

Module Interface Specification for CXR

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2 Symbols, Abbreviations and Acronyms

Symbol	Description
SRS	Software Requirements Specification
AI	Artificial Intelligence
CNN	Convolutional Neural Network
DICOM	Digital Imaging and Communications in Medicine
IVDDs	In Vitro Diagnostic Devices
ML	Machine Learning
PACS	Picture Archiving and Communication System
SaMD	Software as a Medical Device
ROC	Receiver Operating Characteristic Curve
SLA	Service-Level Agreement
FR	Functional Requirement
NFR	Non-Functional Requirement
FSM	Finite State Machine
CXR	Chest X-Ray Project
POC	Proof of Concept
TM	Theoretical Model
AWS	Amazon Web Services
ECS	Elastic Container Service
ECR	Elastic Container Registry

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3 Introduction

The following document provides an in-depth look at the Module Interface Specifications (MIS) for the Chest X-ray (CXR) application. These specifications outline how each module is structured and how they interact with one another. A broader architectural perspective is offered in the accompanying Module Guide. For the complete project documentation and source code, please visit the official GitHub repository: [CXR-Capstone](#).

4 Notation

The structure of the MIS for modules comes from [Hoffman and Strooper \(1995\)](#). The mathematical notation follows standard conventions for sets, sequences, and functions. The notation includes symbols for ML model operations and medical data processing.

Data Type	Notation	Description
character	char	a single symbol or digit
integer	\mathbb{Z}	a number without a fractional component in $(-\infty, \infty)$
natural number	\mathbb{N}	a number without a fractional component in $[1, \infty)$
real	\mathbb{R}	any number in $(-\infty, \infty)$
tensor	\mathbb{T}^n	an n-dimensional array of numerical values used for ML computations
probability	\mathbb{P}	a real number in $[0, 1]$ representing likelihood
matrix	$\mathbb{M}_{m,n}$	a 2D array of size $m \times n$ containing numerical values
binary	\mathbb{B}	boolean values true, false

For detailed mathematical notations and specifications, please refer to the [SRS](#) document ([Jodeiri et al., 2024](#)).

4.1 Data Types from Libraries

Data Type	Notation	Description
DICOM	DICOM	Digital Imaging and Communications in Medicine format, standard for medical imaging storage and transmission
PyTorch Tensor	<code>torch.Tensor</code>	Multi-dimensional matrix containing elements of a single data type, optimized for GPU operations
NumPy Array	<code>np.ndarray</code>	Multi-dimensional array for scientific computing and image processing
HTTP Request	<code>HTTPRequest</code>	Object containing HTTP request information including headers, body, and method
HTTP Response	<code>HTTPResponse</code>	Object containing HTTP response information including status code, headers, and body
DataFrame	<code>pd.DataFrame</code>	2-dimensional labeled data structure for patient and medical records
JSON	JSON	JavaScript Object Notation, lightweight data interchange format

Table 1: Data types from libraries

5 Module Decomposition

The following table is taken directly from the Module Guide document for this project.

Level 1	Level 2
Hardware-Hiding Module	Web Application
	HTTP Server
	Disease Prediction Server
	Disease Progression Server
Behaviour-Hiding Module	User Authentication
	Patients List View
	Patient Overview View
	Disease Progression View
	Medical Records List View
	X-Ray Report View
Software Decision Module	Disease Progression Model
	Disease Prediction Model
	Medical Record Management
	Data Persistent

Table 2: Module Hierarchy

6 Web Application Server Module

Note: This is being handled by React server

6.1 Other Modules the Current Module Uses

- M2: HTTP Server Module

6.2 State Variables

- **navigate**: Stores the navigation state of the page.

6.3 Exported Constants and Access Programs

6.3.1 Exported Access Programs

Name	In	Out	Exceptions
App	User Action: $\langle T \rangle$	React.components: HTML & Javascript	N/A

6.3.2 Exported Constants

- N/A

6.4 Environment Variables

- N/A

6.5 Assumptions

- Assumes the HTTP Server Module (M2) is properly configured and running.

6.6 Access Routine Semantics

6.6.1 App(User Action)

- **Transition**: Accepts user interaction or actions.
- **Output**: Produces the corresponding HTML & Javascript page for rendering.

6.7 Local Functions

- N/A

7 HTTP Server Module

7.1 Other Modules the Current Module Uses

- M5: User Authentication Module
- M8: Disease Progression Module
- M10: Medical Record Module

7.2 State Variables

- **CORS_setting**: holds Cross-Origin Resource Sharing settings to only allows web application server to access resources.
- **runtime.IdentityProvider**: A class that represents **User Authentication Module**
- **runtime.MedicalRecordService**: A class that represents **Medical Record Module**
- **runtime.ProgressionService**: A class that represents **Disease Progression Module**

7.3 Exported Constants and Access Programs

7.3.1 Exported Access Programs

Name	In	Out	Exceptions
sign_up_user	user_email: string, password: string, user_detail: JSON	user: user	Unauthorized, UserAlreadyExists, InternalServerError
sign_in_user	user_email: string, password: string	bearer_token: string	Unauthorized, IncorrectCredentials, InternalServerError
get_self_user	bearer_token: string	user: user	Unauthorized, InternalServerError
get_user_by_id	uuid: string	user: user	Unauthorized, UserNotFound, InternalServerError
update_user_by_id	uuid: string, updated_user_json: JSON	user: user	Unauthorized, UserNotFound, InternalServerError

7.3.2 Exported Constants

- N/A

7.4 Environment Variables

- **FRONTEND_URL**: URL of front-end service, must be known at build time to enable CORS policy for front-end.

7.5 Assumptions

- N/A

7.6 Access Routine Semantics

7.6.1 `health_check()`

- **Inputs**: None
- **Outputs**: 200 OK response or 500 `InternalServerError`
- **Preconditions**: The server can be at any states
- **Postconditions**: If the server returns 200 OK, all modules that this module, and it's child modules are working as expected.

7.6.2 `sign_in()`, `sign_up()`, `get_user_by_id()`, `update_user_by_id()`

- Existing routines from **User Authentication Module** that are made available for web application server to interact with via HTTP.

7.6.3 `paginated_records_by_userId()`, `handle_record_by_id()`, `create_new_record()`, `paginated_prescriptions_by_recordId()`, `handle_prescription_by_id()`, `create_new_prescription()`

- Existing routines from **Medical Record Module** that are made available for web application server to interact with via HTTP.

7.6.4 `get_progression_report()`

- Existing routine from **Disease Progression Module** that are made available for web application server to interact with via HTTP.

7.7 Local Functions

- **handle_exception(e)**: Return HTTP error as JSON objects when exceptions occurs, instead of default HTML page of Flask.

8 Disease Prediction Server Module

8.1 Other Modules the Current Module Uses

- M14: Data Persistence Module

8.2 State Variables

- **model**: The pre-trained model from `torchxrayvision` used for predicting lung diseases from X-ray images.
- **modelAccuracy**: Tracks the accuracy of the current model after training and validation.
- **predictionThreshold**: A constant threshold to determine the classification outcome (e.g., disease presence).

8.3 Exported Constants and Access Programs

8.3.1 Exported Access Programs

Name	In	Out	Exceptions
<code>predictDisease</code>	<code>XRayImage:binary</code>	<code>DiseasePrediction:</code> <code>PredictionResult</code>	<code>PredictionFailException</code>

8.3.2 Exported Constants

- **PREDICTION_THRESHOLD**: 0.75 (threshold for classification of disease presence)
- **MAX_PREDICTIONS**: 1000 (maximum number of predictions to handle concurrently)

8.4 Environment Variables

- **modelPath**: The path where the `torchxrayvision` pre-trained model is saved or loaded from.
- **predictionEndpoint**: The endpoint that this model is hosted on Docker host machine.

8.5 Assumptions

- Assumes the pre-trained `torchxrayvision` model is available and compatible with the data provided.
- Assumes valid X-ray image data is available for predictions.
- Assumes the Web Application Server Module (M1) and HTTP Server Module (M2) are properly configured and running.

8.6 Access Routine Semantics

8.6.1 `predictDisease(XRayImage)`

- **Transition:** Uses the loaded model to make predictions based on the provided X-ray image data.
- **Output:** Returns the disease prediction (e.g., probability of a disease being present) or throws an `InvalidImageException` if the image is invalid.

8.7 Local Functions

- **`loadModel()`:** Loads the pre-trained model from disk or cloud storage using `torchxrayvision`'s functionality.
- **`evaluateModel()`:** Evaluates the model's performance with a test dataset to calculate metrics like accuracy and sensitivity.
- **`preprocessImage()`:** Preprocesses incoming X-ray image data to fit the model's input requirements (e.g., resizing, normalization).
- **`postprocessPrediction()`:** Processes the raw output from the model (e.g., probabilities) into a human-readable format (e.g., disease labels).

9 Disease Progression Server Module

9.1 Other Modules the Current Module Uses

- M14: Data Persistence Module

9.2 State Variables

- **model**: The pre-trained model used for tracking lung diseases from 2 X-ray images.
- **modelAccuracy**: Tracks the accuracy of the current model after training and validation.
- **predictionThreshold**: A constant threshold to determine the classification outcome (e.g., disease presence).

9.3 Exported Constants and Access Programs

9.3.1 Exported Access Programs

Name	In	Out	Exceptions
trackProgression	XrayImage1: binary, XrayImage2: binary	Progression: Pre- gressionResult	ProgressionFailedException

9.3.2 Exported Constants

- N/A

9.4 Environment Variables

- **modelPath**: The path where the pre-trained model is saved or loaded from.
- **predictionEndpoint**: The endpoint that this model is hosted on Docker host machine.

9.5 Assumptions

- Assumes the pre-trained model is available and compatible with the data provided.
- Assumes valid X-ray images data is available for processing.
- Assumes the Web Application Server Module (M1) and HTTP Server Module (M2) are properly configured and running.

9.6 Access Routine Semantics

9.6.1 trackProgression(XrayImage1, XrayImage2)

- **Transition:** Uses the existing model to calculate disease progression based on the provided X-ray images.
- **Output:** Returns the disease progression.

9.7 Local Functions

- **loadModel():** Loads the pre-trained model from disk or cloud storage.
- **evaluateModel():** Evaluates the model's performance with a test dataset to calculate metrics like accuracy and sensitivity.
- **preprocessImage():** Preprocesses incoming X-ray image data to fit the model's input requirements (e.g., resizing, normalization).
- **postprocessImages():** Processes the raw output from the model (e.g., probabilities) back to pictures.

10 User Authentication Module

10.1 Other Modules the Current Module Uses

- M14: Data Persistence Module

10.2 State Variables

- **cognito_idp_client**: AWS Cognito client, initialized via the AWS boto3 library.
- **user_pool_id**: Identifier of the database at which AWS Cognito stores user's information such as username, password, first name, etc.
- **client_id**: Identifier of the User Authentication Module to authenticate with AWS Cognito (via OAUTH's client credential grant).
- **client_secret**: Password of the User Authentication Module, used in conjunction with client_id to authenticate with AWS Cognito.

Name	In	Out	Exceptions
sign_up_user	user_email: string, password: int, user_detail: JSON	user: user	Unauthorized, UserAlreadyExists, InternalServerError
sign_in_user	user_email: string, password: int	bearer_token: string	Unauthorized, IncorrectCredentials, InternalServerError
get_self_user	bearer_token: string	user: user	Unauthorized, InternalServerError
get_user_by_id	uuid: int	user: user	Unauthorized, UserNotFoundException, InternalServerError
update_user_by_id	uuid: int, updated_user_json: JSON	user: user	Unauthorized, UserNotFoundException, InternalServerError

10.2.1 Exported Constants

- N/A

10.3 Environment Variables

- **AWS_ACCESS_KEY_ID**: Access key to authenticate backend with AWS

- **AWS_SECRET_ACCESS_KEY**: Secret key to authenticate backend with AWS
- **AWS_REGION**: AWS Region of the backend infrastructure

10.4 Assumptions

- AWS Cognito returns consistent json results with user fields, since neuralanalyzer backend expect certain fields from user object (custom:firstName, custom:organization, etc.)
- AWS Cognito always stays online, since without this service, users wont be able to login into the application.

10.5 Access Routine Semantics

10.5.1 `sign_up_user(user_email, password, user_detail)`

- **Inputs:**
 - **user_email**: Email address of the user.
 - **password**: Password for the user's account.
 - **user_detail**: Additional user details, such as first name and organization, formatted as Python Dictionary.
- **Outputs:** A user object containing the created user's details.
- **Preconditions:**
 - The provided email is valid and not already registered.
 - Password meets AWS Cognito's security requirements.
- **Postconditions:**
 - The user is successfully created and stored in the Cognito user pool.

10.5.2 `sign_in_user(user_email, password)`

- **Inputs:**
 - **user_email**: Email address of the user.
 - **password**: Password for the user's account.
- **Outputs:** A bearer token for authenticated access to other services.
- **Preconditions:**

- The user is registered in the Cognito user pool.
- The provided credentials are correct.

- **Postconditions:**

- The user is successfully authenticated.
- A bearer token is generated and returned for future authenticated requests.

10.5.3 `get_self_user(bearer_token)`

- **Inputs:**

- **bearer_token:** User's Bearer token.

- **Outputs:** A user object containing the created user's details.

- **Preconditions:**

- The `bearer_token` must be valid and not expired.

- **Postconditions:**

- The user is successfully retrieved from AWS Cognito.

10.5.4 `get_user_by_id(uuid)`

- **Inputs:**

- **uuid:** The unique identifier of the user (string)

- **Outputs:** A user object containing the user's details.

- **Preconditions:**

- User's UUID must be valid, and attached to a registered user.

- **Postconditions:**

- The user is successfully retrieved from AWS Cognito.

10.5.5 `update_user_by_id(uuid, updated_user_json)`

- **Inputs:**

- **uuid:** The unique identifier of the user (string)
- **updated_user_json:** Python Dictionary object that contains the field which the caller wants to update the user with.

- **Outputs:** A user object containing the updated user's details.

- **Preconditions:**

- User's UUID must be valid, and attached to a registered user.
- User's updated fields must belong to list of fields users are allowed to edit (ie: first and last name, role, organization, etc.)

- **Postconditions:**

- User with UUID must have the fields in `updated_user_json` updated on AWS Cognito.

10.6 Local Functions

- **`_parse_user_json_from_cognito_user`:** Convert user object returned from AWS Cognito, to a more application-friendly internal user object.
- **`_parse_cognito_attr_user_from_user_json`:** Convert the internal user object to the user data format that AWS Cognito requires.
- **`_get_username_from_email`:** Converting user's email into their username. (ie: `nathan@gmail.com` will be converted to `nathan_gmail`)
- **`_get_user_by_email`:** Fetching user from AWS Cognito via their email.

11 Patient List View Module

11.1 Other Modules the Current Module Uses

- M1: Web Application Server Module

11.2 State Variables

- **patientList**: Stores a list of patients assigned to a doctor, including their basic information such as name, age, and medical condition.
- **searchFilters**: Stores the current filters applied to the patient list for sorting and searching purposes.

11.3 Exported Constants and Access Programs

11.3.1 Exported Access Programs

Name	In	Out	Exceptions
<code>viewPatientList</code>	doctorID: int, filters: [string]	Patients: [user]	PatientListNotFoundException
<code>sortList</code>	Sorting criteria: [string]	Patients: [user]	None
<code>addPatient</code>	Form Data: JSON	Patient: user	FailedToCreateUserException

11.3.2 Exported Constants

- **MAX_PATIENTS_PER_PAGE**: 20 (maximum number of patients displayed per page in the list)
- **DEFAULT_SORT_ORDER**: "alphabetical" (default order in which patients are listed)

11.4 Environment Variables

- N/A

11.5 Assumptions

- Assumes that the User Authentication Module (M5) is responsible for verifying that the user is a doctor with access to the list.
- Assumes the patient data is up-to-date and synchronized with the Data Persistence Module (M14).

11.6 Access Routine Semantics

11.6.1 viewPatientList(doctorID, filters)

- **Transition:** $\text{doctorID} \in \text{Doctor} \wedge \text{filters} \in \text{FilterSet}$
- **Output:** Returns the list of patient details or throws a `PatientListNotFoundException` if no patients are found.

11.6.2 sortList(criteria)

- **Transition:** Sorts the current patient list based on the provided criteria.
- **Output:** Returns the sorted patient list.

11.6.3 addPatient(fromData)

- **Transition:** Submits the provided form data to the backend service for processing.
- **Output:** Returns the created patient data.

11.7 Local Functions

- **sortPatients(criteria):** Sorts the patient list based on the provided criteria.

12 Patient Overview Module

12.1 Other Modules the Current Module Uses

- M6: Patient List View Module

12.2 State Variables

- **patientOverviews**: Stores the summary information of a selected patient, including personal details, recent medical history, and current treatment plans.

12.3 Exported Constants and Access Programs

12.3.1 Exported Access Programs

Name	In	Out	Exceptions
getPatient	Patient ID: int	Patient overview details: [detail]	OverviewNotFoundException

12.3.2 Exported Constants

- N/A

12.4 Environment Variables

- N/A

12.5 Assumptions

- Assumes the User Authentication Module (M5) ensures that only authorized users can view the patient overview.
- Assumes the overview data is accurate and synchronized with the Data Persistence Module (M14).

12.6 Access Routine Semantics

12.6.1 getPatient(patientID)

- **Transition**: Retrieves the overview information of the specified patient.
- **Output**: Returns the patient overview details or throws an `OverviewNotFoundException` if the overview cannot be found.

12.7 Local Functions

- **updateView(patientOverview)**: Retrieves overview data from the data source, and update page view.

13 Diseases Progression View

13.1 Other Modules the Current Module Uses

- M6: Patient List View Module

13.2 State Variables

- **progressionData**: a image or a list of images stored.

13.3 Exported Constants and Access Programs

13.3.1 Exported Access Programs

Name	In	Out	Exceptions
viewProgression	Patient ID: int	Progression Data: ProgressionResult	ProgressionNotFoundException

13.3.2 Exported Constants

- **DEFAULT_CHART_TEMPLATE**: "default_progression_chart.html" (default template for displaying disease progression charts)

13.4 Environment Variables

- **DiseaseProgressionModuleURL**: URL or endpoint of the service used for progression.

13.5 Assumptions

- Assumes the User Authentication Module (M5) ensures that only authorized users can view the disease progression.
- Assumes data fetched and updated properly in the Data Persistence Module (M14).

13.6 Access Routine Semantics

13.6.1 viewDiseaseProgression(patientID)

- **Transition**: Retrieves the disease progression details for the specified patient.

- **Output:** Returns the progression data or throws a `ProgressionNotFoundException` if the data cannot be found.

13.7 Local Functions

- **updateView(progressionData)**: Retrieves progression data from the data source, and update page view.

14 Medical Records List View

14.1 Other Modules the Current Module Uses

- M6: Patient List View Module

14.2 State Variables

- **medicalRecords**: Contains a list of all medical records associated with a specific patient, including dates, record types, and summaries.

14.3 Exported Constants and Access Programs

14.3.1 Exported Access Programs

Name	In	Out	Exceptions
viewMedicalRecordsList	Patient ID: int	Medical records: [records]	RecordsNotFoundException
createNewRecord	Form: JSON	Medical Record: record	CreateRecordFailedException

14.3.2 Exported Constants

- **DEFAULT_LIST_TEMPLATE**: "default_records_list_template.html" (default template for displaying the list of medical records)

14.4 Environment Variables

- N/A

14.5 Assumptions

- Assumes the User Authentication Module (M5) ensures that only authorized users can view the medical records.
- Assumes the records data is accurate and up-to-date in the Data Persistence Module (M14).

14.6 Access Routine Semantics

14.6.1 viewMedicalRecordsList(patientID)

- **Transition:** Retrieves the list of medical records for the specified patient.
- **Output:** Returns the list of medical records or throw `RecordsNotFoundException`.

14.6.2 createNewRecord

- **Transition:** Pass all information to the backbend server endpoint for creating a new record.
- **Output:** Returns the created patient record data or throw `CreateRecordFailedException`.

14.7 Local Functions

- **updateView(medicalRecords)**: Retrieves medical records data from the data source, and update page view.

15 X-Ray Report View

15.1 Other Modules the Current Module Uses

- M6: Patient List View Module

15.2 State Variables

- **xrayReport**: Stores the complete X-ray report data, including any AI-generated analysis and human annotations.
- **doctorAnnotations**: Contains doctor-provided annotations or edits to the AI-generated analysis.

15.2.1 Exported Access Programs

Name	Inputs	Outputs	Exceptions
getReport	recordId: string	Report: Report	ReportNotFoundException
editReport	recordId: string, annotations: [string]	Report: Report	ReportNotFoundException
approveReport	recordId: string	Report: Report	UnauthorizedAccessException, ReportNotFoundException

15.2.2 Exported Constants

N/A

15.3 Environment Variables

- **reportAnalysisService**: URL or endpoint of the service used for generating the AI-based analysis of X-ray images.

15.4 Assumptions

- Assumes the User Authentication Module ensures that only authorized users (e.g., doctors) can edit or finalize an X-ray report.

- Assumes the X-ray data is accurate and kept in sync with the Data Persistence Module (M14).
- Assumes AI analysis can be updated or re-run as necessary.

15.5 Access Routine Semantics

15.5.1 getReport(recordID)

- **Transition:** Fetch the latest X-ray report data, including AI analysis and any existing doctor annotations.
- **Output:** Returns the combined X-ray report details or throws `ReportNotFoundException` if no matching record exists.

15.5.2 editReport(recordID, annotations)

- **Transition:** Retrieves the existing X-ray report data, merges new annotations (including doctor comments and corrections) with the existing AI analysis, updates the report with the combined results, and saves the changes to the data source.
- **Output:** Returns the updated X-ray report details or throws `ReportNotFoundException` if no matching record exists.

15.5.3 approveReport(recordID)

- **Transition:** Flags the report as finalized and generates a PDF or stored artifact of the final X-ray report.
- **Output:** Returns a confirmation or the final X-ray report object or Throws `ReportNotFoundException` if the record cannot be found.

15.6 Local Functions

- **fetchXRayData(recordID)**: Retrieves raw X-ray image data and associated meta-data from the data source.
- **generateAIAnalysis(recordID)**: Calls the modules related to disease prediction to generate the AI report summary.
- **mergeAnnotations(annotations)**: Integrates new doctor annotations with existing AI analysis.

16 Disease Progression Module

16.1 Other Modules the Current Module Uses

- M4: Disease Progression Server Module
- M13: Medical Record Module

16.2 State Variables

- N/A

16.3 Exported Constants and Access Programs

16.3.1 Exported Access Programs

Name	In	Out	Exceptions
getprogression	XrayImage1: binary, XrayImage2: binary	Progression Result: ProgressionResult	ProgressionFailedException
getLatestProgression	userId: string	Progression Result: ProgressionResult	UserNotFound Exception, LastestProgressionFailed Exeception

16.3.2 Exported Constants

- N/A

16.4 Environment Variables

- **PROGRESSION_SERVER_URL**: URL of Disease Progression Server

16.5 Assumptions

- All received image data is assumed to be valid and correctly formatted.
- The disease progression server endpoint is assumed to be accessible and functioning properly.

16.6 Access Routine Semantics

16.6.1 `getProgression(XrayImage1, XrayImage2)`

- **Transition:** Make an HTTP call to the **Disease Progression Server Module**
- **Output:** Returns a `ProgressionResult` containing the disease progression information (Disease gets worsen or better) or throws `ProgressionFailedException`.

16.6.2 `getLatestProgression(userId)`

- **Transition:** Gets the latest 2 records from user, via function call to **Medical Record Module**. With the two latest record, the module will extract the 2 X-Ray and calls `getProgression`
- **Output:** Returns a `ProgressionResult` containing the disease progression information or throws `LastestProgressionFailedExeception`.

16.7 Local Functions

- `executeHttpRequest(method, path)`: Send a generic HTTP request to a specified path

17 Disease Prediction Module

17.1 Other Modules the Current Module Uses

- M3: Disease Prediction Server Module

17.2 State Variables

- N/A

17.3 Exported Constants and Access Programs

17.3.1 Exported Access Programs

Name	In	Out	Exceptions
predictDisease	XrayImage: binary	Prediction Result: PredictionResult	PredictionFailedException

17.3.2 Exported Constants

- N/A

17.4 Environment Variables

- **PREDICTION_SERVER_URL**: URL of Disease Prediction Server

17.5 Assumptions

- All received image data is assumed to be valid and correctly formatted.
- The disease prediction server endpoint is assumed to be accessible and functioning properly.

17.6 Access Routine Semantics

17.6.1 predictDisease(patientData)

- **Transition**: Processes `patientData` using the current prediction model to generate a prediction.
- **Output**: Returns a `PredictionResult` containing the predicted disease information or throws `PredictionFailedException`.

17.7 Local Functions

- **executeHttpRequest(method, path)**: Send a generic HTTP request to a specified path

18 Medical Record Management Module

18.1 Other Modules the Current Module Uses

- M12: Disease Prediction Module
- M14: Data Persistence Module

18.2 State Variables

- N/A

18.3 Exported Constants and Access Programs

18.3.1 Exported Access Programs

Name	In	Out	Exceptions
getPaginatedPrescriptionByRecordId	recordId: string, limit: int	prescriptions: [prescription]	GetPaginatedException RecordDoesNotExistException
getPrescriptionById	uuid: string	prescription: prescription	GetPrescriptionException
createNewPrescription	recordId: string, prescription: prescription	prescription: prescription	CreatePrescriptionException
updatePrescriptionById	uuid: string, prescription: Prescription	prescription: prescription	UpdatePrescriptionException, PrescriptionNotFoundException
getPaginatedRecordByUserId	userId: string, limit: int	records: [record]	GetPaginatedRecordException, UserNotFoundException
getRecordById	uuid: string	record: record	GetRecordException, RecordNotFoundException
createNewRecord	userId: string, record: record	record: record	CreateRecordException
updateRecordById	uuid: string, record: record	record: record	UpdateRecordException, RecordNotFoundException

18.3.2 Exported Constants

- N/A

18.4 Environment Variables

- N/A

18.5 Assumptions

- The underlying Data Persistence Module persist data into storage on AWS.
- The underlying Data Persistence Module stays highly available and bug prone.

18.5.1 `getPaginatedPrescriptionByRecordId(recordId, limit)`

- **Inputs:**
 - **recordId:** Unique identifier of the medical record (string).
 - **limit:** Maximum number of prescriptions to retrieve (integer).
- **Outputs:** A list of prescription objects associated with the provided **recordId**, limited by the **limit** parameter.

18.5.2 `getPrescriptionById(uuid)`

- **Inputs:** **uuid:** Unique identifier of the prescription (string).
- **Outputs:** The prescription object corresponding to the given **uuid**.

18.5.3 `createNewPrescription(recordId, prescription)`

- **Inputs:**
 - **recordId:** The unique identifier of the medical record to associate with the prescription (string).
 - **prescription:** The prescription object (dictionary) containing the prescription details.
- **Outputs:** The created prescription object

18.5.4 updatePrescriptionById(uuid, prescription)

- **Inputs:**
 - **uuid:** The unique identifier of the prescription to be updated (string).
 - **prescription:** The updated prescription object (dictionary).
- **Outputs:** The updated prescription object

18.5.5 getPaginatedRecordByUserId(userId, limit)

- **Inputs:**
 - **userId:** The unique identifier of the user whose records are being requested (string).
 - **limit:** The maximum number of records to retrieve (integer).
- **Outputs:** A list of records associated with the provided **userId**, limited by the **limit** parameter.

18.5.6 getRecordById(uuid)

- **Inputs:** **uuid:** The unique identifier of the record to retrieve (string).
- **Outputs:** The record object corresponding to the given **uuid**.

18.5.7 createNewRecord(userId, record)

- **Inputs:**
 - **userId:** The unique identifier of the user associated with the record (string).
 - **record:** The record object (dictionary) containing the medical record details.
- **Outputs:** The created record object.

18.5.8 updateRecordById(uuid, record)

- **Inputs:**
 - **uuid:** The unique identifier of the record to update (string).
 - **record:** The updated record object (dictionary).
- **Outputs:** The updated record object.

18.6 Local Functions

- N/A

19 Data Persistent Module

19.1 Other Modules the Current Module Uses

- N/A

19.2 State Variables

- **dynamodb**: AWS DynamoDB client (managed NoSQL service), initialized via aws boto3 library.
- **table**: Name of the DynamoDB table.
- **s3_client**: AWS S3 client (managed blob storage service), initialized via aws boto3 library.

19.3 Exported Constants and Access Programs

19.3.1 Exported Access Programs

Name	In	Out	Exceptions
get_item_by_id	uuid: int	item: $\langle T \rangle$	InternalServerError, ClientError
create_new_item	item: $\langle T \rangle$	uuid: int, item: $\langle T \rangle$	InternalServerError, ClientError
update_item_by_id	uuid: int, item: $\langle T \rangle$	item: $\langle T \rangle$	InternalServerError, ClientError
get_s3_upload_presigned_url	file_name: string	presigned_url: string	InternalServerError, ClientError

19.3.2 Exported Constants

- N/A

19.4 Environment Variables

- **AWS_ACCESS_KEY_ID**: Access key to authenticate backend with AWS
- **AWS_SECRET_ACCESS_KEY**: Secret key to authenticate backend with AWS
- **AWS_REGION**: AWS Region of the backend infrastructure

19.5 Assumptions

- AWS DynamoDB and AWS S3 returns consistent json results and error codes.
- AWS DynamoDB and AWS S3 always stays online, without these services, users wont be able to create, view, update prescriptions and records.

19.6 Access Routine Semantics

19.6.1 `get_item_by_id(uuid)`

- **Inputs:**
 - **uuid:** Unique identifier of the item to retrieve.
- **Outputs:**
 - The item object corresponding to the given ‘uuid‘.
- **Preconditions:**
 - The ‘uuid‘ exists in the DynamoDB table.
- **Postconditions:**
 - The item object is successfully retrieved from the database.

19.6.2 `create_new_item(item)`

- **Inputs:**
 - **item:** A Python Dictionary object containing the details of the item to be created.
- **Outputs:**
 - **uuid:** The unique identifier of the created item.
 - **item:** The created item object.
- **Preconditions:**
 - The ‘item‘ dictionary is well-formed.
- **Postconditions:**
 - The new item is successfully added to the DynamoDB table.

19.6.3 `update_item_by_id(uuid, item)`

- **Inputs:**

- **uuid:** The unique identifier of the item to be updated.
- **item:** A Python Dictionary containing the updated fields for the item.

- **Outputs:**

- The updated item object.

- **Preconditions:**

- The ‘uuid’ corresponds to an existing item in the DynamoDB table.
- The ‘item’ Dictionary contains valid fields for the update.

- **Postconditions:**

- The item is successfully updated in the database, and returned to user.

19.6.4 `get_s3_upload_presigned_url(file_name)`

- **Inputs:**

- **file_name:**The name of the file to be uploaded to S3 (string).

- **Outputs:**

- **presigned_url:** A pre-signed URL allowing authorized upload of the specified file to AWS S3.

- **Preconditions:**

- The ‘file_name’ is a valid, non-empty string
- The S3 bucket configured in the `s3_client` is accessible and writable by the authenticated user.

- **Postconditions:**

- A valid pre-signed URL for uploading the specified file is generated and returned.
- The generated pre-signed URL is only valid for 1 minute.

19.7 Local Functions

- N/A

References

- Daniel M. Hoffman and Paul A. Strooper. *Software Design, Automated Testing, and Maintenance: A Practical Approach*. International Thomson Computer Press, New York, NY, USA, 1995. URL <http://citeseer.ist.psu.edu/428727.html>.
- Reza Jodeiri, Kelly Deng, Ayman Akhras, Nathan Luong, and Patrick Zhou. System requirements specification. <https://github.com/RezaJodeiri/CXR-Capstone/blob/main/docs/SRS/SRS.pdf>, 2024.

Appendix — Reflection

The information in this section will be used to evaluate the team members on the graduate attribute of Problem Analysis and Design.

1. What went well while writing this deliverable?

Our existing documentation, such as the detailed list of functional and non-functional requirements and the Module Interface Specification (MIS) we created, provided a solid roadmap for how the system should behave. This clarity made it easier to develop the design blueprint and the specifications for each module because we already knew what each part needed to do and how they should interact. Another big plus was the team's early focus on a modular architecture, such as separating the machine learning (ML) services from the core backend. This approach kept our design documents organized and manageable, allowing us to develop, test, and maintain each module independently without getting overwhelmed. Additionally, having the core implementation set up during the Proof of Concept (POC) phase gave us a great direction for developing the specifications for our modules. It provided a tested foundation to build on, reducing uncertainties and making our specification development more precise and targeted.

2. What pain points did you experience during this deliverable, and how did you resolve them?

We faced notable challenges while designing our Behavior Hiding Module, especially given our limited experience with standard healthcare user interface practices. To address this, we created an initial MVP concept UI and then conducted interviews with several healthcare professionals. Their feedback highlighted the need for straightforward interactions with patient profiles, a smooth process to upload chest X-ray scans, and a hassle-free way to create new records. In response, we iterated on our designs multiple times, adjusting layout structures, refining navigation flows, and simplifying labeling conventions to ensure the module felt intuitive and clinically relevant. Each revision brought us closer to delivering a user-centric interface that balances simplicity with the technical rigor necessary in medical settings, resulting in a solution that healthcare professionals can adopt with minimal friction.

3. Which of your design decisions stemmed from speaking to your client(s) or a proxy (e.g. your peers, stakeholders, potential users)? For those that were not, why, and where did they come from?

In our previous meeting with our supervisor, Dr. Moradi, we decided to prioritize designing a user-friendly interface specifically tailored for the use of radiologists. Based on their feedback, we focused on creating an intuitive and easy-to-navigate interface. Most of our time and research was dedicated to understanding and adhering to standard healthcare web interface guidelines to ensure the design aligns with the requirements

of a healthcare setting. We decided to prioritize interpretability and transparency of AI-generated report (explainable AI) which comes from the discussions with stakeholder emphasizing trust in AI results. This would help doctors/radiologists to better understand the prediction results. As for non-client-informed decisions, we decided to implement a disease progression feature that is separated from the prediction model. It traces the patient disease progression over a certain period, allowing comparing different X-rays and reports to give a more straightforward understanding of patient condition overtime while also reviewing the effectiveness of the prescriptions given to the patient in that specific period. By separating two models, they work independently and will still function if the other one goes down, allowing higher fault tolerance.

4. While creating the design doc, what parts of your other documents (e.g. requirements, hazard analysis, etc), if any, needed to be changed, and why?

In the process of drafting the design document, we identified the need to revise several aspects of our other documents, including the Software Requirements Specification (SRS) and the Hazard Analysis document, to align with newly introduced features and interface design changes. One of the key additions was the disease progression monitoring feature, implemented using a Detection Transformer (DETR). This feature required us to add new requirements in the SRS, detailing how disease progression should be visualized, the data flow for tracking multiple X-rays over time, and the integration of DETR-based models for reliable prediction. Furthermore, the design now incorporates processing DICOM metadata to extract relevant information, such as clinical history, imaging parameters, and patient demographics, which ensures that critical contextual data is seamlessly integrated into the system. This step enhances the accuracy and usability of the interface by providing doctors with a comprehensive view of patient history alongside imaging results. Additionally, we refined our interface design to primarily cater to doctors instead of only patients, shifting the focus to provide structured, clinically relevant data and user-friendly tools for interpreting complex results. This change necessitated updating user interface requirements in the SRS to include features such as advanced filtering, annotation tools, and report generation. Furthermore, the incorporation of these features introduced new safety and ethical considerations, leading us to revisit and expand the Hazard Analysis document. For example, we identified potential risks related to false positives or negatives in disease progression detection, which could impact clinical decision-making. To mitigate these risks, we documented fallback mechanisms such as manual review workflows and alerts for ambiguous cases.

5. What are the limitations of your solution? Put another way, given unlimited resources, what could you do to make the project better? (LO_ProbSolutions)

A significant limitation of our solution lies in the inherent bias and fairness concerns within our AI model. Training exclusively on the MIMIC-CXR dataset from Beth

Israel Deaconess Medical Center means our model may exhibit performance disparities across different patient demographics. The limited diversity in our training data regarding age, gender, ethnicity, and socioeconomic status could result in reduced prediction accuracy for underrepresented populations, potentially compromising our system's ability to provide equitable healthcare solutions. Furthermore, since our training data originates from a single institution's imaging equipment, the model may demonstrate reduced effectiveness when processing X-rays captured using different machines, resolutions, or configurations. This technical limitation could disproportionately affect healthcare facilities utilizing different or older equipment specifications. Given unlimited resources, we would prioritize expanding our training dataset to encompass a broader spectrum of patient populations from multiple healthcare institutions and diverse imaging equipment. We would implement comprehensive testing protocols to evaluate model performance across various demographic groups and establish robust monitoring systems to track performance metrics across different population segments and equipment configurations. While our current implementation demonstrates promising results, addressing these limitations would be essential for future iterations to ensure the system delivers consistent and equitable care across all patient populations and healthcare settings.

6. Give a brief overview of other design solutions you considered. What are the benefits and tradeoffs of those other designs compared with the chosen design? From all the potential options, why did you select the documented design? (LO Explores)

We considered both MVC and a layered architecture for our medical imaging system, particularly to accommodate disease prediction and progression pipelines. While MVC separates data, business logic, and presentation, it can introduce tight coupling between controllers and views, ultimately complicating upgrades and integrations of AI components. In contrast, a layered approach naturally decouples these processes into discrete layers such as presentation, application, and data—ensuring each layer can be maintained, replaced, or updated independently. This flexibility is especially vital given our need to integrate complex machine learning and imaging algorithms that may evolve or expand over time. Additionally, layering simplifies the implementation of security, logging, and regulatory compliance by localizing those concerns within specific strata of the system. By providing a clear, top-to-bottom sequence for data flow, the layered model also reduces communication complexity, making it easier to integrate and manage our disease prediction and progression modules. Ultimately, we selected layered architecture for its modularity, maintainability, and scalability.