# Heterogeneous Artificial Agents for Triage Nurse Assistance

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DIPARTIMENTO DI INGEGNERIA INFORMATICA AUTOMATICA E GESTIONALE ANTONIO RUBERTI



Presented by Cecilia Aponte

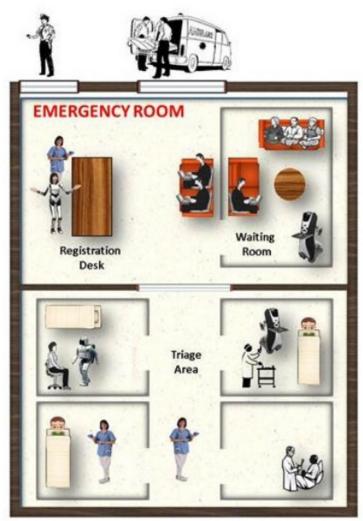
## Goal of the study

- Propose a system of cognitive robots "TriageBot System" to shorten waiting time in ER, relieve overburden of medical staff, and reduce mistakes
- First to address the use of robots in ER
- Function for less severe case patients (60%):
  - Gather logistical and medial info
  - Take diagnostic measurements
  - Give tentative, possible diagnoses to curse and recommendation to non-physician care
- Feasible (in principal) with advances in sensor technology and cognitive control architecture

#### **Importance**

- Overcrowding in ER is a major public health problem as identified by the Institute of Medicine
- Unpredictability of amount of patients, arrival times, type of illness and future complications
- This increases patient mortality, time to treat infections, blood clots, and pain
- Affecting mainly minorities (African-American, Hispanic), low-income, uninsured, and women
- Robot assistants can therefore improve ER throughput and provide a safer environment

#### The Concept



Humanoid Cognitive

- Robot Registration
  Assistant: upon arrival gets
  basic info and some
  diagnostic data (pain and
  level with Visual Analog
  Scores)
- Robot Triage Nurse
  Assistant: takes
  measurements in a chair
  instrumented with sensors.
  Calculates ESI score and
  priority in the queue

Chair Motor-skills

## The Concept



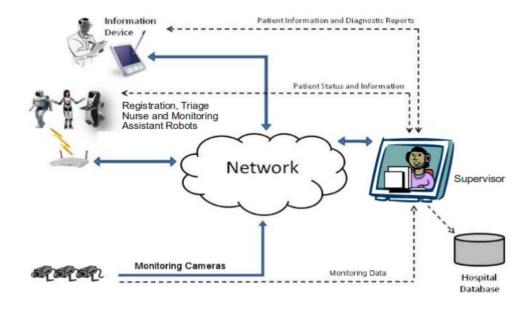
Mobile Cognitive

- Robot Monitoring
  Assistant: periodically
  checks patient in waiting
  room. May take simple
  measurements and pain
  level
- Robot Supervisor: central manager of robots and check for events such as unconscious patient. May calculate possible diagnoses and suggest early testing

N/A Sensors

#### **Proposal and Conclusion**

 Agents that communicate and interact with patients, doctors and nurses through I AN



- Capable of learning what to pay attention and know what it doesn't know (to extract it)
- Cognitive control to react correctly to varying situations (rather than precisely)

## **Proposal and Conclusion**

Awareness of unexpected events and unpredictable behaviors

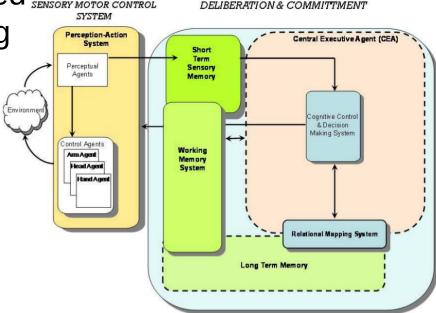
 Create a plan given current knowledge and state, or interrupt a cycle due to

new information, or folded **SENSOR** 

into the currently forming plan if information is

consistent with partial

plan



#### **Challenges**



 Ethics – model and design system to protect health, safety, and privacy of patient



- Support NLP with medical emergency vocabulary
- Conventional computer-assisted diagnosis have had limited success in improving practitioner performance and outcomes (LIDA Architecture)



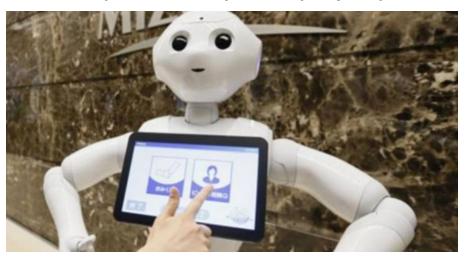
- Gather reliable measurements
- Interpretation of events during waiting (use patient's record and badge)

## **Discussion of Paper**

- Other challenges not included: handicapped, languages
- Reduction of measurements to only necessary & use of other robots such as Samsung Bot Care
   Bixby which reads blood pressure and heart rate
- Final decision of proposed diagnosis should be checked and finalized by a medical staff
- Liked: focus on ethics, use of medical record to check on patients and use of badge
- No mention of multi-agent architecture
- Implementation advances?

# **Relation to my project**

- Concept is very similar to what I had envisioned for my project
- Some additional features that can be added:
  - Knowledge of expectation in ER
  - Use of Visual Analog Scores and ESI scores for diagnosis
  - Checking patients through general cameras for events such as unconsciousness (out of scope for project)



#### Takeaway message

- A lot of work and detail is still necessary for the execution of this concept
- To start, a single robot can be put in place to understand the details and challenges in the initial phase as the patient arrives
- Further advances in AI, Robotics, and sensing will enable this implementation

