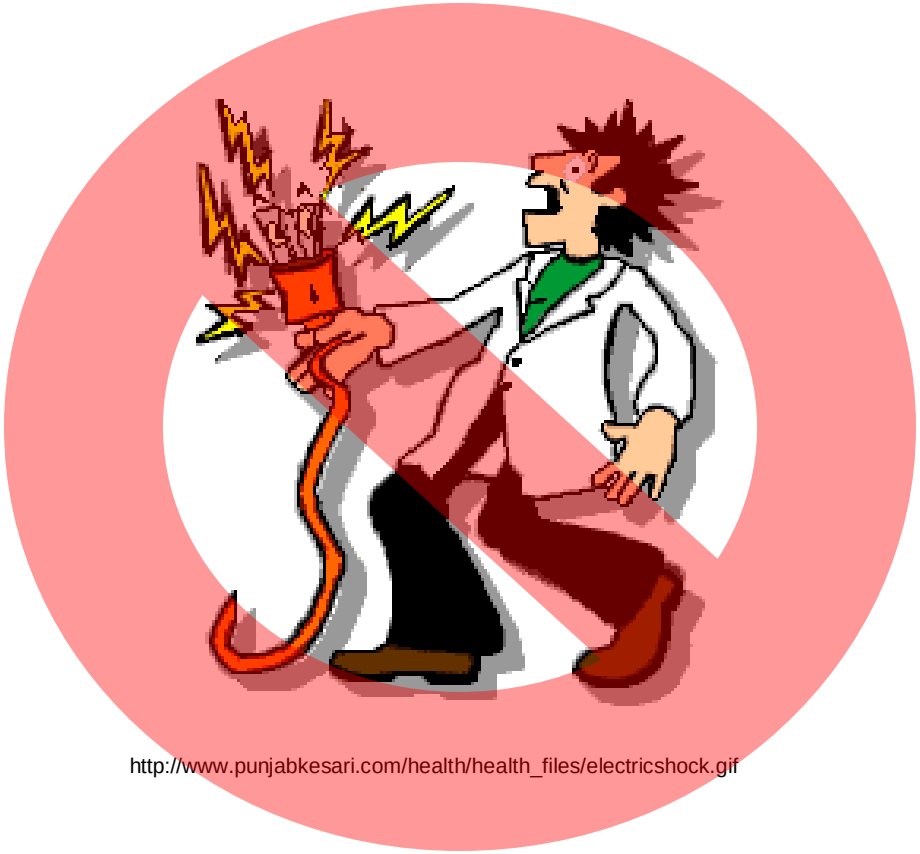
**Every “component” could be a “system”**
**and**
**every “system” could be a “component.”**



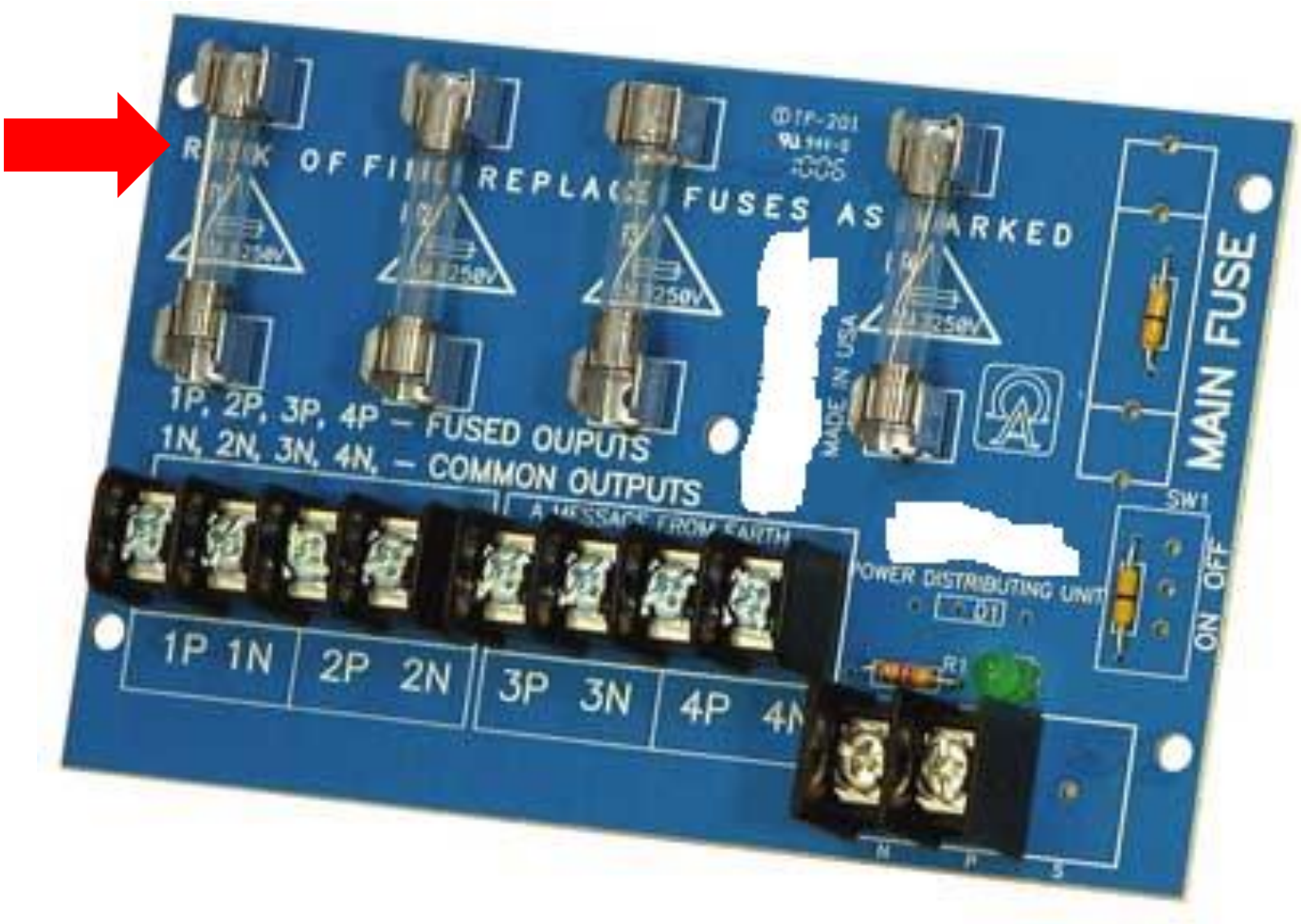
# So, “component” testing has to meet “system” safety objectives.

http://www.bob937.com/bobsstupidnews/Story.aspx?id=1445467

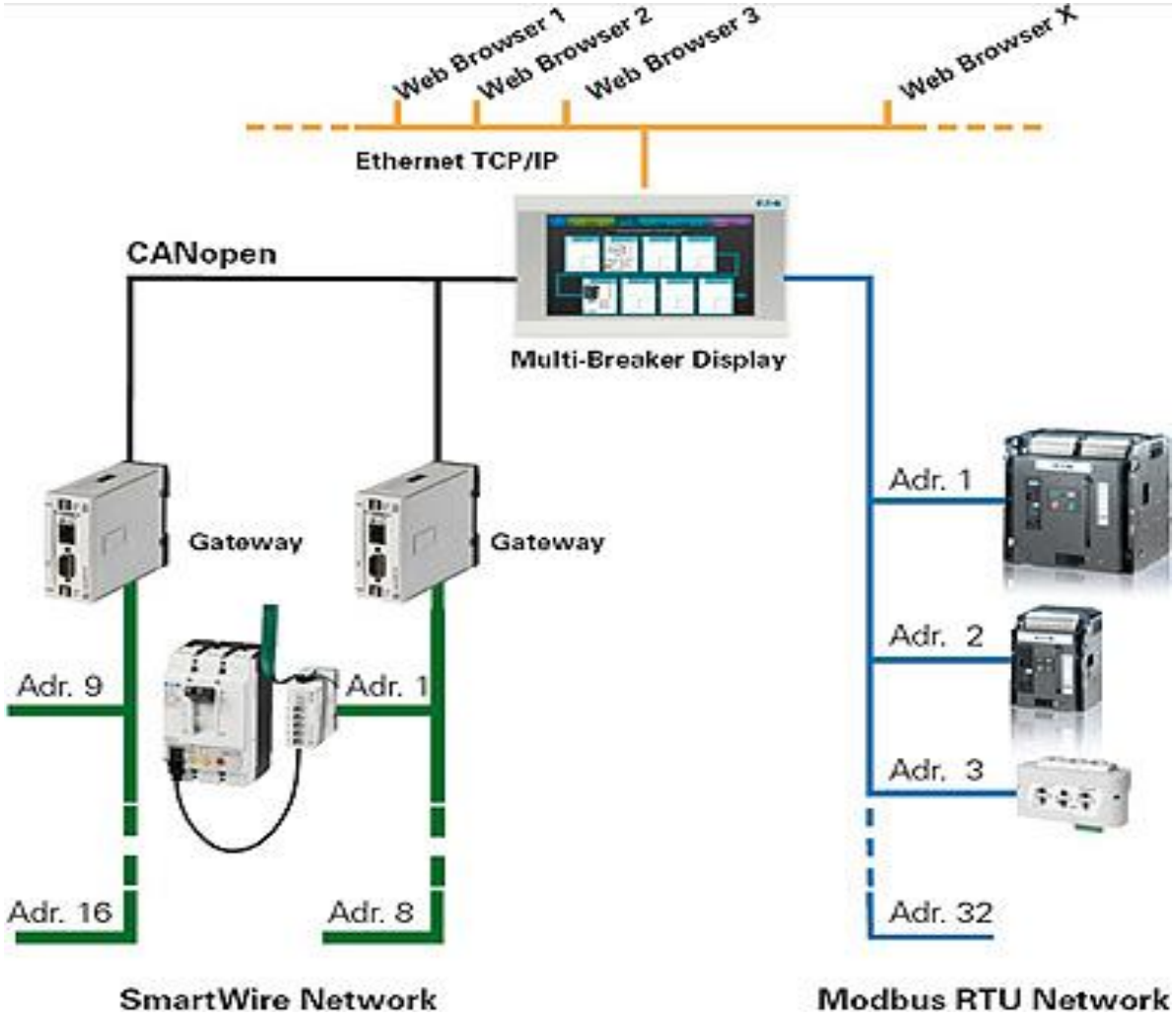


http://www.punjabkesari.com/health/health_files/electricshock.gif

# And “component” capabilities must satisfy “system” requirements.



# Even many “basic electrical” risks are now mitigated by software-based electronic controls (e.g. web-enabled circuit breakers)



# Lessons Learned for E/E/PE Systems Safety

VS

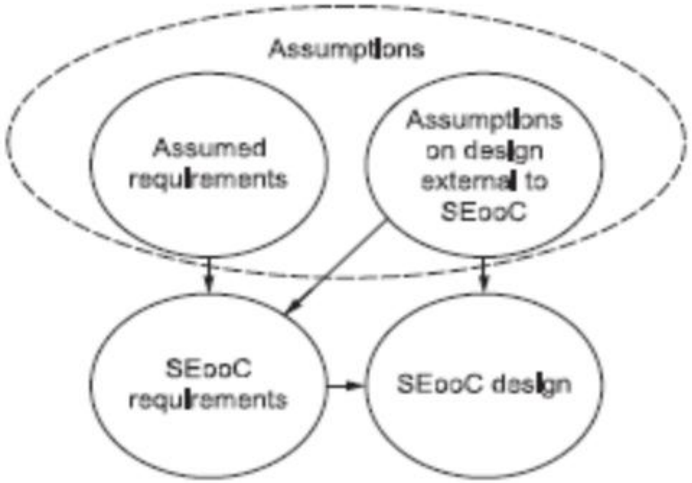


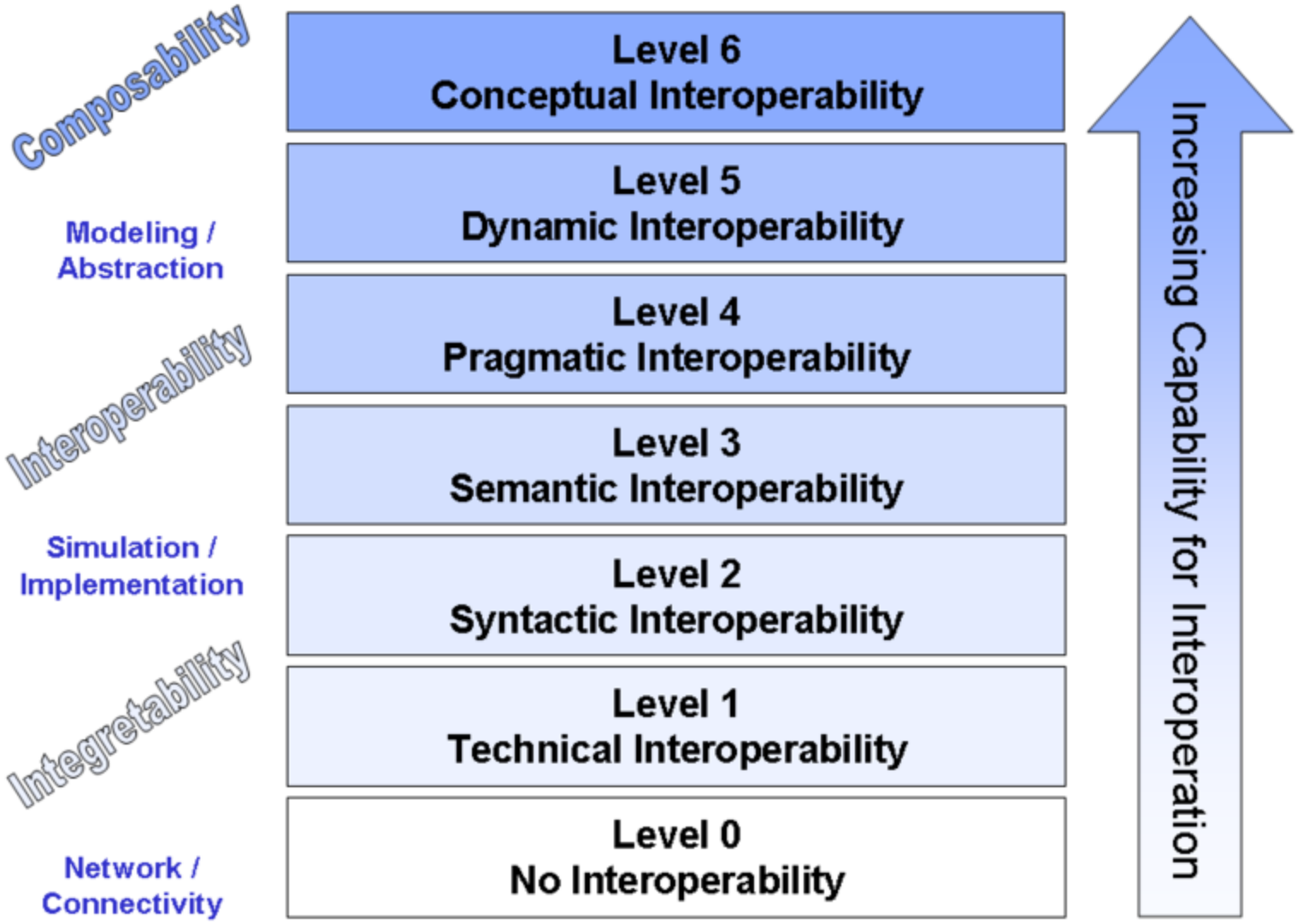

Figure 18 — Relationship between assumptions and SEooC development

Reference: ISO 26262

| SIL | Probability of Failure on Demand (PFD) | Probability of Success on Demand | Risk Reduction Factor (RRF) |
|---|---|---|---|
| 4 | $10^{-4}$ to-$10^{-5}$ | 99.99 -99.999% | 10,000 -100,000 |
| 3 | $10^{-3}$ to -$10^{-4}$ | 99.9 -99.99% | 1,000 -10,000 |
| 2 | $10^{-2}$ to -$10^{-3}$ | 99 -99.9% | 100 -1,000 |
| 1 | $10^{-1}$ to -$10^{-2}$ | 90 -99% | 10 -100 |

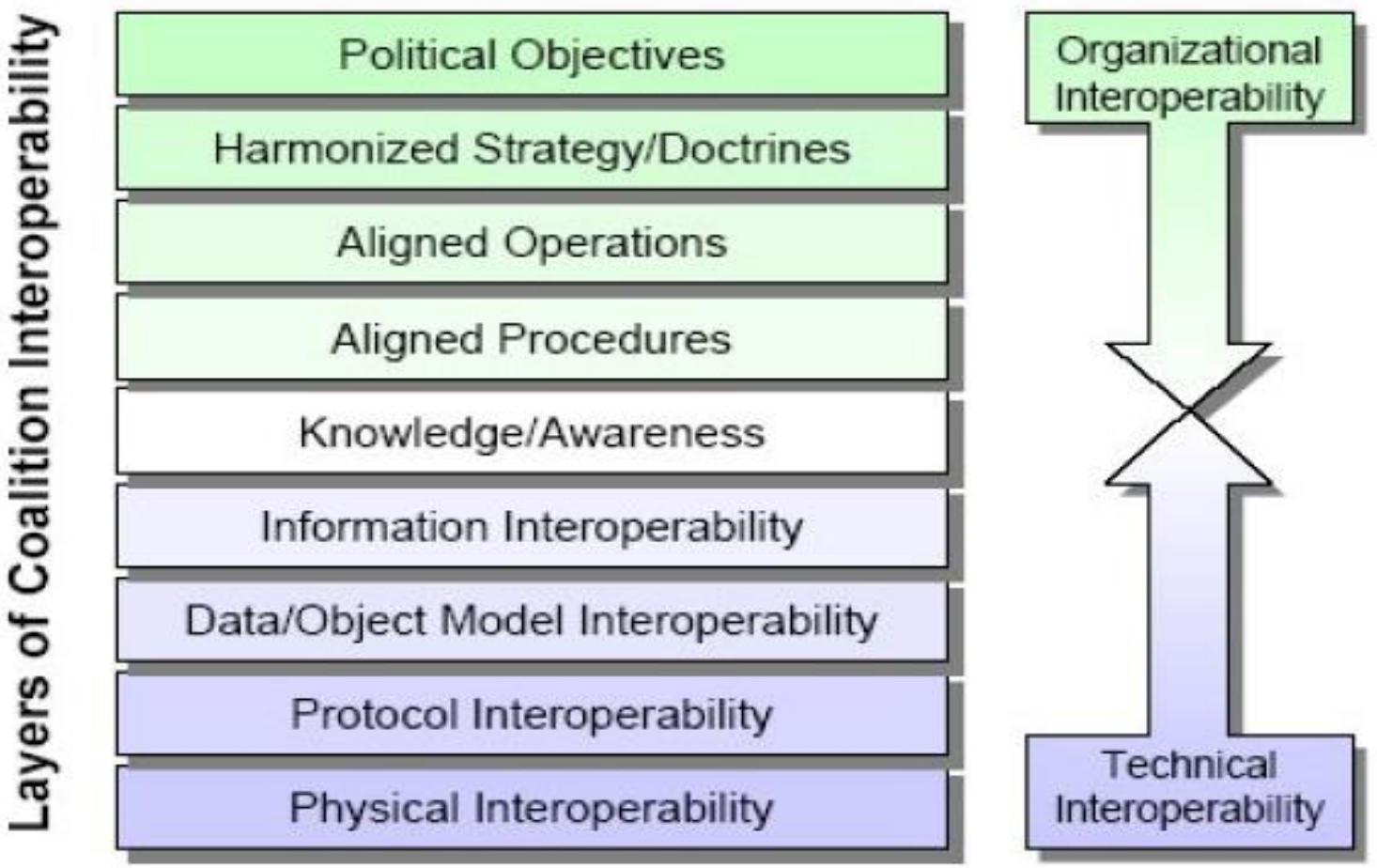
http://www.piping-engineering.com/sil-safety-integrity-level-overview.html

# In order to achieve “interoperability”



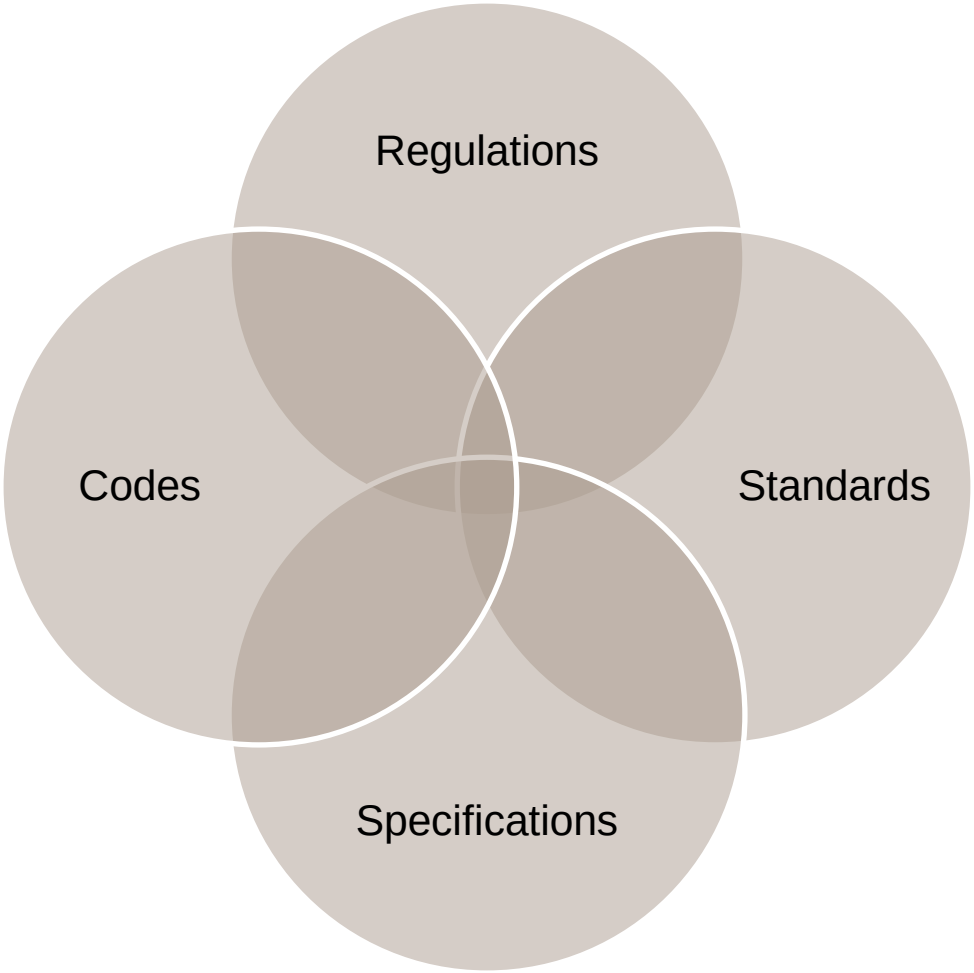

Andreas Tolk, first use in <<Tolk A, Diallo SY, Turnitsa CD, Winters LS (2006) "Composable M&S Web Services for Net-centric Applications," Journal for Defense Modeling & Simulation (JDMS), Volume 3 Number 1, pp. 27-44, January 2006>>, also used in << Tolk A: "What comes after the Semantic Web, PADS Implications for the Dynamic Web," Proceedings of the 20th ACM/IEEE/SCS Workshop on Principles of Advanced and Distributed Simulation (PADS 2006), Singapore, May 2006, pp. 55-62

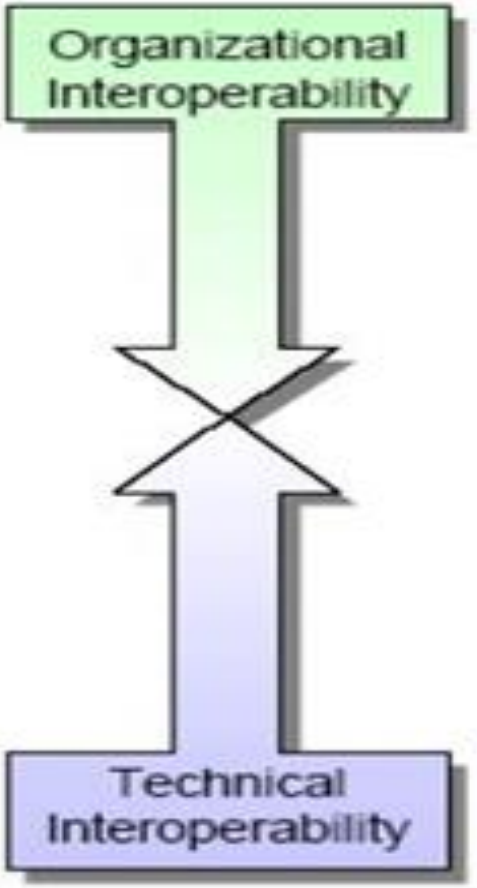
# In order to realize safe “interoperability”



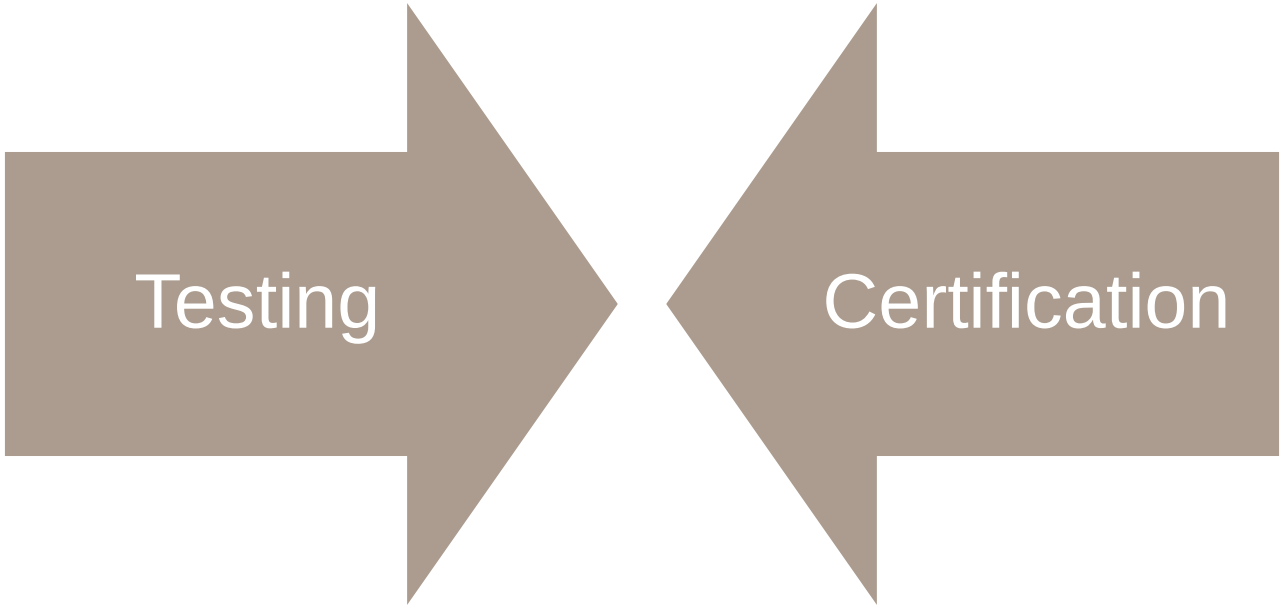

[Tolk 03] Tolk, Andreas. “Beyond Technical Interoperability – Introducing a Reference Model for Measures of Merit for Coalition Interoperability.” 8th International Command and Control Research and Technology Symposium (ICCRTS), Washington, D.C., June 17-19, 2003. Washington DC: Command and Control Research Program (CCRP), 2003

# Drivers for alignment of “safety thinking” are necessary



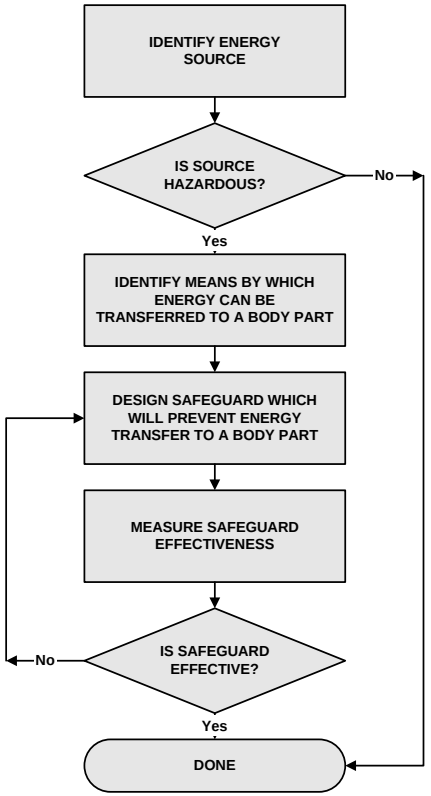
# Demonstration of conformance to drivers via



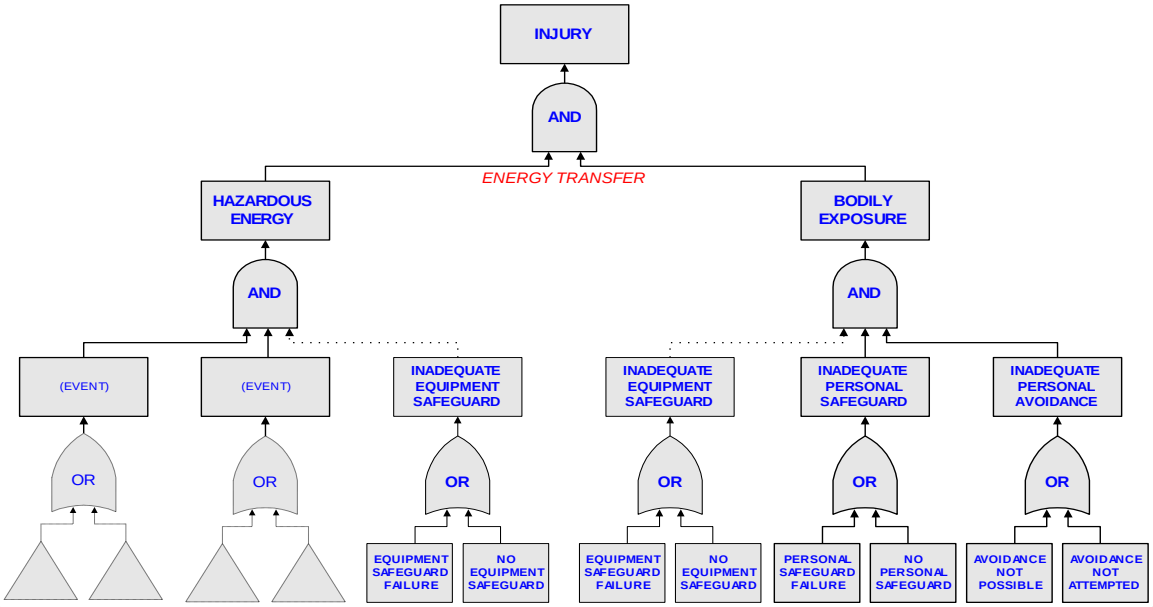
# Risk management for standardization and testing

## HBSE Premise


## HBSE Process



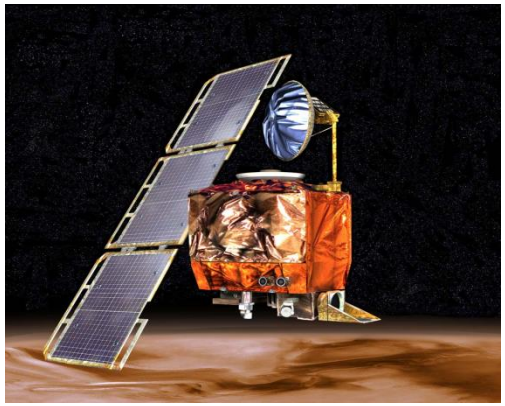

## HBSE Standard Injury Fault Tree



# Regardless of the application domain, system testing and certification should strive to address:

- Responsibility / Accountability (Ownership of the System)
- The Potential for Miscommunication (Requirements)
- Incomplete Understanding of Technology (Failure Modes)
- Inadequate Risk Controls for Random Faults (incl. CCF)
- Ineffective Project Management Metrics (Safety Detractors)

# …otherwise…

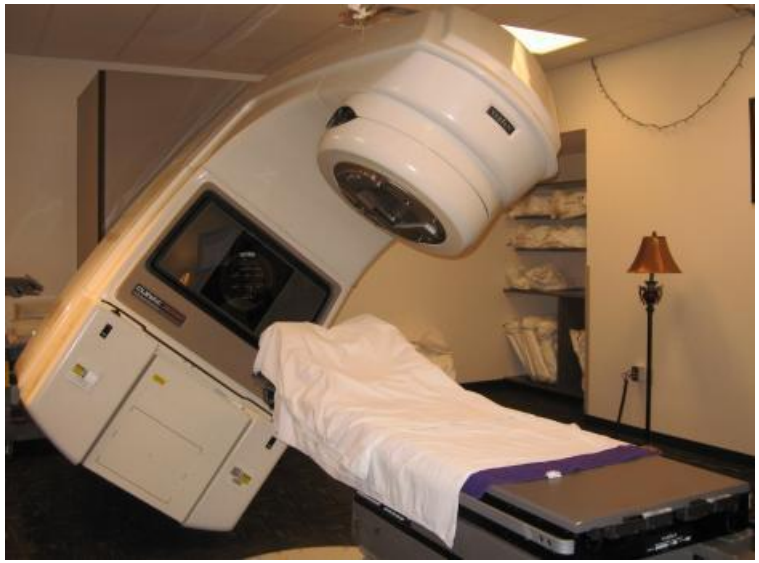


Mars Climate Orbiter

- Mismatched units


Ariane 5

Floating point value too large to be represented by signed integer



http://50quidsoundboy.net/wp-content/uploads/2011/05/thumb-21367-radiation_therapy.jpg

Therac - 25

- “unlikely” sequence of keystrokes
- Integrated re-used sw into incompatible hardware (no interlocks)
- Improper V&V – no pre-release integration testing

# AAMI/UL 2800 Problem Statement

- Risk exists in both the “absence of interoperability” as well as the “presence of interoperability”

- UL noticed a “healthcare megatrend” aligned with its public safety mission, and an opportunity to significantly reduce unnecessary deaths due to the “absence of interoperability” by providing a means to demonstrate safety during the “presence of interoperability.”

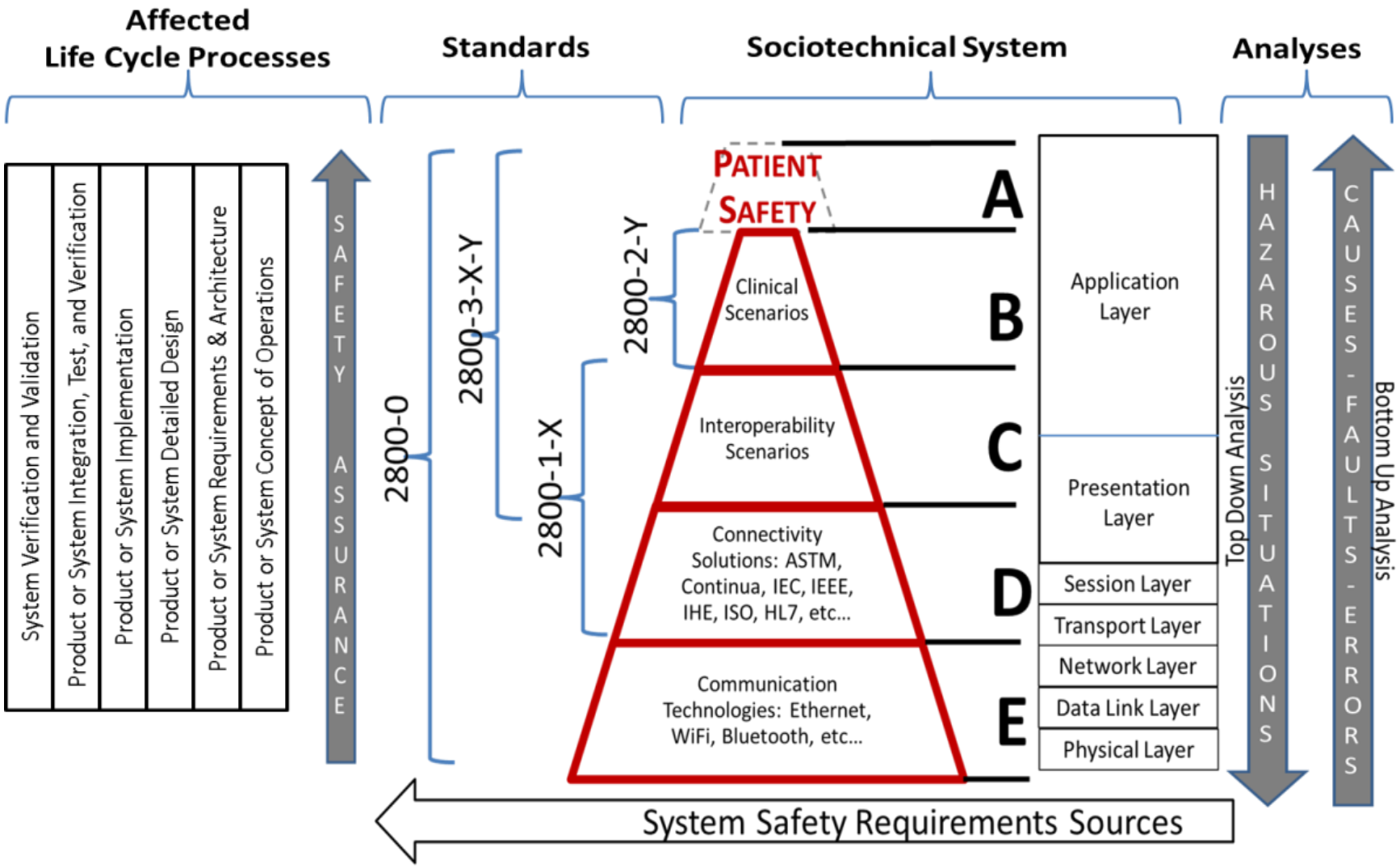
- Safety-focused architecture standardization work had already begun under ASTM efforts, however, testing and certification of conformance was missing.  Such testing and conformance certification seemed to be a necessary part of the ecosystem that could aslo  support regulation.

# Objectives of AAMI/UL 2800

## Safety, Security, and Essential Performance Objectives:

- Identification of common functional components/capabilities to be found in medical interoperable systems for which safety/security requirements will be enumerated
- Correct patient and user identification
- Component authentication (i.e. to facilitate plug and play interoperability, ensuring trusted composition)
- Clinical app logic execution safety (partitioning, non-interference) coordination (incl. mechanisms to manage complexity) with appropriate statement and realization of system safety requirements
- General mechanisms for establishing traceability of adverse event to root cause (ie. data provenance)
- Fail-safe or fail-operational (fault tolerant) risk-associated state determinism
- General requirements on “Real time” capabilities (i.e. Response time < Hazard time)
- Time synchronization
- Characterization of interface safety requirements for testing under normal operating conditions as well as failure mode and stress conditions
- Safety-related QoS metrics (e.g. bandwidth, latency, etc…)
- Partitioning mechanisms for data and time partitioning for both application execution and communication
- Unambiguous descriptions of interoperability architectures and component interface
- Consistent and unambiguous interpretation of physiological, clinical, and patient data as well as control signals

# AAMI/UL 2800 Promotes Safe Interoperability



# Thank You

For more information please visit:

www.ul.com/eHealth