Appendices:Runtime Verification of Implantable Medical Devices Using Multiple Physiological Signals

LastName1, FirstName1 first1.last1@xxxxx.com

LastName2, FirstName2 first2.last2@xxxxx.com

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Appendix1: ECG-PPG correlation

The summary of cardiac events and timers and the correlated ECG-PPG events and intervals is presented in table 1. Fig. 1 presents a graphical view of above correlations.

The proposed ECG-PPG correlation is validated by off-line analysis and testing on our monitoring framework. Our monitoring framework runs two parallel monitors, ECG and PPG monitor. The events and intervals of ECG-PPG, to be correlated, modelled as timed automata, are arguments to the respective monitors. An example of timed-automata modelling of events and intervals using UPPAAL tool ? is shown in Fig. 3. The input to the parallel monitors are traces of both the signals. We fed the correlated (as per off-line analysis) events of both the signal and the standard time interval to our monitors to validate the correlation. When the correlation is validated, the output would be true in both the monitors; false otherwise. Let us consider a scenario of establishing the correlation of P-R inteval of ECG to onset-systolic peak interval (systole period) of PPG. As mentioned, we extract the events P-wave, R-wave in ECG and onset, dicrotic-notch in PPG, using both manual annotations and automated method detailed in Section ??. We consider each cycle of ECG-PPG in a loop of the recordings. For example, consider a trace of P, R events of ECG along with time of occurrence: [(p, 728), (r, 888)] where p and r stands for P-wave and R-wave respectively. The PPG trace corresponding to ECG cycle are: [(F, 1416), (P, 1568)] where F and P stands for onset and systolic peak respectively. It may be observed that the events in PPG are delayed which is due to lag (pulse arrival time) between ECG and PPG (almost constant for a person). We fed both the traces to our monitoring frameworks in parallel i.e ECG traces are input to ECG monitor (resp. PPG). We maintained a guard of 210 ms in both monitoring clocks as shown in Fig. 3, as standard PR interval of ECG is 210 ms (average), which needs to be correlated to systole period of PPG. This is repeated in a loop throughout the recording. The monitor raises complaint whenever there is a violation. The fact that, both the monitors agree in more than 90% cases, establish the proposed correlation. In some cases, the violation occurs because of the distortions in signal acquisition (noisy signal and motion artifacts). However, we would like to address such signal quality issues in future work. Also, there may be minimal difference between PR interval of ECG and systole

Table 1: Summary of correlated ECG. PPG and cardiac timers

Cardiac	ECG	PPG			
Events & Timers	Events & Timers	Events & Timers			
AS or AP	P -wave	Onset			
VS or VP	R-wave	Systolic peak			
AVI	PR interval	Onset-systolic peak interval			
AEI	RP interval	Systolic peak-onset interval			
LRI	RR interval (maximum)	Systolic peak - systolic peak interval (maximum)			
URI	RR interval (minimum)	Systolic peak - systolic peak interval (minimum)			
Systole period	RT interval	Systolic peak - dicrotic notch interval			
Diastole period	TR interval	Dicrotic notch - systolic peak interval			

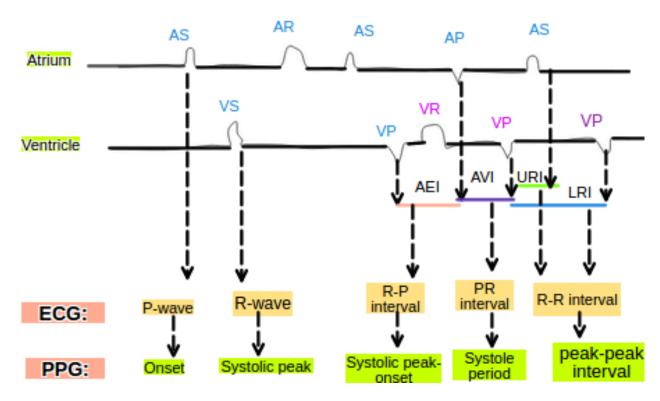


Figure 1: Mapping ECG, PPG to cardiac events and intervals.

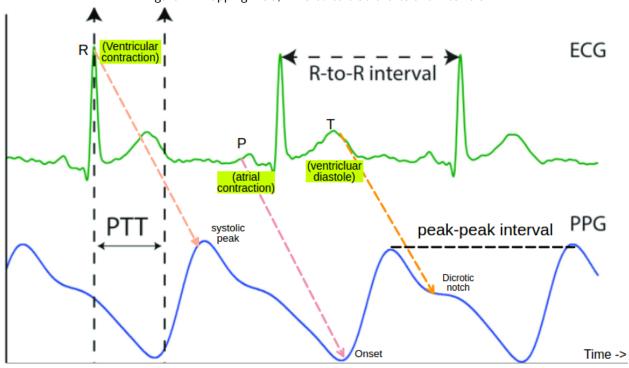


Figure 2: Simultaneous record of ECG, PPG showing cardiac activities.

period of PPG, but the objective is to validate that the respective intervals satisfy safety constraint (in this case 210 ms). Similar approach was adpoted for mapping other correlated intervals.

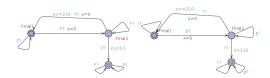


Figure 3: Automata for P_2 w.r.t PPG (left) and ECG (right).

Appendix2: Input-output behavior of the monitor & Performance analysis

Let us consider property P2 as the property to be verified (φ) . The TA defining property P2 w.r.t PPG and ECG (in UPPAAL format) is illustrated in Fig. 3. We correlate the PR interval of ECG and onset to systolic peak interval of PPG. The average interval to be checked is set to 210 milliseconds, and x is the clock. Since the time intervals differ from patient to patient, the average duration is considered for the verification purpose. The ECG (resp. PPG) monitor is invoked with its respective property to verify, and an input event sequence (input sequence to be checked against the property).

Consider an example ECG input event sequence: [(p, 728), (r, 888), (p, 1400), (r, 1480)]. Since the PPG lag ECG by pulse arrival time, the PPG sequence corresponding to the above ECG trace is: [(F, 1416), (P, 1568), (F, 2080), (P, 2240)]. Here F stands for onset, P stands for systolic peak. Each event is associated with a delay, indicating the time elapsed after the previous event or the system initialization. Both the ECG and PPG monitors executed simultaneously with their respective input traces from the processing modules.

The PPG monitor receives the first action F at t=1416. Since, the property is not violated the monitor will output verdict . At t=1568, the second event P comes, the monitor will again emit verdict since P event has come before FP interval and the property is not violated. The monitor emits for third action F at t=2080. The fourth action P comes at t=2240, here also the property is satisfied. So, the monitor will output verdict , indicating property is satisfied by the current observed trace. Similarly, for the ECG input sequence, the ECG monitor will yield the same verdict at each step considering the PR interval. Thus, the output of merge, which combines the verdicts of both the monitors (using conjunction) to give final verdict will be at every step.

Table 2: Performance Evaluation

Property	No. of PPG cycles	PPG processing Time (ms)	PPG RV monitor Time (ms)	Total PPG Time (ms)	No. of ECG cycles	ECG processing Time (ms)	ECG RV monitor Time (ms)	Total ECG Time (ms)	Maximum Time (ms)			
P_1	2	75.265	30.426	105.691	2	207.80	30.175	237.975	237.975			
P_2	2	75.265	32.137	107.402	2	207.80	35.739	243.539	243.539			
P_3	2	75.265	32.481	107.746	2	207.80	31.800	239.6	239.6			
P_4	2	75.265	37.307	112.572	2	207.80	36.739	244.539	244.539			
P_5	2	75.265	28.655	103.92	2	207.80	27.248	235.048	235.048			