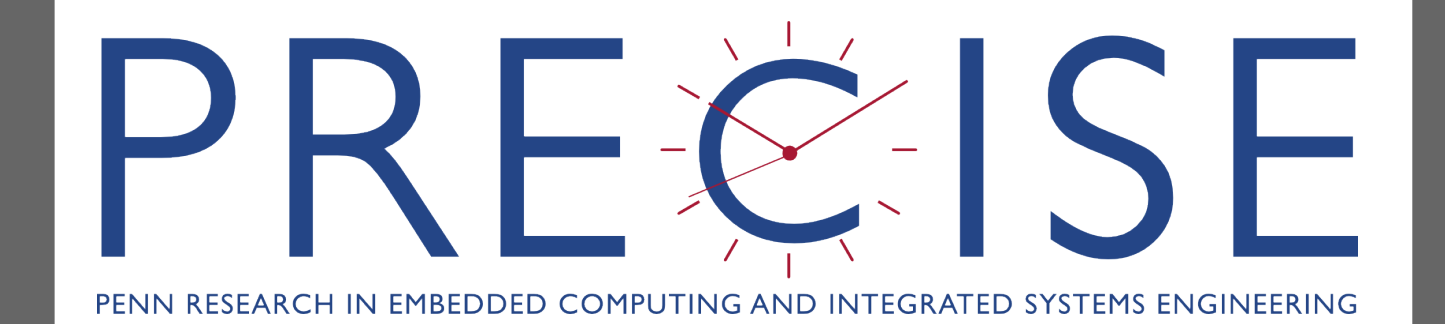


Generic Smart Alarm

Andrew King, Alex Roederer, Sanjian Chen, Philip Asare, Oleg Sokolsky, Insup Lee

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University of Pennsylvania, 3330 Walnut Street, Philadelphia, PA



Problem

In modern hospitals, vital signs are continuously monitored with a variety of medical devices.

Many devices are configured with threshold alarms, which are considerably limited:

- Monitors only raise alarms when the threshold is crossed
- Monitors are oblivious to each other
- Monitors typically don't use patient information to customize alarms
- Monitors do not provide detailed rationale for alarms

Studies have shown up to **75%** of alarms are false positives.¹

57% of false alarms generated by test data were suppressed using GSA.

As a result monitors produce many false alarms, which have been shown to have an adverse affect on patient care.

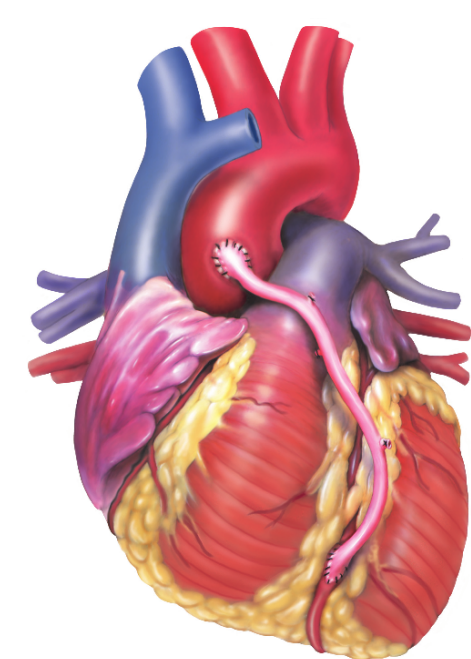
Applications

CABG Smart Alarm

Patients who undergo coronary artery bypass graft (CABG) surgery are high risk post-surgery, in the ICU.²

To mitigate the failures associated with threshold alarms, we implemented a rule-based system which monitors multiple vital signs to distinguish data artifacts from true patient distress.

Combining vital signs in this way produced a 57.13% reduction in the number of false alarms generated without suppressing any true alarms.²



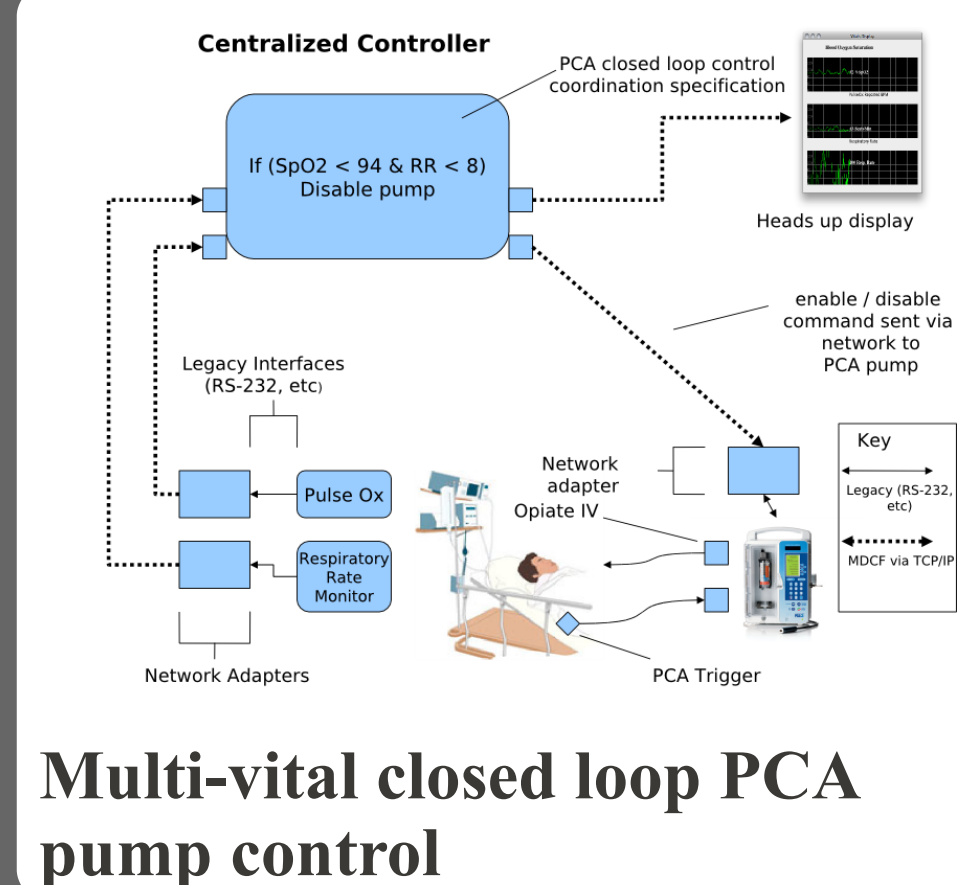
Heart with coronary artery bypass graft.²

Closed Loop Control

Patient Controlled Analgesia pumps increase patient comfort, but are associated with a large number of adverse effects.³

Using multiple vital signs, respiratory depression can be detected.

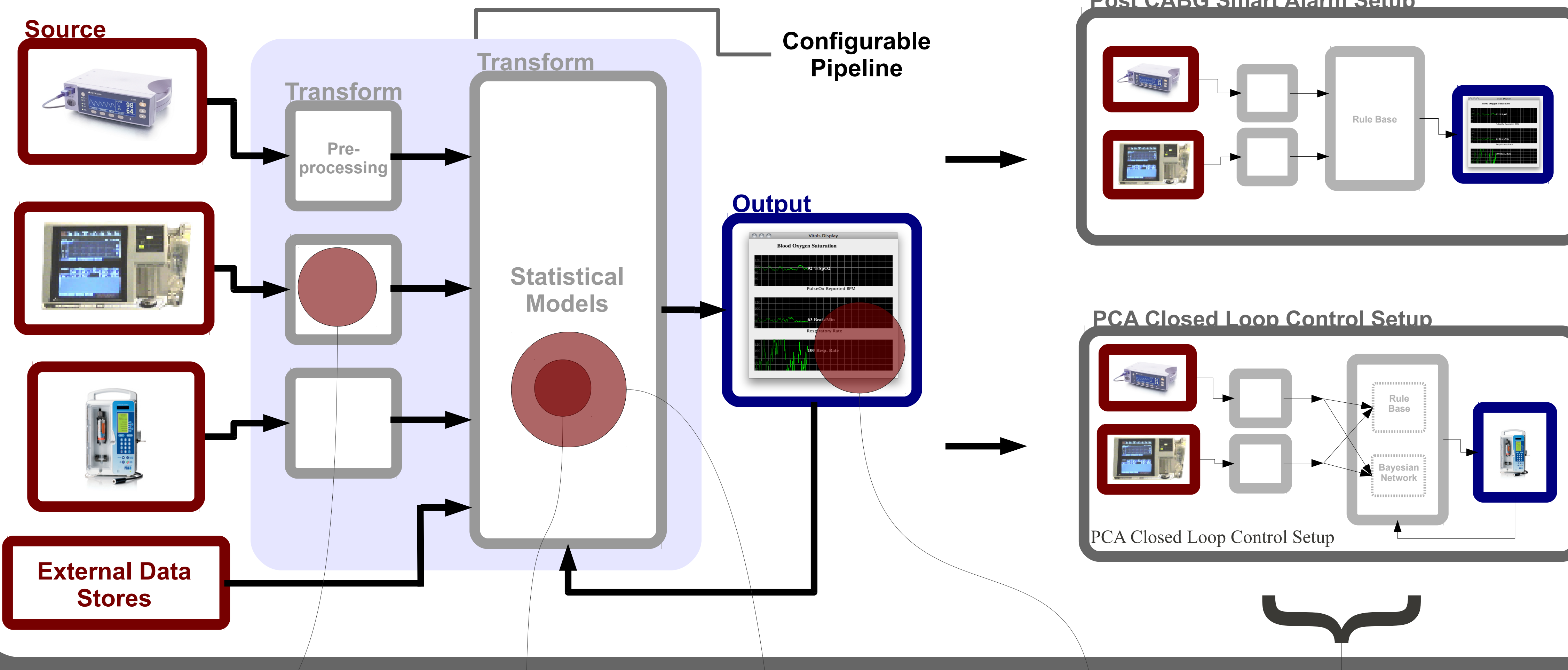
The PCA pump can be disabled for the duration of the distress state.



Multi-vital closed loop PCA pump control

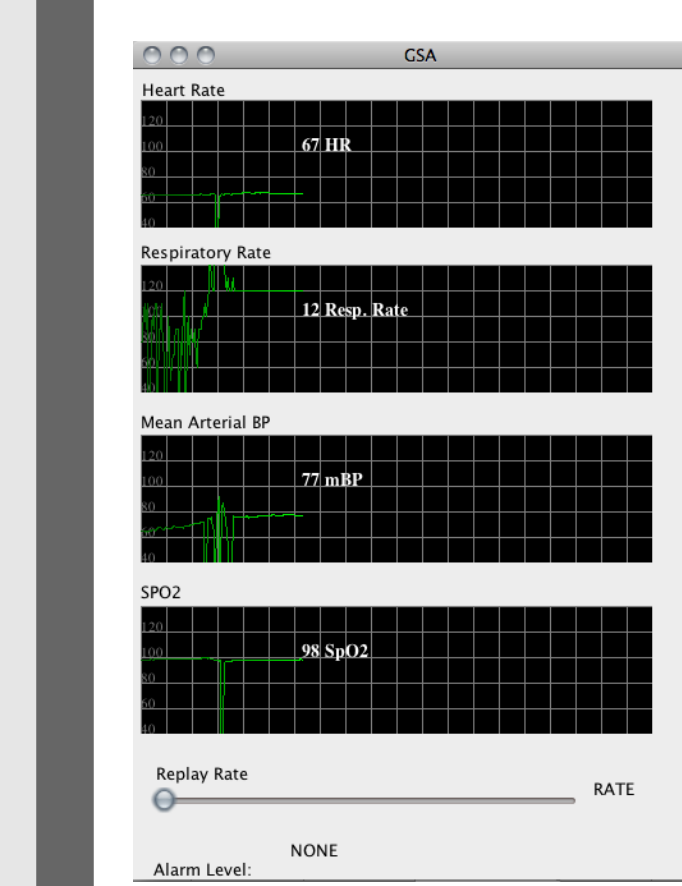
Flexible Architecture

The system is a configurable pipeline of sensing, processing, and output elements. Each configuration can be instantiated on the GSA platform and executed with physical devices, virtual patients, or prerecorded patient data.

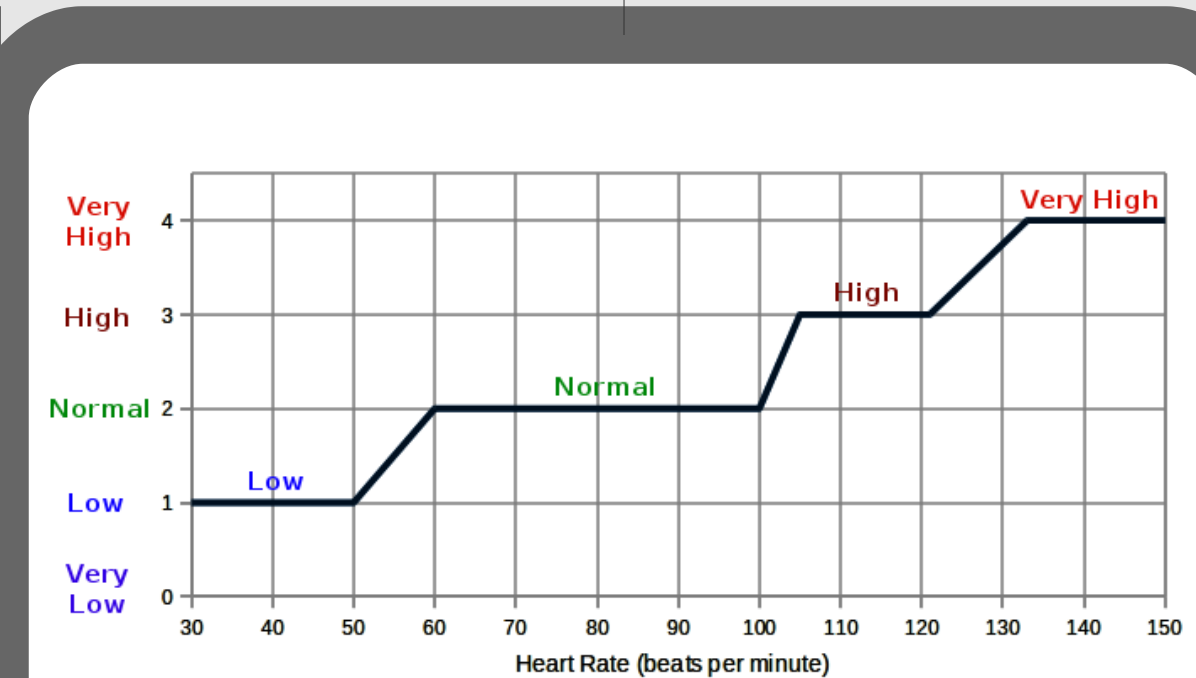


BP	HR	SPO ₂	RR	Alarm Level
Normal	Normal	Normal	Normal	0
High	Normal	Normal	Low	1
High	Low	Normal	Normal	2
Very Low	Normal	Normal	High	3
High	High	Low	High	2

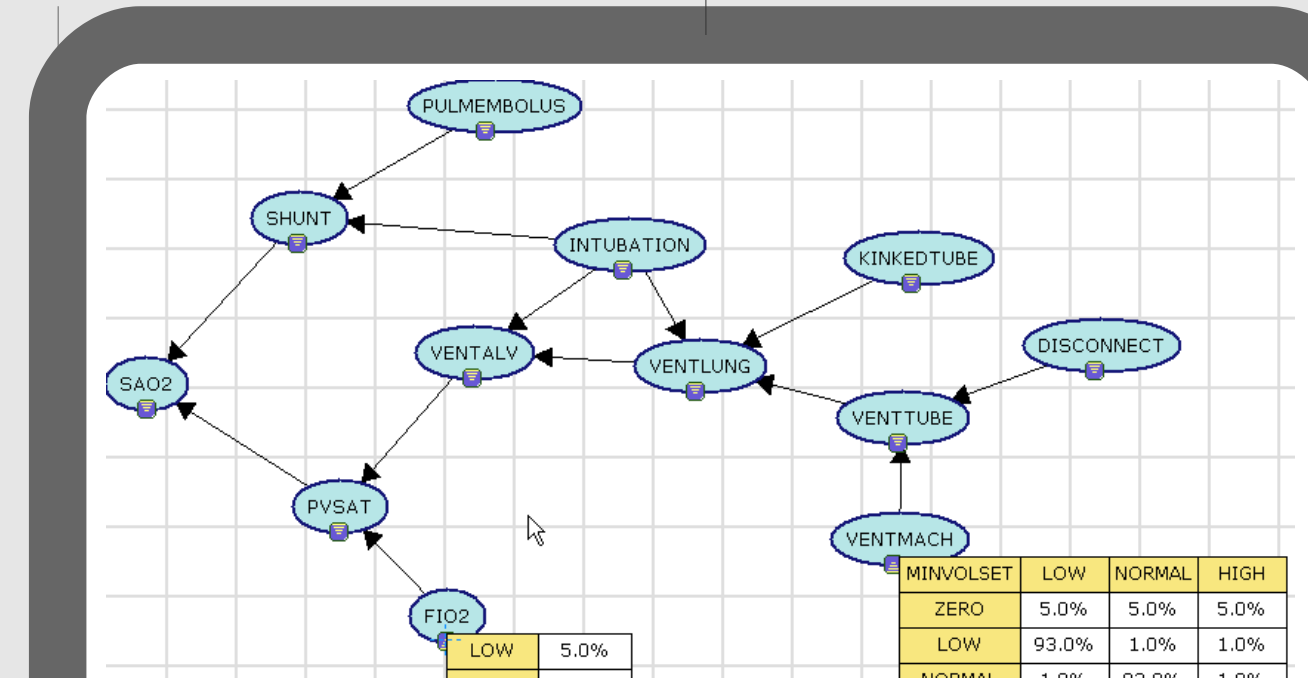
Rule Set: the simplest type of statistical model, used to describe the patient's state; identifies combinations of vital signs which would be cause for concern (based on interviews of medical experts).



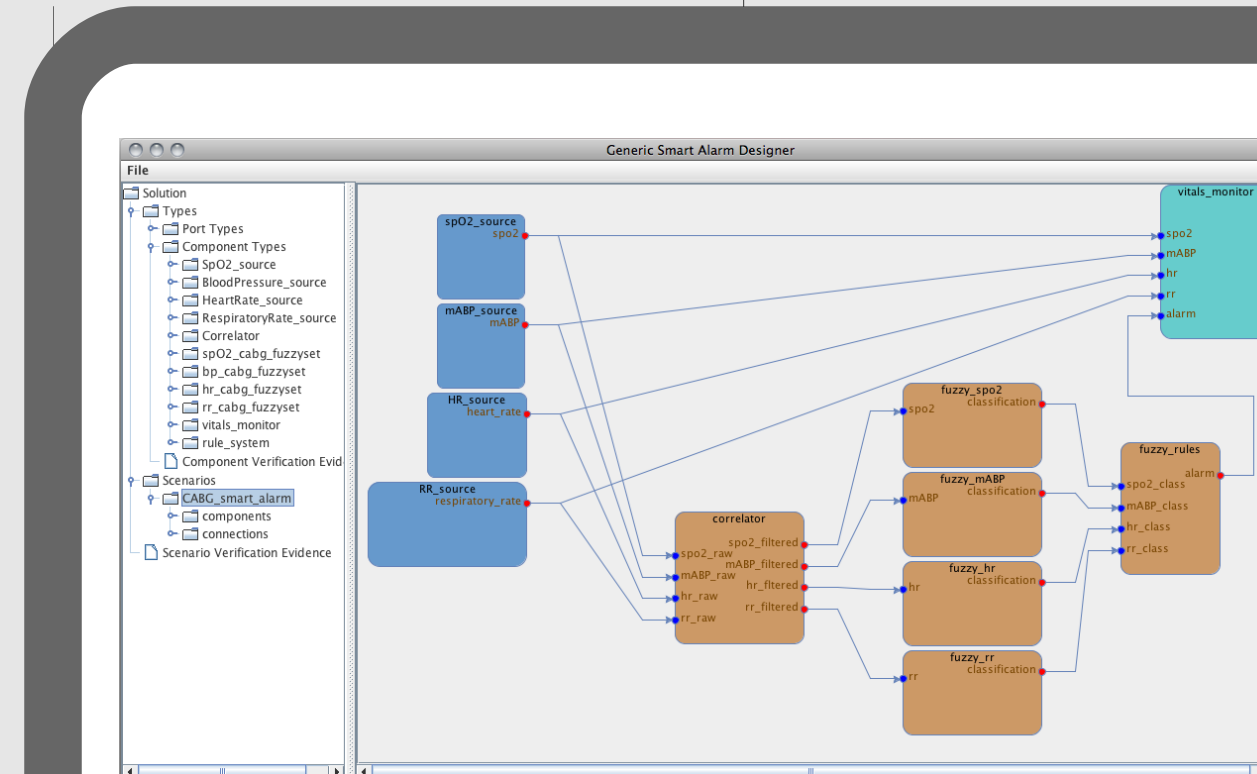
(Figure 3) Output: The components responsible for delivering information to the medical professional, or for relaying an actionable decision message to a medical device.



Preprocessing: Some vital signs require preprocessing for analysis. In this demo, classifiers break continuous vital signs into discrete classes (established through medical expert interviews).



Inference Module: The inference module receives vital sign information, and uses a model or models to perform a useful transformation or answer a question. Here, four vital signs are transformed into an alarm level.

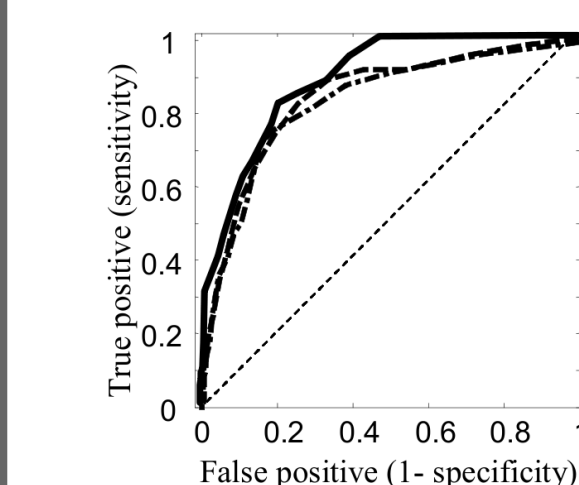


Design: CABG Smart Alarm System modeled in the GSA designer; system models can be exported and instantiated.

Challenges

Interoperability:

- To reduce false alarms, we should use multiple vital signs, from multiple devices.
- Current devices are rarely interoperable.
 - Differing data formats
 - Differing data rates



ROC Curve: It is feasible to compare the performance of multiple models to choose the one with the best performance.

Intelligence:

- Biological complexity makes building patient models difficult. Models would aid in predicting the patient's future state.
- We can approximate models utilizing statistical techniques.
- There are many different techniques. Choosing the right one is difficult.

Interpretation of Data:

- Some data sources are difficult to interpret automatically (e.g. EEG).
- Application of time series analysis or similar will likely be required.

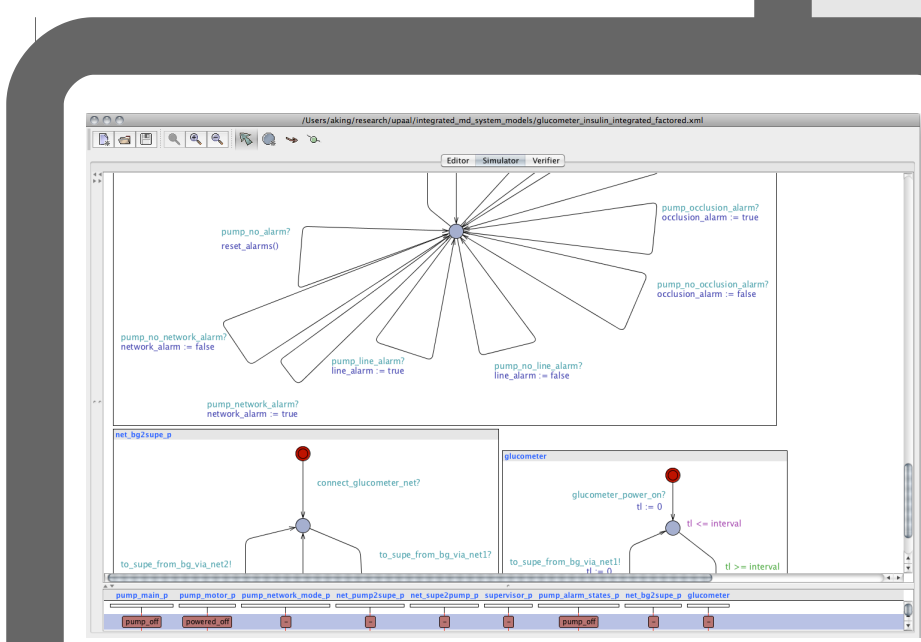
Data Display

- The most effective method to deliver information to medical professionals is unknown.

Validation

Deploy systems on top of a separately validated middleware platform.

- Leverage the middleware's safety
- properties to prove the safety properties of the system.
- Validation can focus on checking:
 - Individual components
 - Coordination scripts
 - Rule set consistency



Model check individual GSA configurations

Simplifies validation procedures

Other Work

Other projects in development utilizing this framework include:

- Clinical decision support for vasospasm detection in subarachnoid hemorrhage patients
- Closed loop insulin control using a diabetic patient model

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- *As a result, monitors produce many false alarms which have been shown to have an adverse affect on patient care.

Applications

CABG Smart Alarm

- Patients who undergo coronary artery bypass graft (CABG) surgery are at high risk for post-surgery, in the ICU.
- To investigate the failures associated with threshold alarms, we implemented a machine-based system which monitors multiple vital signs to distinguish data anomalies from true patient distress.
- By reducing vital signs in this way, we achieved a 57.13% reduction in the number of false alarms generated without suppressing any true alarms.



Heart and coronary artery bypass graft.

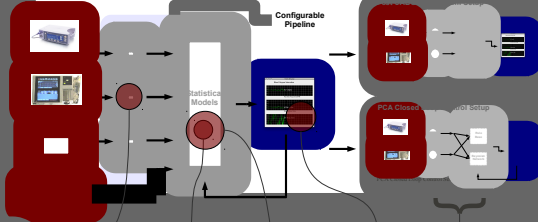
Closed Loop Control

- Patients' Controller devices (e.g. insulin pump) are not connected, but are associated with a large number of adverse effects.
 - Using multiple vital signs, respiratory depression can be detected.
 - Insulin PCA pump can be disabled for the duration of the patient's event.
- Multi-vital closed loop PCA pump control.



Flexible Architecture

The system is a configurable pipeline of sensing, processing, and output elements. Each configuration can be instantiated on the GSA platform and executed with physical devices, virtual patients, or pre-recorded patient data.



HR	HR	SpO2	HR	Alarm Type
Normal	Normal	Normal	Normal	0
High	Normal	Normal	Low	1
High	Low	Normal	Normal	2
High	Normal	Normal	High	3
High	High	High	High	4

Model: Get the simplest type of statistical model used to describe the patient state. Identifies combinations of vital signs (health status) to capture the variance (based on interpretation of medical experts).



Inference Module: The inference module receives vital sign information and uses a model or models to perform a useful transformation or answer a question. Here, four vital signs are transformed into an alarm level.

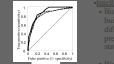
Figure 13: Output from the system, responsible for delivering information to the medical professional for relaying an actionable decision message to the medical device.



Design - CABG Smart Alarm System: models in the GSA diagnostic model can be exported and instantiated.

Challenges

- Interoperability:**
 - To reduce false alarms, we should use multiple vital signs from multiple devices.
 - Current devices are rarely interoperable.
 - Differing data rates.
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- Interpretability:**
 - The signal complexity makes building patient models difficult. Models would be in projecting the patient's future state.
 - We can approximate models using statistical techniques.
 - There are many different techniques. Choosing the right one is difficult.
- Interpretation of Data:**
 - Some data sources are difficult to interpret (e.g. ECG).
 - Application of time series analysis or similar technology is required.
- Deployment:**
 - The most effective method to deliver information to medical professionals is unknown.



ROC Curve: Used to compare the performance of multiple models. We choose the one with the best performance.

Validation

- Deploy systems on top of a separately validated monitoring platform.
- Engage the end-user's safety properties to prove system properties.
- Validation can focus on checking:
 - Individual component coordination.
 - Global system.
- Simplify validation procedures.
- Other projects in development utilizing this framework include:
 - Development of a patient respiratory depression model.
 - Closed loop insulin control using a diabetic patient model.



Model check individual GSA configurations.