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PATIENT DATA MANAGEMENT SYSTEM IN INTENSIVE CARE UNIT (ICU) USING LABVIEW

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ABSTRACT

This paper proposes a new system that takes the benefits of data flow technology. Its objective is to collect the data from monitoring system in the intensive care unit (ICU) and store that data for further analysis. Then it will be available for medical personnel to analyze data and take the suitable medication for patients. In fact, the monitoring system in intensive care unit provides a large amount of data quickly and continuously. Most units operate with a very limited storage capacity which can make the data available for a limited time. To avoid losing data, a medical staff monitors the parameters after some interval of time and then stores them using the computer in past years. However, decisions made by doctors may be influenced by the level of consistency of the data. In some cases, these decisions can be inaccurate especially if important information is not stored and ignored. Our proposed system improves the quality of treatment followed by real-time monitoring data. It collects and stores all data from monitoring devices, avoiding the loss of important information. The new system will make the data available for medical staff to provide better care for patients.

KEYWORDS: Patient monitoring system, intensive care units, data flow technology, LabVIEW.

INTRODUCTION

Because of the growth of technologies the large amount of data creates complexities of data so the medical informatics is attracting much attention [1]. To obtain the essential and major information of patients, various medical devices was used. We can cite the sensors and network systems of health information producing speed and continuous data flows. Unfortunately, this high flow of data is difficult to study, save and operate. It becomes essential to develop intelligent monitoring algorithms to obtain the real data from patients. These medical data reflect a real knowledge that can be used to assess monitoring models. To improve the quality of medical services in the intensive care unit (ICU), new technologies using computers have been widely used. ICU is a data intensive environment. It has a large amount of continuous data produced by the monitoring devices. Medical data flow is the result of the measurement of physiological parameters monitored from the patient such as blood pressure, heart rate, and pressure rate. However, most devices operate without memory or uses relational database [2]. The multi-parameter monitoring system can be cited which are not competent to manage the large amount of monitoring data. Outraged, physicians should rewrite data by using another system that delaying appropriate decisions in real time. Also, make perfect decisions; we need a high security and accurate data. New solutions are needed to manage, process ongoing flow of information and provide efficient and support tools for the reliable decision. The wide use of such monitoring devices is in the ICU. It is designed to enable the physicians to be alerted the condition of their patients. Thus, the medical staff needs a new system which ensures continuous monitoring of patients. In order to provide a better way for managing data flow and improve data quality, we have integrated a data flow technology to collect and store data from the monitoring system. Besides, the new monitoring system will help the medical staff in their works by provide better care to patients from anywhere at any time [3]. The majority of the data collected by existing monitoring systems crashed and lost for forever after being stored locally for a few hours by monitoring Devices [4] .By applying real-time analysis of the



physiological data collected and Stored from monitoring devices, our proposal overcomes the limitations of current systems. In addition, it offers to medical staff to record the electronic medical records and efficient patient management system.

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The rest of the paper is structured as follows: Section 2 gives an overview of the monitoring system and describes the structure of data in ICU. Section 3 explains the data stream technology. Section 4 presents with details our proposed system that manages the monitored data using data stream technology. Section 5 reports the experiments. Section 6 concludes the paper.

PATIENT MONITORING SYSTEM AND DATA MANAGEMENT IN ICU

Patients monitoring systems represent various devices used to supervise patients. The first approach of monitoring patients started with the work done by Sanatoria in 1625 that was measuring the body temperature and blood pressure [5].Data generated by monitoring devices are characterized by being continuous, multiple, and arriving rapidly. However, the majority of these monitoring systems have not enough memory capacity to save measured data continuously and to collect stream data each time. This problem of memory capacity [6] makes the storage and interpretation of data more difficult and complicate. There are many proposed works that have tried to improve the current monitoring system. We can mention the digital signal processing [7] where authors presented a clinical validation study for two recently developed on line signal filters, the trend extraction methodology [8], [9] expressing the time evolution of a signal, the monitoring systems based on machine learning techniques [10], [11] that aim to detect the normal and critical states of patients. Today, medical staff needs to collect important data to make the best decision and give the appropriate medicine. Based on a study made in [12], 13% of the total information used by doctors in the treatment of patients is taken from monitoring system. These help doctors to take their decisions. This fact proves the need of this information and their importance when making decisions at real time. The main problem of the current monitoring system is the risk of losing important information when not all data are stored. The main cause of this risk is the collection of data each time interval and not continuously [13]. Missing data reporting critical states of patients in ICU can cause serious problems and make the doctor's decision inaccurate. It can even threat the patient life when not taking the necessarily treatment. In addition, the monitoring system has to allow the medical staff to be mobile [14]. Doctors should measure and collect data at any time without losing any important information relative to the patient states. Besides, they could have all the current charts and data ready. In order to avoid these issues, the monitoring system has to be improved. To this end, we propose a new system based on data stream technology. This latter makes it possible to collect, store, and represent measured data as long as the doctors need them. The following section describes this technology.

DATA STREAM TECHNOLOGIES

The innovations made on the management systems to improve the storage and manipulation of databases have not been stopped since 1970. Now, we have a new mode of data which is the dynamic (stream) data [15]. Compared to static data, the stream data is very large and continuously in time. Data stream technology is needed in many fields. As follows brief descriptions of data stream technology developed using the software labview (Laboratory Virtual Instrumentation Engineering Workbench). To collect, store and analyze the produced data; we have used a powerful tool which consists of the software LabVIEW [16]. From the main advantages of this software, we can mention its ability to communicate with different brands of bedside monitors and obtain physiological data. LabVIEW is used as an integrating platform for the acquisition, processing and transmitting of the physiological data. Actually, this software presents an excellent graphical programming environment to develop sophisticated measurement, test, and control systems using intuitive graphical icons and wires that resemble a flowchart. The software also includes number of advanced mathematics blocks for functions such as integration, filter, and other specialized capabilities. LabVIEW professional development system allows creating stand-alone executables. The resultant executable can be distributed an unlimited number of times. The run-time engine and its libraries can be provided freely along with the executable. Therefore, by using it in our system, LabVIEW software allows collecting the data from monitoring devices and considers all measured medical parameters.

PATIENT DATA MANAGEMENT IN ICU BASED ON DATA STREAM TECHNOLOGY

Our main interest in this paper is to overcome the numerous issues of the current monitoring system. In fact, our new system stores all data that are directly collected from monitoring devices. We need physiological measurements or



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signals provided after the monitoring of patients. We need to know what is going on with the patient when these measurements become available. Thus, data sets are containing all and high quality of patient's data is the key of the development of intelligent patient monitoring systems. In real-world, each monitoring system has its own platform, operating system, and network. We have focused on a specific type of monitoring system. It is IntelliVue MP60/MP70; it was manufactured by Philips brand. In addition to design and develop our new system and we have collaborated with a public pediatric hospital Bechir Hamza in Tunisia. Our intelligent monitoring system based on data stream technology will facilitate the doctor tasks (i.e. the treatment of the collected data and making the right decisions). Our proposed system has enough computational power to receive data, store them into databases, and then simultaneously analyze them. Our system is divided into three main functions detailed in Fig. 1. They consist of the physiological data collection, the recording data, and the data presentation. We detail these functions in the following subsections.

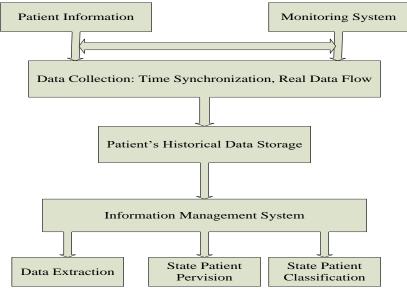


Figure 1. The Main Structure of the Proposed System

Data Acquisition

Data acquisition is an essential step in the development and evaluation of patient monitoring system. This function takes as input analogical signal relative to patient generated by monitoring devices. Then, it converts them to numerical data. After this step, data become ready to be store in structured databases.

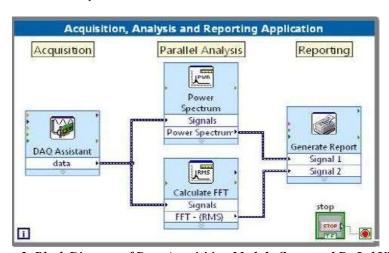


Figure 2. Block Diagram of Data Acquisition Module Generated By LabVIEW



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There are two possibilities to acquire data. The first one consists of the transfer of data from a file from Multiparameter Intelligent Monitoring for Intensive Care (MIMICII) database [17]. This latter has been used for the test of
our proposed system. The second possibility is to sample data and acquire them by a programmable hardware. We
have developed a method that assures the sampling and the acquisition of data in order to evaluate our system and test
it in hospitals. The acquired signals are made available by the Data Acquisition (DAQ) user interface in labview for
further analysis that can be designed in the block diagram panel. Fig. 2 shows a block diagram of data acquisition
module generated by LabVIEW.

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Data Recording

The database is designed using Oracle Stream which is one from the most powerful databases management system (DBMS). By configuring specific capabilities of Oracle Streams, it can automatically propagate the information to other databases or applications. Fig. 3 shows the Synchronization and collection of physiological data from monitoring system.

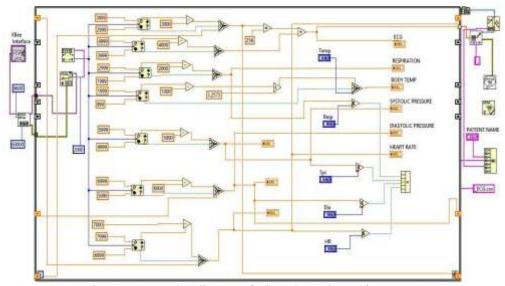


Figure 3. Synchronization and Collection of Physiological Data from Monitoring System

The string variable named 'COMPLETE ECG' is written to a spread sheet using 'Write to Spreadsheet File.vi'. The block diagram of the spread sheet writing section is shown in Fig. 4and data is generated as per the Fig. 3.

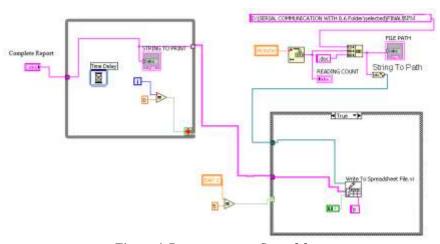


Figure 4. Data storage on Spreadsheet



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Data Presentation

We use the report generation toolkit available in LabVIEW. It is a real time patient record containing basic patient information such as name, age, gender and clinical information such as temperature, spo2, and heart rate. Fig. 4 shows the report and the chart generated by our new system. We can consult and analyze this output from any computer and at any time.

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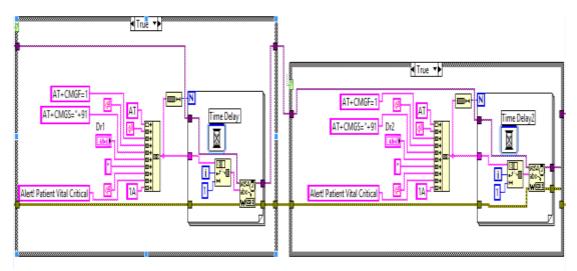


Figure 5. Data presentation

EXPERIMENTATION

The Framework

The system is tested using real data from MIMICII database taken from Physiobank [8]. This database contains data from hem dynamically unstable patients hospitalized in 1996 in ICU of the cardiology division in the Teaching Hospital of Harvard Medical School. Table 1 details the used real-world databases, where Attributes and Instances denote respectively the total number of measured parameters and the total number of instances for a specific database.

Table 1. Description of the Used Data Sets

Database	Attributes	Instances
Patient1	6	4101
Patient2	8	42188
Patient3	8	42188
Patient4	7	42188
Patient5	9	42188
Patient6	9	5350
Patient7	7	11300
Patient8	7	10600
Patient9	12	5700
Patient10	5	42188

Different patients were monitored for different sets of physiological parameters. Some parameters, such as heart rate, were measured in every patient, while others were measured only in some patients. Table 2 lists the monitored parameters according to how frequently they were measured. To configure, acquire and store data from devices, we have used labview software [8] which is very powerful when it is used for the acquisition of data using DAQ (Data Acquisition) applications. DAQ hardware acts as the interface between the computer and the monitor. Its principal function consists of converting analog signals to digital signal so that the computer can interpret them.

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We have used LabVIEW to realize the following functions in our system.

- Acquiring signals from real-world (using monitoring system).
- Digitizing the signals.
- Analyzing, presenting, and saving data.

Fig. 5 describes the main functions proposed by the software LabVIEW.



Figure 5. Signal Flow Chart of DAQ System

Physiological Data flows from Monitoring System in Intensive Care Unit.

Parameters	Acronyms
Heart Rate	HR
Oxygen Saturation	SpO2
Non-Invasive Blood Pressure	NBP
Respiratory Rate	RESP

Table 2. The Monitored Parameters

Discussion

The proposed monitoring system provides many advantages and improvements in intensive care unit. On one hand, it allows the acquisition of large amount of data stream and hence, important knowledge relative to the patients' states. It also guarantees the storage of data coming continuously and rapidly from the medical devices to well describe the monitored parameters. On the other hand, the proposed system offers the possibility to better analyze the measured parameters and to specify the need of each patient. As results, our proposal is considered as a very suitable system in nursing centers and hospitals and it can even replace the medical staff. In addition, the new system provides better health care to people at any time and anywhere.

Furthermore, by using the high technology in the software LabVIEW, our new system is able to easily connect to another monitor system. To test and prove the performance gain of our proposal, we have collaborated with a hospital. Our system is connected to the current monitoring system and it is under evaluation. It collects data from the monitoring system, store them, and represent medical parameters using numerical and graphical models.

Using this system, we are able to collect a set of annotated physiological data with more certainty in data correlation than previous studies. Besides, it can be easily backed up or restored. The data storage format also allows an easy access during both prospective and retrospective data analysis. In addition, a printable patient report describing the patient state with details can be generated at any time when it is needed.



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To conclude, our proposed monitoring system takes advantages of data stream technology and offers important services to medical staff. It is characterized by providing measured data (medical parameters) when it is needed by doctors which facilitates making right decision. In addition, medical staff can easily find medical records of patient. There is no loss or change of medical information. Furthermore, there is no waste of time; a life of patient can depend on the time of taking drugs. As a result, any needed information about a monitored patient should be available at real time. This is what the proposed system guarantees. Besides, it allows doctors to read and interpret medical data once they find them in the new system.

CONCLUSION

In this paper, we have proposed a new patient monitoring system able to acquire, store and present data to medical staff. This system is able to independently operate and it can replace, in some cases, the medical staff in nursing centers. Besides, it provides a good environment for the patients by offering an efficient monitoring and the adequate treatment. These improvements made in the monitoring system prove the ability of the data stream technology to handle real and large data. We can conclude that data stream technology can help medical staff to easily work in order to take the best decision at the best time.

As future work, our aim is to use a predefined query to plot chart and give information to medical staff in time. Besides, joining many devices in the same time, for example, the patient monitoring system and the ventilator can be realized.

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