

Assuring Medical Device Interoperability Plug-and-Play Open Systems

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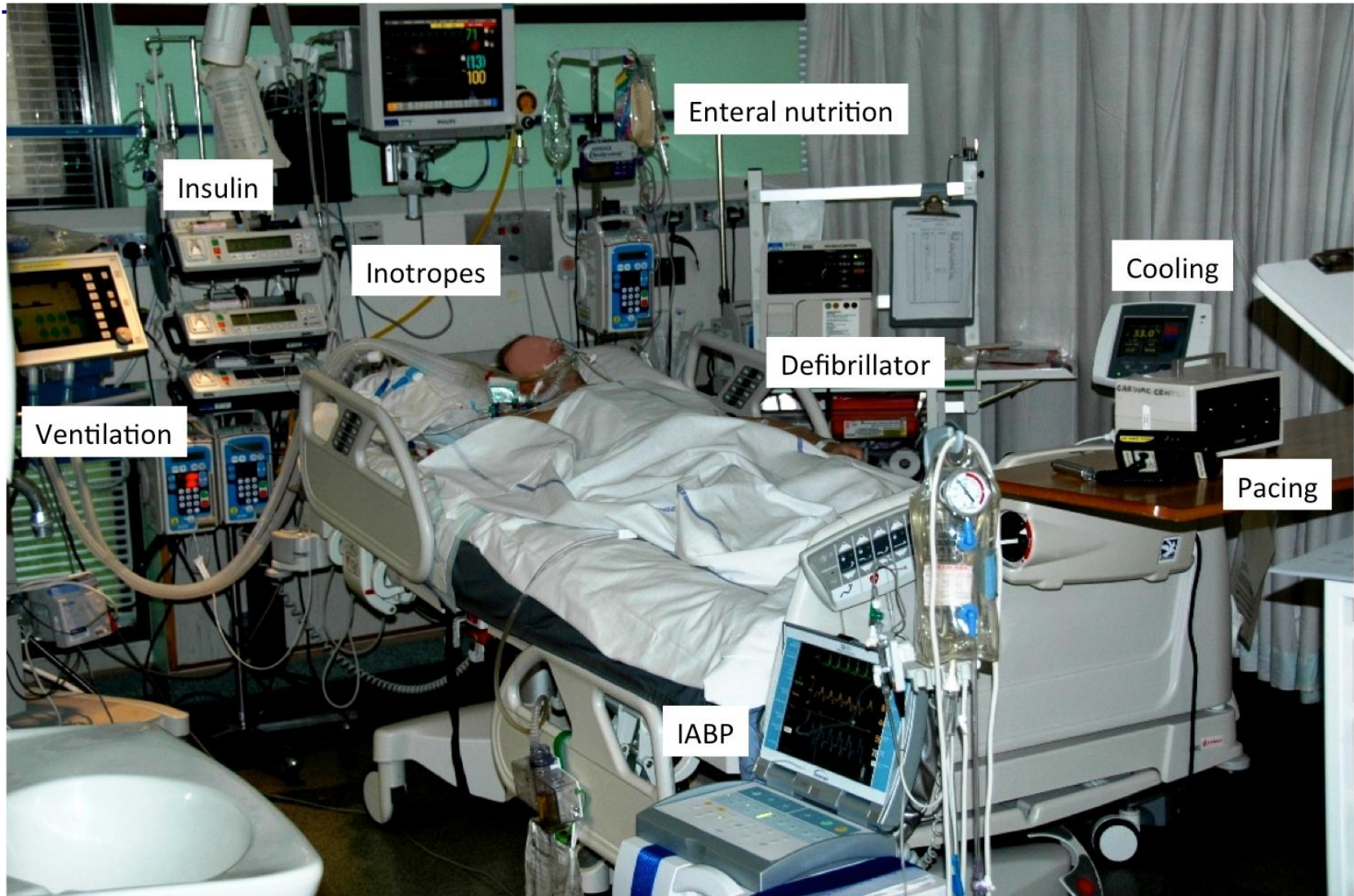
Outline

1. Medical Device Interoperability

2. Safety Assurance for MD PnP Systems

3. Medical Application Platform Design

Example: ICU



Current Problem

- Little to no integration of devices with each other:
 - Humans must automate even simple clinical workflows
 - Unnecessary burdens placed on human caregivers
 - Few opportunities for “sensor fusion” (better alarms and diagnostics)
- Potential safety hazards
 - Clinical scenario 1:
laser surgery / ventilator
 - Clinical scenario 2:
x-ray / ventilator



Clinical Scenario: Laser Surgery / Ventilator



- Doctors enforce the following invariant:
 - If **laser = on** then **oxygen = off**
 - If patient's **SpO2 < 95** then **oxygen = on**
- **Systems of Systems approach:**
 - let devices communicate and automate safety invariant enforcement

Clinical Scenario: X-Ray / Ventilator

“With the advent of sophisticated anesthesia machines incorporating comprehensive monitoring, it is easy to forget that serious anesthesia mishaps still can and do occur.”

APSF Newsletter Winter 2005



Portable x-ray machine



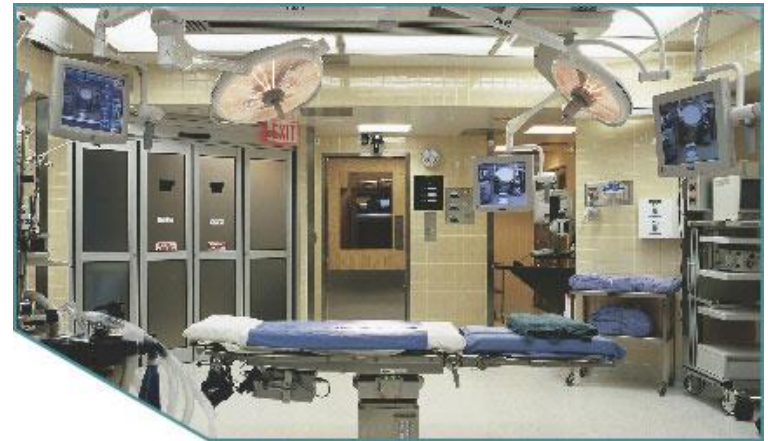
Surgeons



Anesthesia Machine

Why Medical Device Interoperability?

- Interoperable medical devices can self-coordinate
 - Provide continuous monitoring
 - Handle routine tasks and respond to obvious problems
 - Alert caregivers in more serious cases
 - Physiological closed-loop control in many cases



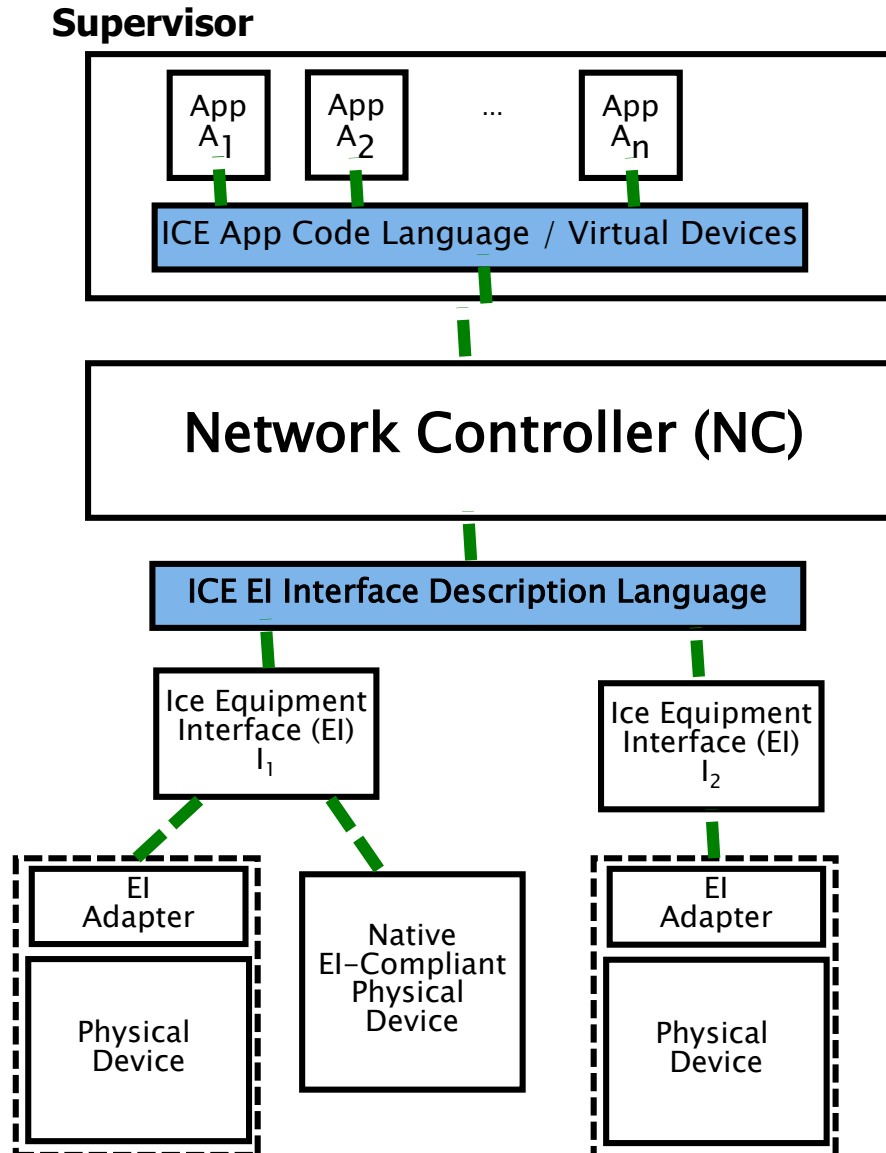
Future

Current

Medical Device Plug-and-Play Open Systems

- Medical Device Plug-and-Play (MD PnP)
 - Interoperable medical devices based on plug-and-play
 - Vender neutrality based on open medical device interfaces
 - www.mdppnp.org
- Emerging Interoperability Standards
 - ASTM Standard F2761–2009 for **Integrated Clinical Environment (ICE)** defines a high-level architecture and functional concept
 - The ICE architecture standard is the focal point for FDA's evaluation of MAP (Medical App Platform) concepts in future medical systems

ICE Architecture

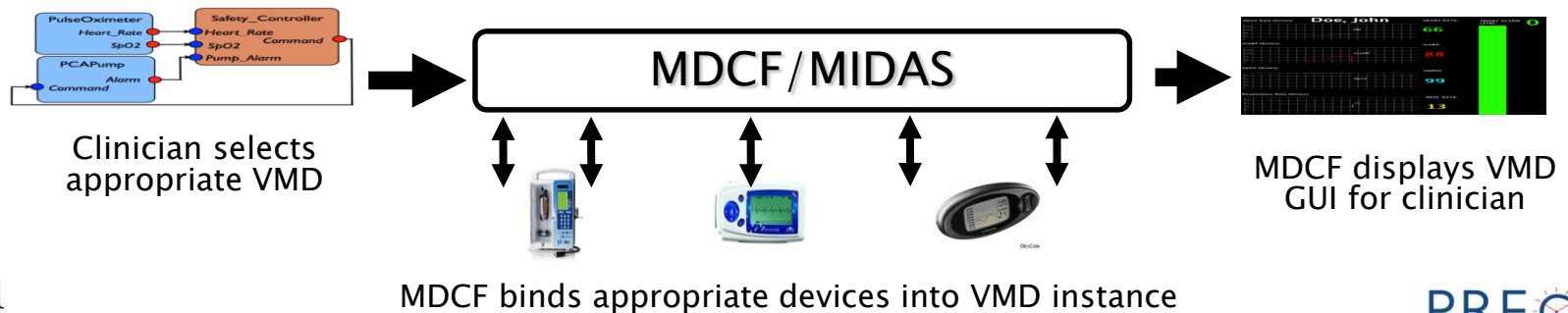


Virtual Medical Device (VMD)

- **MD PnP** enables the concept of **VMD**
 - A set of medical devices coordinating over a network for clinical scenario



- **VMD does not physically exist until instantiated at hospitals**
- **The Medical Device Coordination Framework (MDCF)**
 - Our prototype middleware for managing the correct composition of medical devices into VMD.



Outline

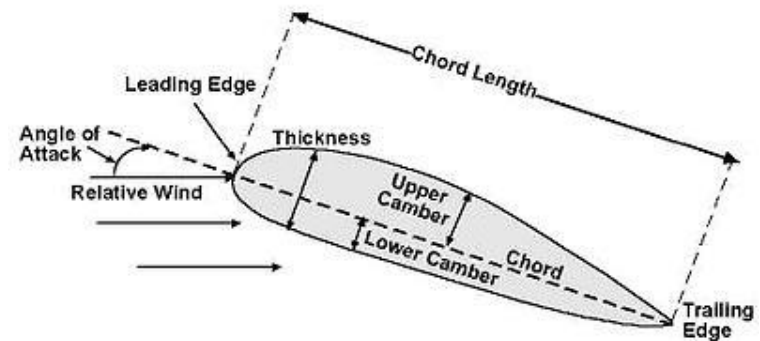
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VMD Safety Assurance Challenge

The **new system integration paradigm** of VMD has serious implications for safety assurance, where the traditional approach won't scale.

Emergent Property

- Example: **Top-speed of an airplane**
 - The top-speed is a function of **engines + fuselage + wings + flight control software (FCS)**
 - Does it make sense to talk about the top-speed of FCS?



Safety is an Emergent Property

- Example: Laser / Ventilator Safety Interlock

Safe system

(Emergent) Behavior of Integrated System



Unsafe states:

Laser is on
&
Ventilator is on

Safety is an Emergent Property

- Example: Laser / Ventilator Safety Interlock

Unsafe system



(Emergent) Behavior of Integrated System

Unsafe states:

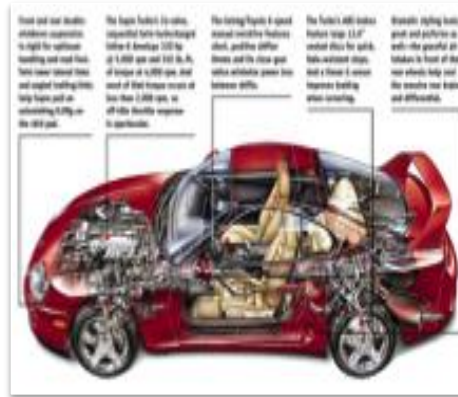
Laser is on
&
Ventilator is on

Traditional Safety Critical Systems

- Traditional safety critical systems are fixed function, and are designed and integrated by a single systems integrator



Aerospace



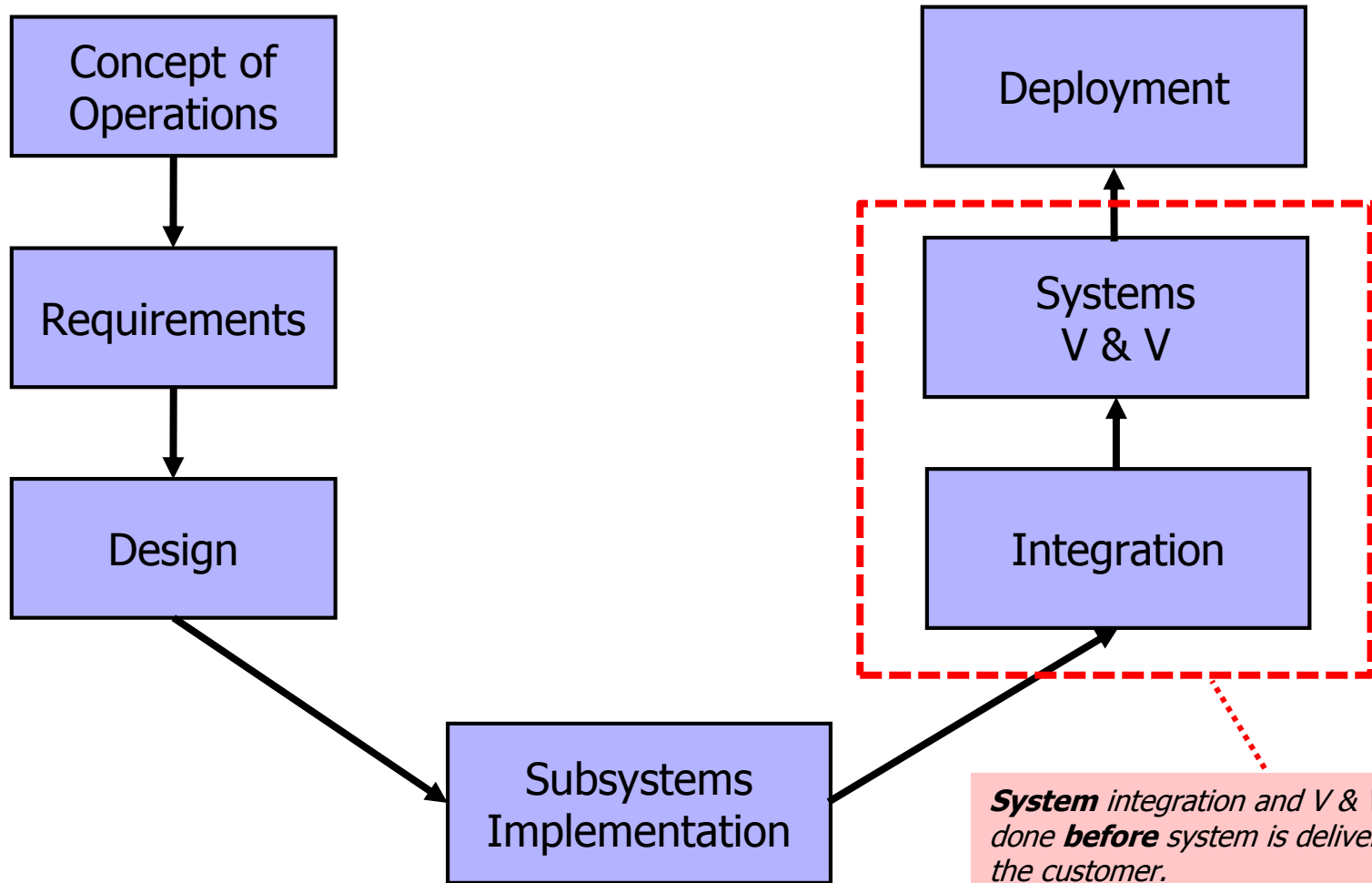
Automotive



Nuclear

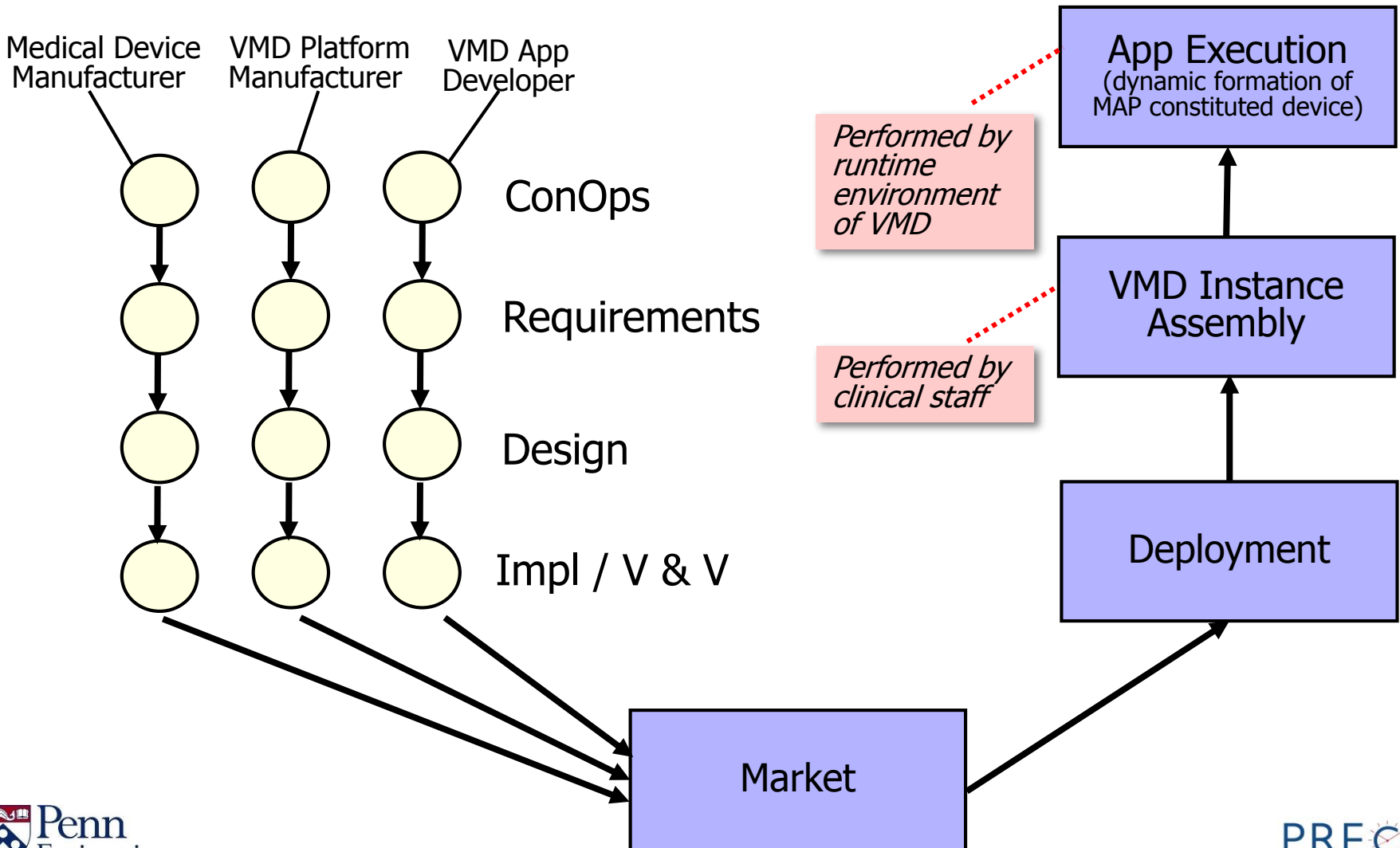
Traditional System Integration

- End to end process managed by prime contractor



***System** integration and V & V is done **before** system is delivered to the customer.*

VMD Development & Assembly



VMD Characteristics

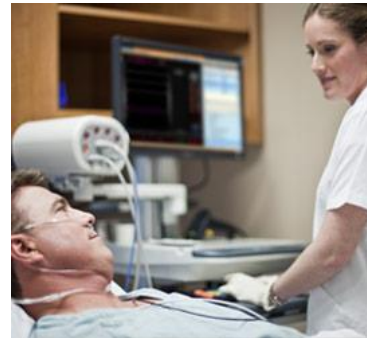
- There is **no** prime contractor that is responsible for VMD integration and system-level V&V
 - Assembly is performed after deployment
 - Assembler (hospital staff) **does not have** expert-level technical knowledge of components & system behavior
 - **App developer** is responsible for overall system safety arguments
 - Platform services (compatibility checks) assist in determining **at app launch time** if platform and attached devices satisfy requirements of app
 - The app's directions for assembly of the platform constituted device are stated **only in terms of properties/capabilities that are exposed on the interfaces** of the platform and devices

Medical Device Certification

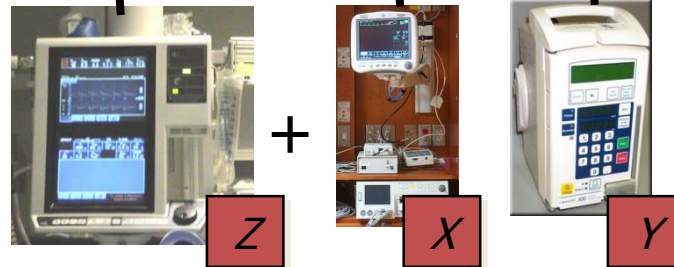
- In the U.S., FDA approves medical devices for specific use
 - Safety and effectiveness are assessed
 - Evaluation is process-based: ISO 9001 (quality management) and ISO 14971 (risk management)
 - Hazard analysis is key to approval
 - FDA's 510(k) requires “substantially equivalent” to devices on the market
- No certification of interoperable medical devices
 - Currently, each collection of interconnected devices is a new medical device to be approved.

Current Regulatory Approach

Current regulation of integrated systems (e.g., central station monitors) requires **“pair-wise” clearance**: whenever a new type of device is added to the monitoring platform, the entire infrastructure must be re-cleared.



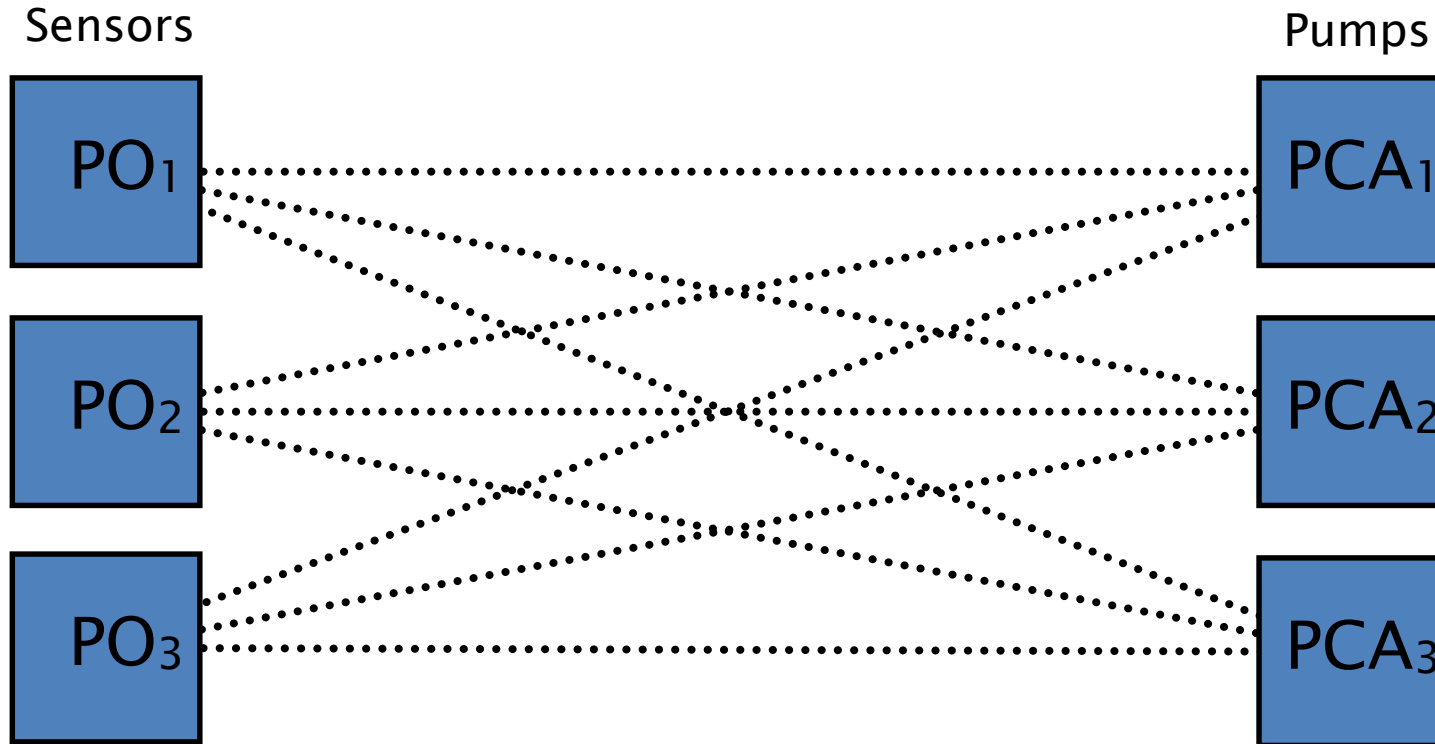
Assume monitoring system was originally developed, verified, and received regulatory clearance for devices of type X & Y.



In current regulatory approach, adding a new type of device (e.g., Z) typically causes the entire system to be re-submitted for regulatory clearance.

Pairwise Certification Complexity

Example “interoperable” device ecosystem 3 different (model/manufacturer) blood oxygen sensors, 3 different (model/manufacturer) PCA pumps:

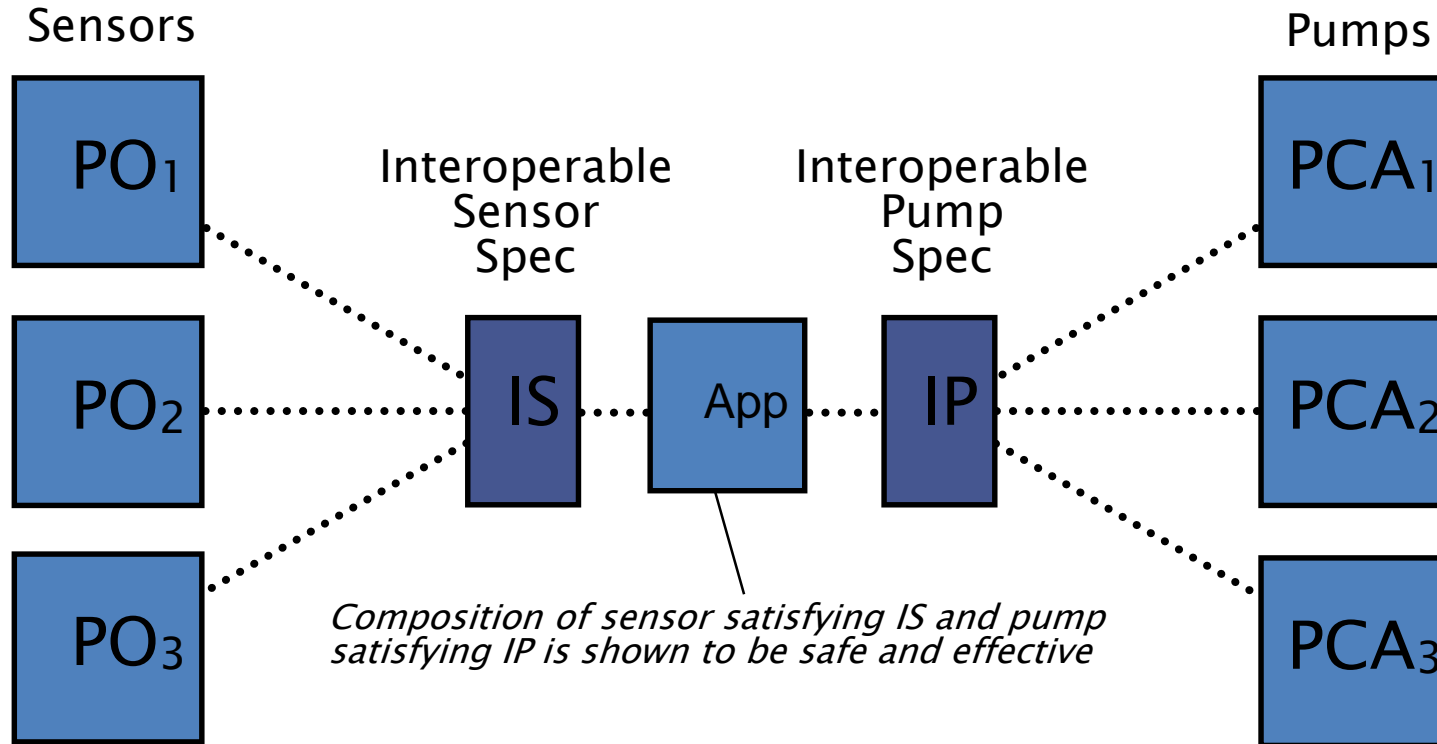


Each sensor must be approved or certified for use with each pump and vice versa. This is burdensome for manufacturers and regulators.

.....
Certification or approval relationship

Interface-based Certification

Example “interoperable” device ecosystem 3 different (model/manufacturer) blood oxygen sensors, 3 different (model/manufacturer) PCA pumps:



Each sensor (or pump) only needs certification or approval w.r.t. the interface spec. Additionally, the ecosystem can grow without forcing recertification (or re-approval) of previously analyzed devices

.....
Certification or approval relationship

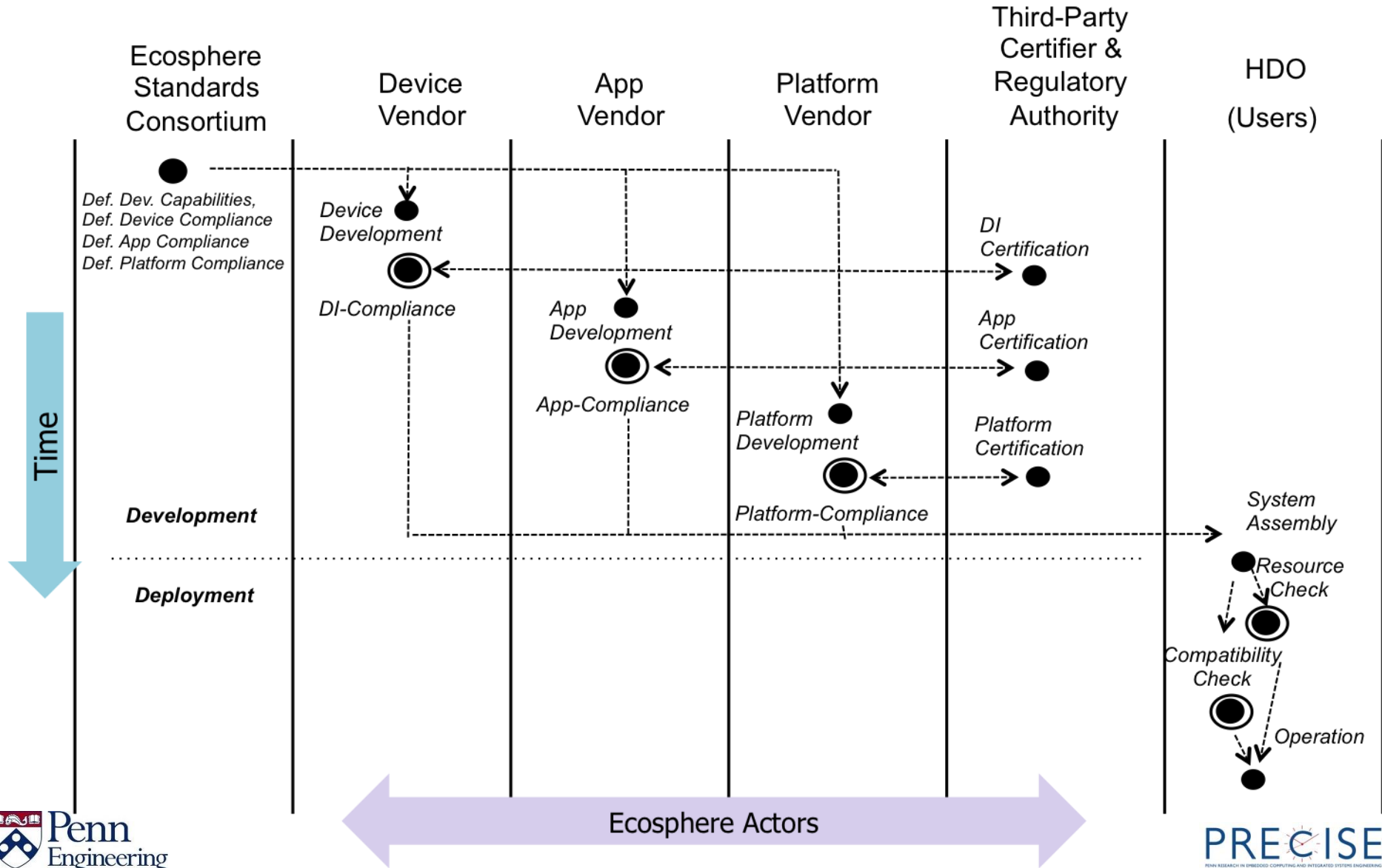
Some Observations ...

- Safety can only be assured by predicting the emergent system behavior
 - Vendors cannot use traditional methods to directly predict a VMD's behavior, because the system does not exist until assembled by hospital users
- Safety requirements for specific clinical scenarios
 - Devices can interact in unexpected ways, creating new hazards for the patient
 - Manufacturers unlikely anticipate safety hazards for all possible clinical scenarios

Platform Approach

- Maintain a curated ecosphere of Devices, Apps, and Platforms
 - **Apps** define “the system”:
 - Implement the clinical scenario algorithm
 - Specify required devices and their required behavior
 - **Devices** specify a formal capabilities model
 - **Platforms** run the applications and facilitate system composition:
 - Ensures apps are only composed with compatible devices
 - Ensures app QoS requirements are met
- How does the ecosphere work?

VMD Ecosphere

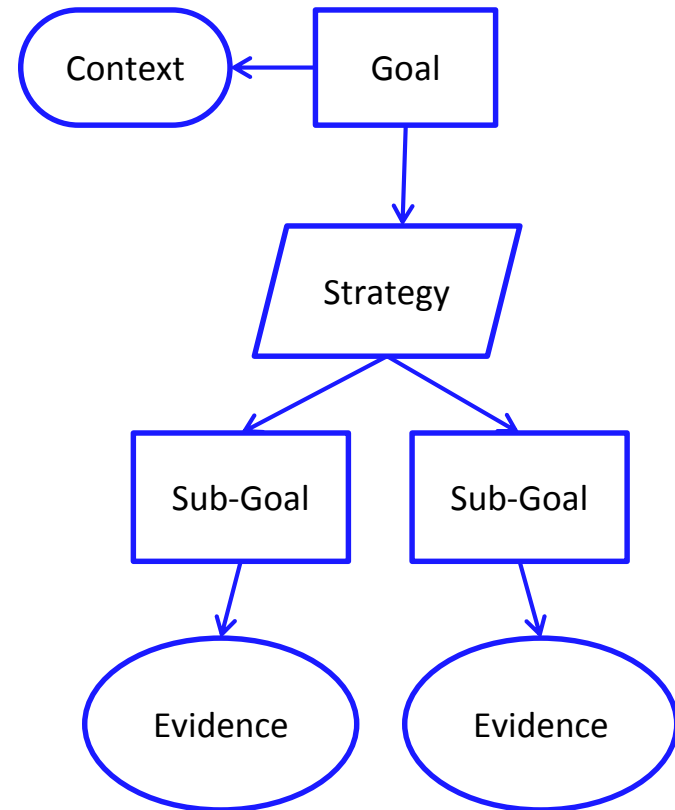


Model-based Safety Reasoning

- Why model-based reasoning (MBR)?
 - Each App defines a set of possible systems, each of which is an allowed combination of medical devices and platforms
 - App vendors would not be able to analyze all possible systems directly since
 - The number of device/platform combinations may be huge
 - New devices may be admitted after the App is certified
- What type of models?
 - Models must capture all the relevant behavior of **allowed** system combinations
 - The suitability of models and their analysis is dependent on:
 - Ecosphere certification/assurance processes
 - Platform quality / capabilities
 - Ecosphere notion of device / app compatibility
 - Intended use of the system
 - The safety properties being checked

Assurance Cases: Motivation

- GSN pattern specification
- Makes App developer justify the models used in the MBR given:
 - The intended use of the application
 - The ecosphere certification and assurance processes
 - Platform capabilities
 - etc.
- Help both regulators and developers identify assurance deficits

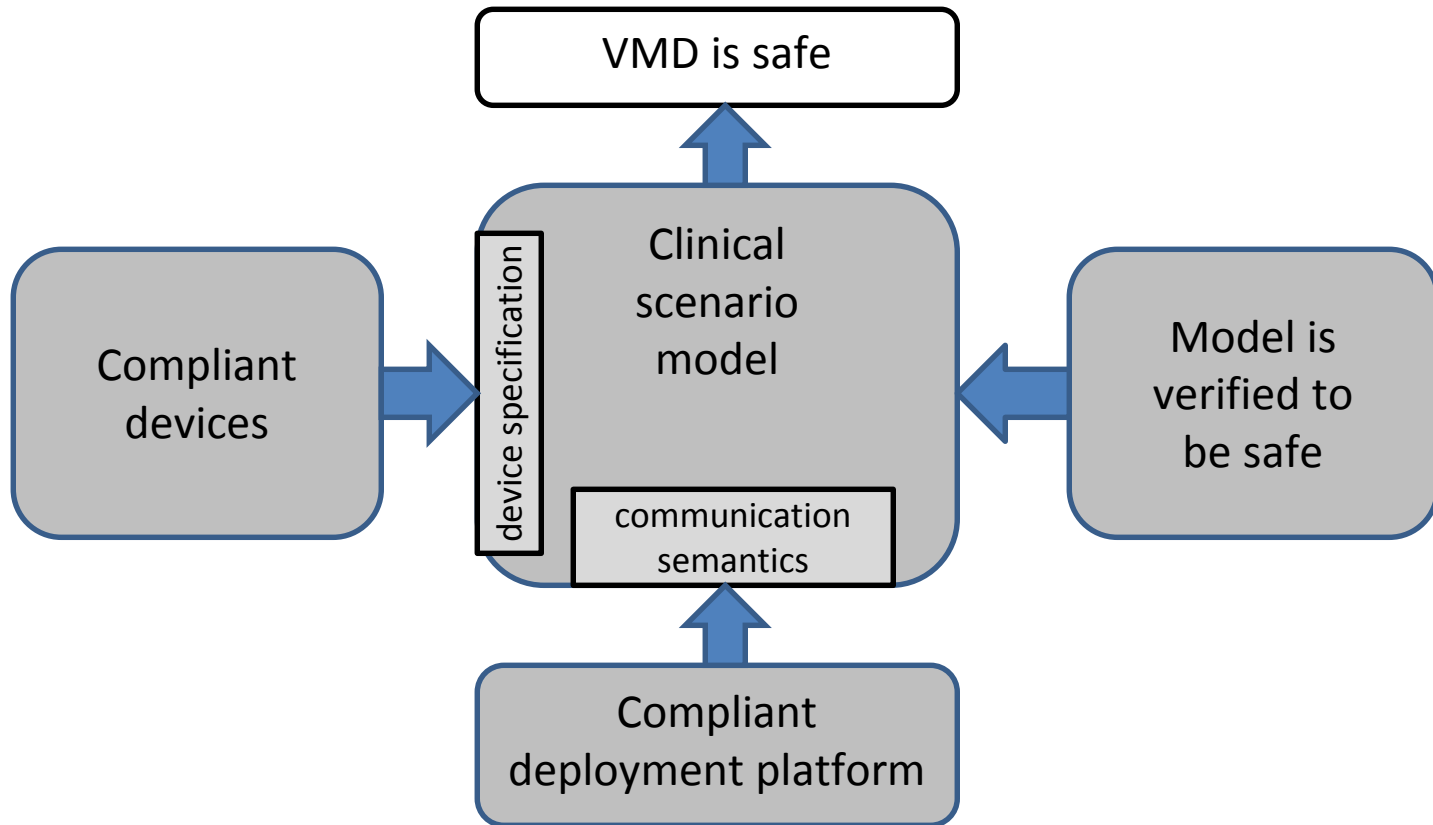


Incremental Assurance Composition

- App vendors need to leverage both
 - safety of individual medical devices, and
 - the assurances provided by the platform eco-system
- ***Goal:*** establish a sound way of combining these safety assurances into an assurance case for the App
- Platform Approach based Argument Strategy
 - Step 1: model-based reasoning
$$A^m \parallel AI_1^m \parallel \dots \parallel AI_n^m \parallel E^m \models \phi$$
 - Step 2: argue why models (for App, devices, and environment) used in Step 1 are adequate
 - Step 3: argue why the assurance provided by any ecosphere compliant platform is sufficient to support the App

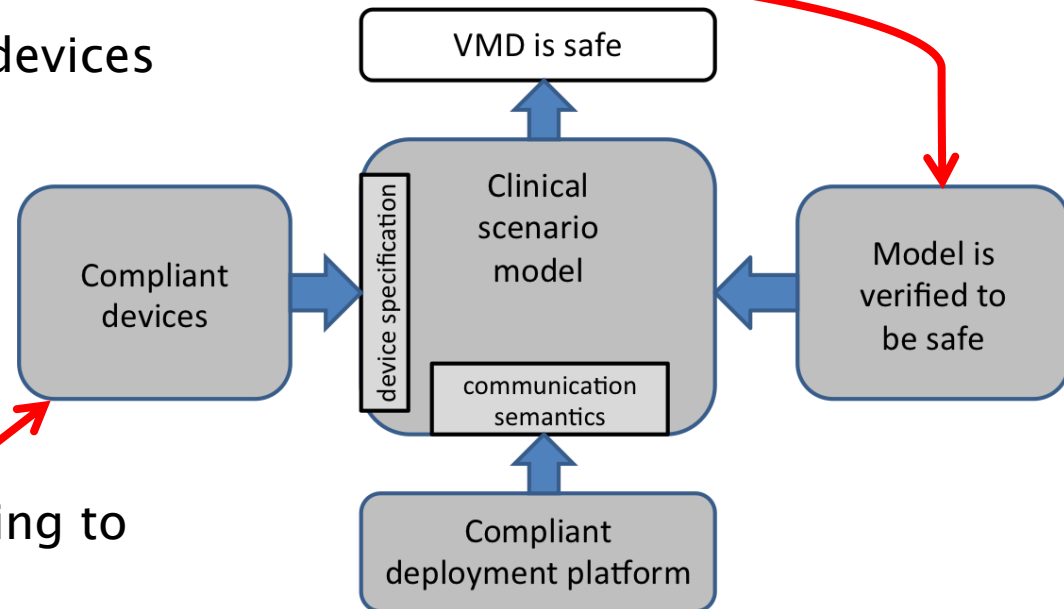
Safety Assurance for Platform Approach

- Model-based analysis at design time
- Validation of modeling assumptions during assembly



Development and Instantiation

- Model the VMD and verify its safety properties
 - Models of constituent devices
 - Scenario logic
- Two assumptions:
 - Devices behave according to their models
 - Execution and communication semantics are guaranteed by the deployment platform



VMD App Modeling Language

- **Modular**
 - Clearly separate device specs from scenario logic
- **Formal**
 - Support verification
- **Modal**
 - Support alternative medical device/implementations
- **On-Demand Checking**
 - Support checking devices at instantiation

Example Architectural Specification

- Devices are specified separately from scenario logic
- Flows can be decorated with quality of service parameters

vmd ClosedLoopPCA

devices

pcaPump : PCA

po : PulseOximeter

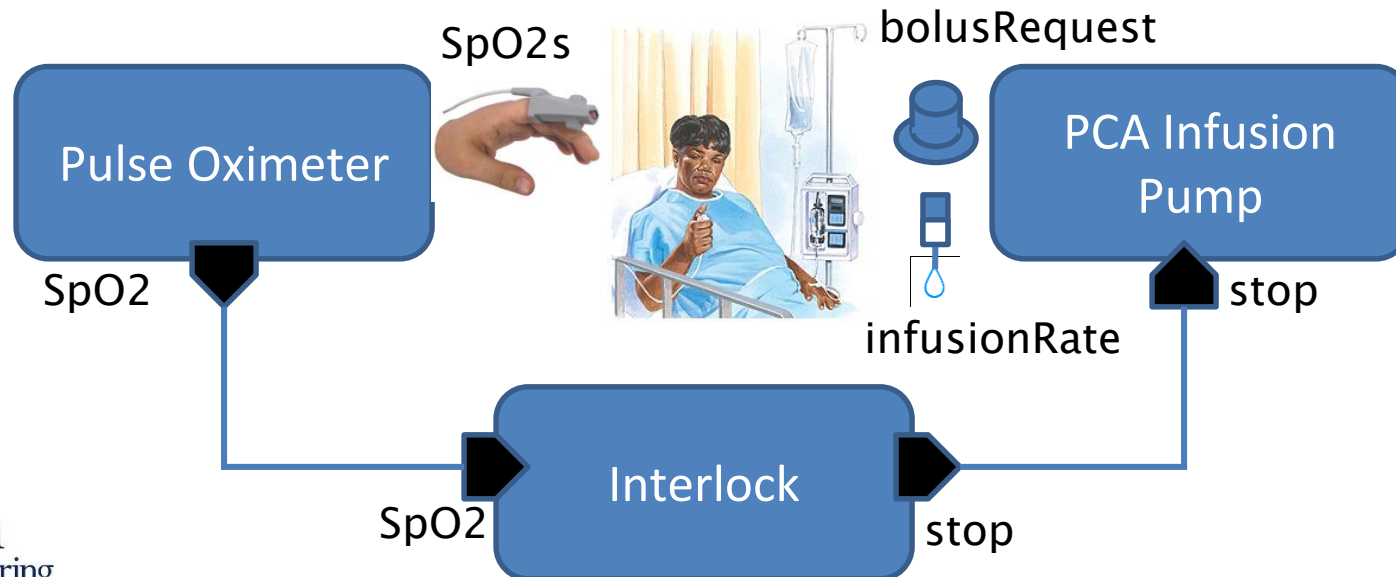
logicmodules

controller : PCATicketGenerator

dataflows

po.SpO2 \rightarrow^{50ms} controller.SpO2

controller.ticket \rightarrow^{100ms} pcaPump.ticket



Example Modal Behavior Specification

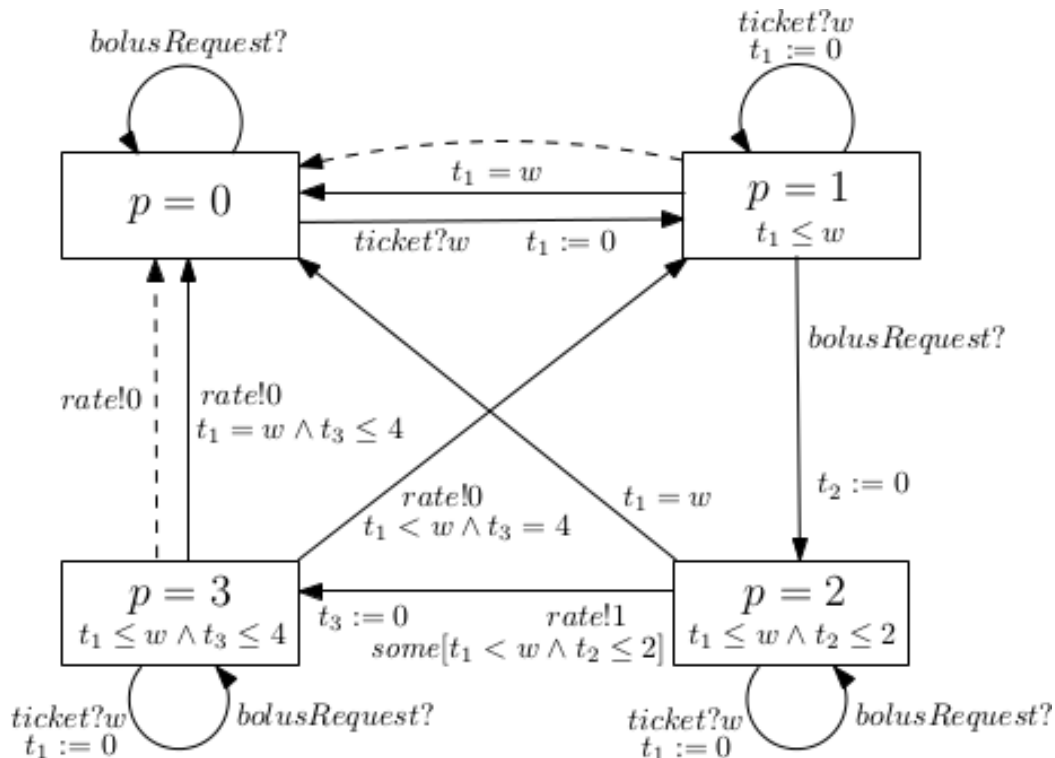
module PCA: device

interface

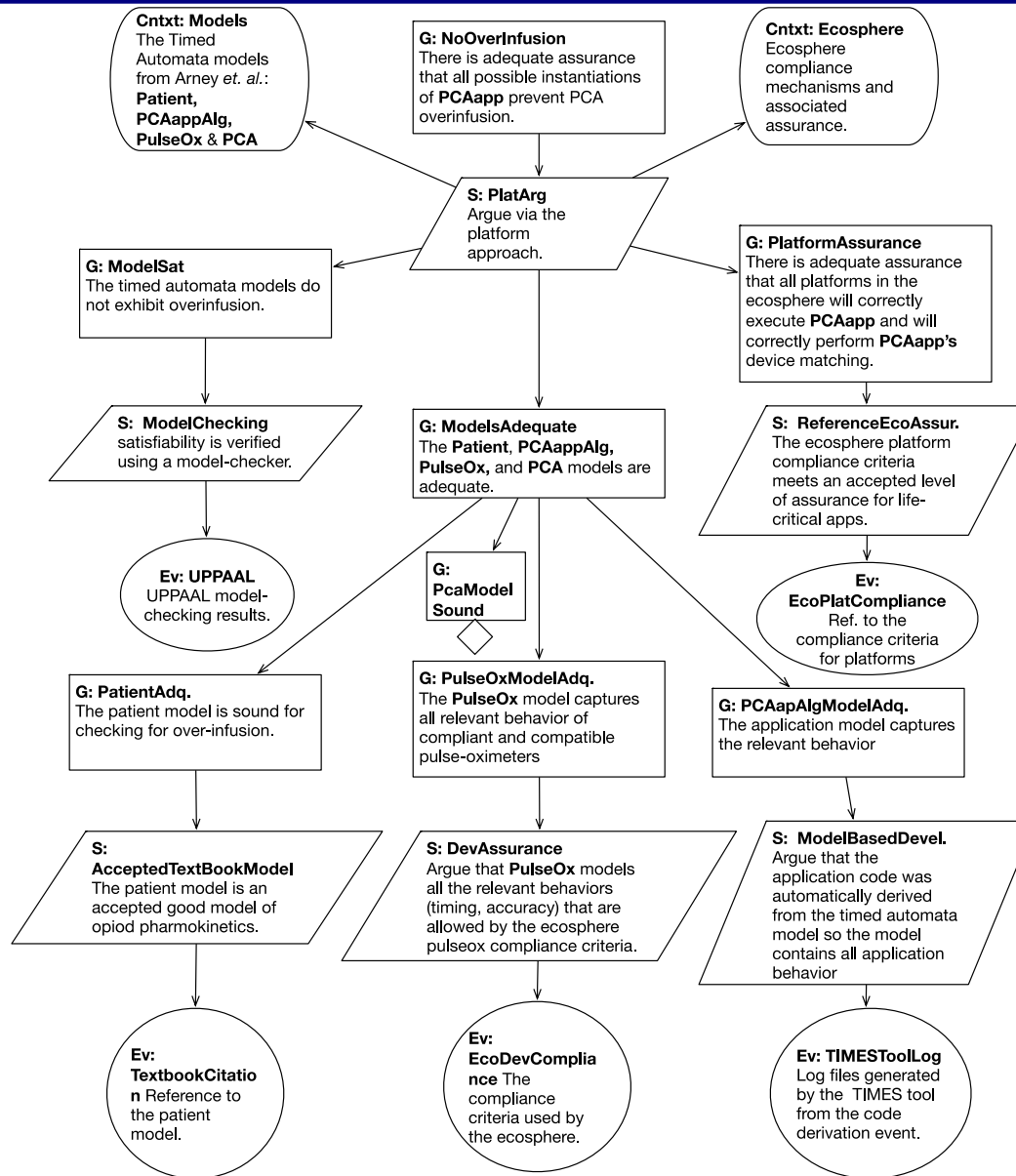
patient input: bolusRequest event

patient output: rate continuous infusionRate[0..2]

network input: ticket event integer[0..300]



Example Assurance Case

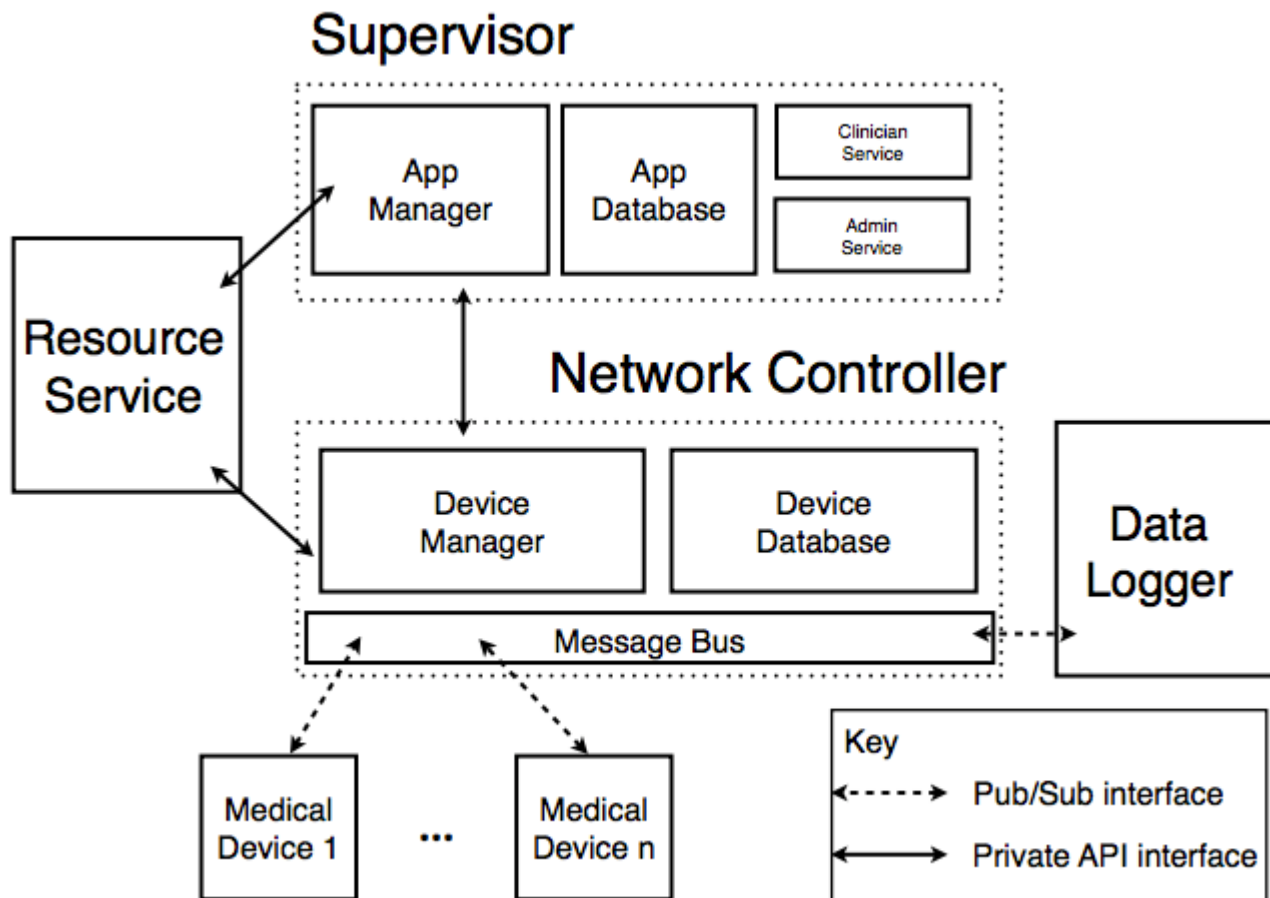


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MAP Architecture

- Builds on ICE ASTM 2761 and IEEE/ISO 11073 manager-mediated communication



MAP Design: Supervisor

- Execution environment for the logic of a VMD
 - Checks compatibility between VMD requirements and devices
 - Orchestrates VMD lifecycle
 - Device / VMD Coupling
 - Operation
 - Exceptions
 - Shutdown
- MDCF, OpenICE
 - Prototype implementations at KSU and MGH/CIMIT

MAP Design: Network Controller

- Provides communications abstraction for VMD
 - Pub / Sub with timing guarantees (end to end latency)
 - Isolation (data/time) between different data-flows
- Admits / Tracks Devices onto network
 - Per device authentication
 - Records device capabilities
- Real-Time Message Bus
 - Prototype at Penn using OpenFlow

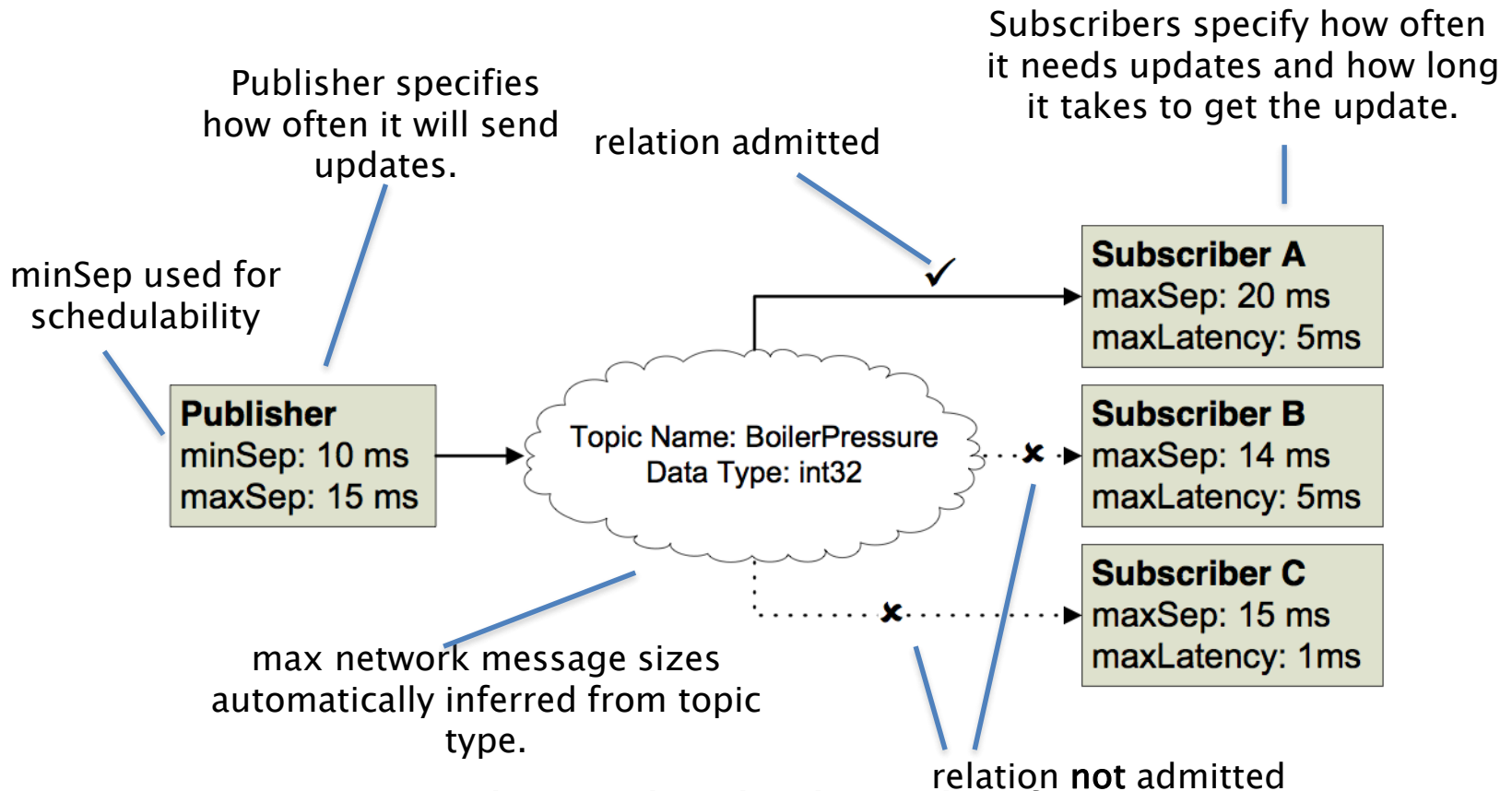
MAP Design: Resource Manager

- VMD's timing characteristics depend on underlying platform.
 - E.g. logical message passing latency between device / app depends on network transmission time and processing time on the supervisor
 - The resource manager must orchestrate resource scheduling (network, CPU, etc) to ensure the logical timing requirements of the VMD are met.

MIDAS: MIDleware ASurance Substrate

- Requirements
 - Dynamic reconfiguration
 - plug in and out of medical devices
 - addition and deletion of clinical Apps
 - QoS isolation, real-time guarantee
 - Security
 - Implementation using Openflow switches

QoS Example



Resource Manager admits pub/sub relationship if:

- The publisher *maxSep* \leq subscriber *maxSep*.
- The resource manager can guarantee the end to end latency.

Summary

- The need for medical device interoperability
 - Improve patient care and safety
 - Increase caregivers' productivity
- Medical device plug-and-play open systems
 - Vendor neutrality based on open medical device interfaces
 - Integrated Clinical Environment (ICE) standard
- Safety assurance for MD PnP systems
 - A new system integration paradigm where traditional safety assurance approaches won't scale
 - Our solution: The Platform Approach
 - Maintain a curated ecosphere of Devices, Apps, and Platforms
 - Propose a new *Safety Assurance Argument Pattern*
 - Define a new App modeling language
 - Prototype implementation of Medical App Platform

Thank You!
Questions?

PRECISE

PENN RESEARCH IN EMBEDDED COMPUTING AND INTEGRATED SYSTEMS ENGINEERING

<http://precise.seas.upenn.edu>