

# **Embedded Real-Time Systems (TI-IRTS)**

## **Project Report for Sapien 190 (PSIMU)**

**Spring 2010 – (Version 0.2)**



### **Abstract (Kim)**

This project report describes the specification, design and implementation of the Sapien 190 patient simulator, simulating human physiological behavior.... (200 – 300 words)

- Presentation of the problem
- Aim of the project
- Materials and methods
- Most important results
- Conclusion

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**PAsien**

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### Appendix A: Notes from meetings

### Appendix B:

### Appendix C:

## **1. Preface (Peter)**

## **2. Introduction (Peter)**

Basic RT concepts – Lesson 1 – Basic\_RT\_Concepts

Event and time driven

Soft vs. hard real-time

OOA/D and patterns for real-time systems

What is a design pattern – why is it important – Lesson 1 – DesignPatternIntroduction.pdf

### **2.1. Report structure**

## **3. Project Description (Kim)**

In this chapter we will describe the project in developing the Sapien 190 patient simulator (PISMU), simulating human physiological behaviour like pulse and ECG signals according to different patient records and scenarios. We will describe the methods and process in details covering analysis and design. Finally we will give a presentation on the achieved results and experience obtained.

### **3.1. Project context (Kim)**

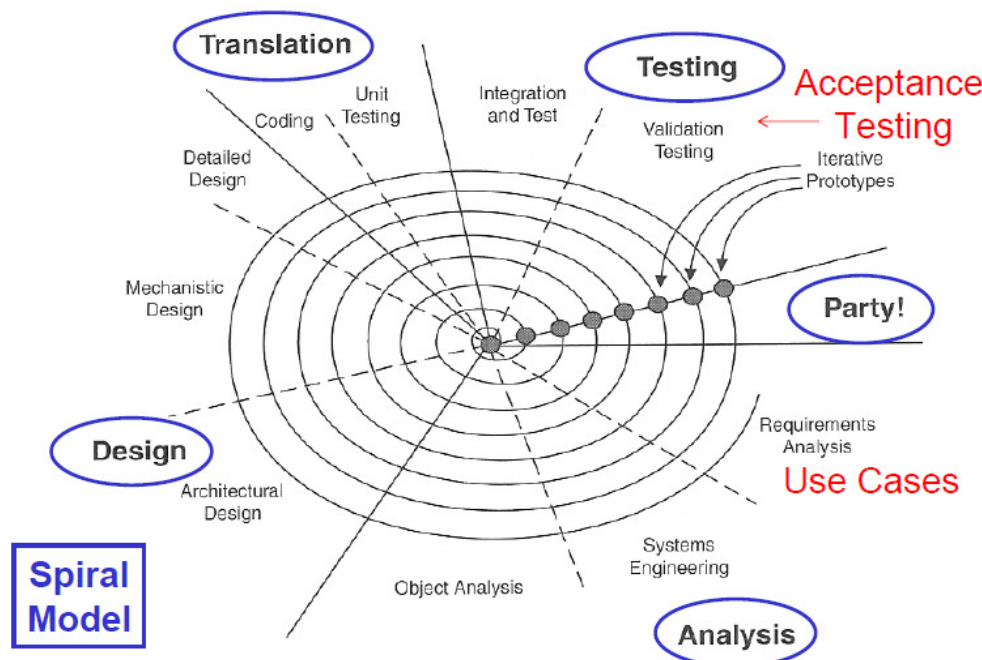
This project is part of the course Embedded Real-Time Systems (TIIRTS) in the graduated course on Technical IT. The learning objectives for this course are listed below:

- *Analyze and describe* requirements for an embedded real-time system
- *Design and construct* an architecture for an embedded real-time system
- *Judge and use* design patterns in development of an embedded real-time system
- *Develop* a product documentation for an embedded real-time system using UML

In development of the patient simulator we will focus on achieving the learning objective of this course as described above. That means our focus for this report has been on analysis, design and documentation of the embedded patient simulator. More information on the product documentation can be found in the requirement specification reference [5] and architecture document reference [4]. In this project we have had focus on applying design patterns introduced in the TIIRTS course for an embedded real-time system. In the report you will find a detailed discussion with arguments for why and how we have used different design patterns for the Sapien 190 patient simulator.

### 3.2. Project execution (Kim)

In the overall planning and execution of the Project we have been inspired of the ROPES<sup>1</sup> Development Process and Scrum. In this chapter we will describe how we have used parts ROPES and Scrum in planning and execution of the project.



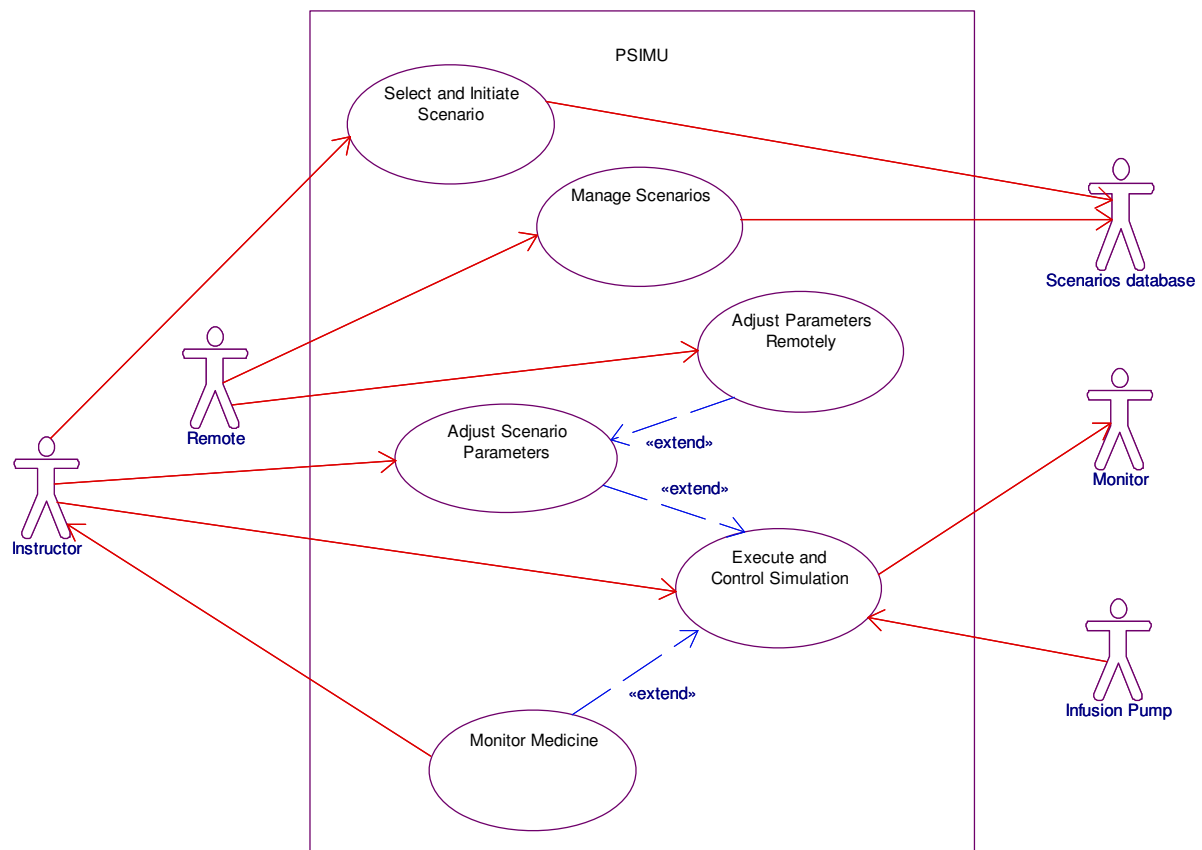
**Figure 1 ROPES Spiral Micro-cycle (Detail)**

The ROPES spiral micro-cycle model defines a number of phases to be executed for an iteration of a new prototype release. The purpose is to learn how the prototype performs being able to improve the design and implementation for every iteration. It also allows us to extend the functionality of the product in smaller steps and allows us always to have something to demonstrate. It starts with the basic requirements defined by use cases that have a significant impact on the architecture design of the product. After a number of iteration we will end up with the final product by implementing more and more use cases and functionality for each iteration. We have used the ROPES methodology for the steps we have followed for each prototype in the Sapien 190 project. We have produced a number of prototypes with different purpose to investigate the platform, technologies and finally the implementation of the functionality for the product.

In the analysis phase we have started with the requirement analysis by delivering a use case specification<sup>2</sup> for the Sapien 190 product to our "Customer = Teacher". Here we have identified a number of actors and use cases as shown in Figure 2.

<sup>1</sup> Rapid Object-oriented Process for Embedded Systems described in [2] chapter 3

<sup>2</sup> See use case specification for Sapien 190 in references [5]



**Figure 2 Use case specification and analysis**

The next step was to make a domain model for the use case "Execute and Control Simulation" and complete the first iteration in the ROPES spiral micro-cycle. The use case "Execute and Control simulation" is the most complex and significant for the architecture of the real-time part of the patient simulator. This first official prototype we have delivered to our "Customer" together with a first version of the architectural documentation and a demonstration of the Sapien 190 patient simulator. In the W-Model<sup>3</sup> by Alistair Cockburn he defines external visible deliveries for the external stakeholders of a project being able to follow the progress and give feedback to the project.

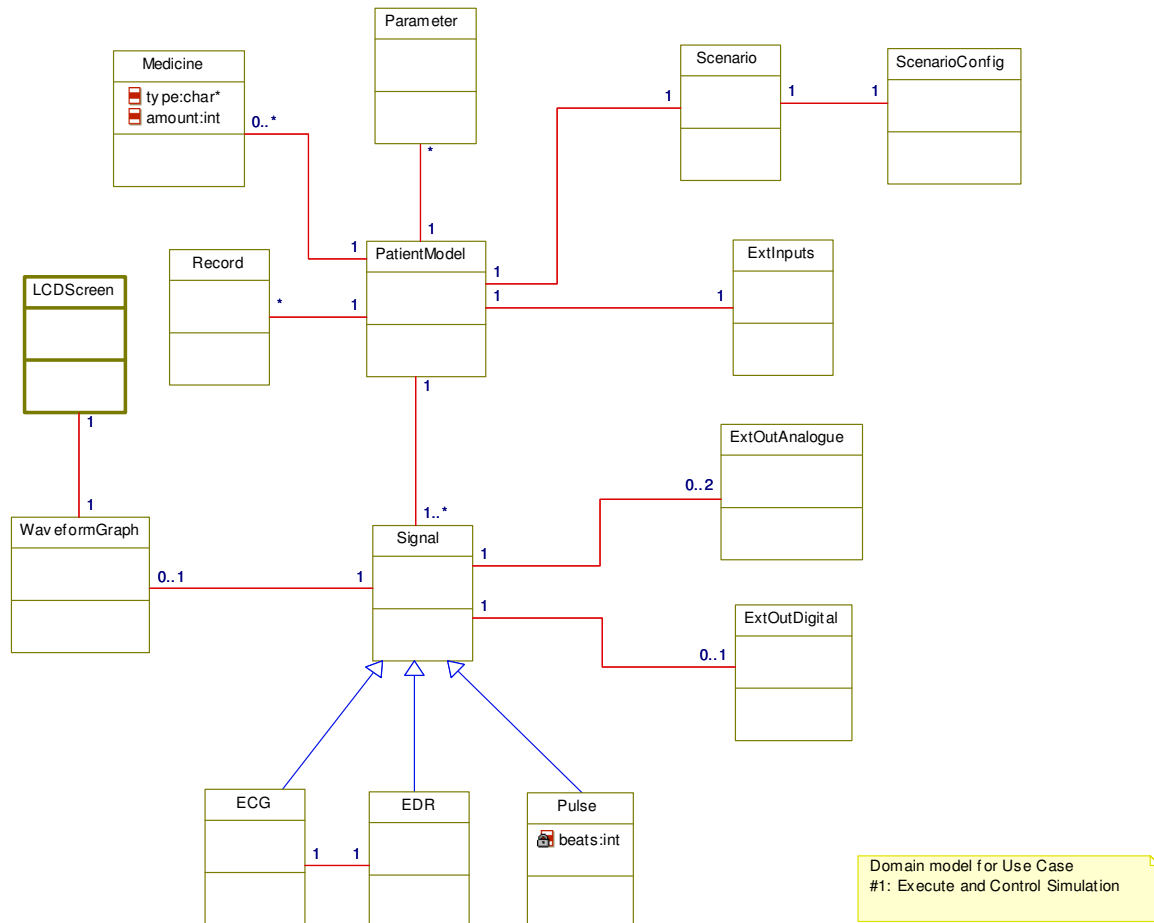
#### **First Delivery 11. May 2010**

- Updated Requirement Specification
- Draft Product Architecture Document
- Status Report
- Simulator prototype first version (Part of Use Case #1)

#### **Final Delivery 4. June 2010**

<sup>3</sup> Slide 43 from Lesson 8 – L3\_ROPES\_process

- Requirement Specification
- Product Architecture Document
- Project Report
- Simulator prototype (Use Cases parts of #1, #2 and #3)



**Figure 3 The first domain model for UC#1 Control and Execute Simulation**

At the same time using the ROPES micro-cycle spiral to develop the actual product we did make a number of experimental prototypes to reduce the number of unknowns and risk in the project. Some of the questions we had in the beginning were:

- Would it be possible to generate the analogue ECG signal from user space in Linux on the target platform with the sampling rate of 250Hz?
- What would the CPU load be?
- How to plot the waveform ECG signals on the LCD screen using Qt?
- How to cross-compile the patient record WFDB library to the Linux target platform?

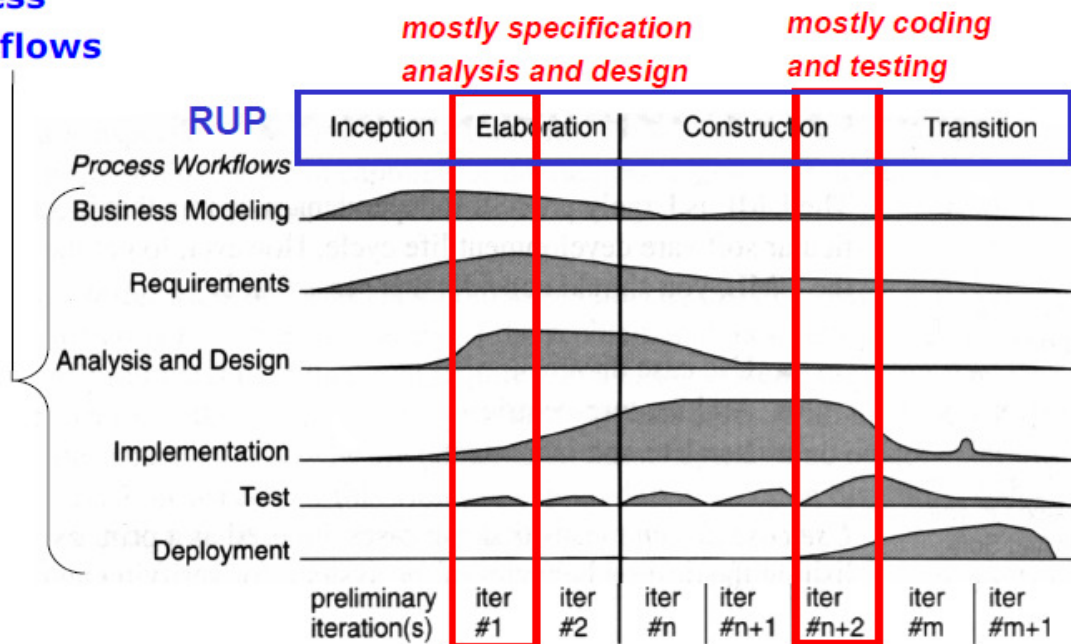
The first prototype was to reduce risk by investigate how to use the embedded Linux platform in reading patient record on the target and output the analogue ECG signal. The second prototype was to investigate how to develop with Qt and creating a waveform ECG graph based on the patient record readings.

The following prototypes has been about producing functionality according to the use case specification, where for every iteration parts of a use case or more use cases has been included. These prototypes has been developed by a combination of automatic code-generation from a Rhapsody UML model and source code manual written for the HW and OS abstraction layers. The GUI has been written using Qt from Nokia and integrated with the manual code and code generated from Rhapsody.

ROPES describe the key enabling technologies like visual UML modeling, model execution and mode-code associativity. These key technologies has been possible to realize in this project by use of the IBM Rhapsody UML design tool not only for drawing UML diagrams, but also for high level modeling and automatic code generation. This approach has enabled the development process to focus on design instead of implementation. The ROPES key technologies has been a help to make fast iterations between testing new design ideas, by animation of state charts, setting breakpoints in Rhapsody and inspecting variables and states in the model. This higher level modeling approach compared to normally coding, debugging and testing has turned the development process to be more design focused than traditional development. We have used the animated sequence diagrams for test documentation and generating the code directly to Linux and the target platform, which has saved us for time fixing typing errors and trivial debugging and test.

The Rational Unified Process (RUP) has a process workflow that specifies a number of phases: Inception, Elaboration, Construction and finally Transition. In each phase a number of iterations are perform like in ROPES. In the beginning focus is on the process workflow requirements and business modeling. In this project we have primary been working in the elaboration phase working with 2 major iterations of product release. Since focus for this course in some extend has been design patterns, we have use most the time in the elaboration phase with focus on the architectural and mechanistic design of the project.

## Process Workflows



**Figure 4 Rational Unified Process workflows**

In controlling the progress of the project we have had regularly meetings in which we have been inspired from the way Scrum meetings are organized. In every meeting we have used time on each project member giving a short status of what has been done, issues and problems discovered since last meeting based. The status is based on the planned activities from last meeting. An updated list with notes of meeting status has been updated for every project meetings see appendix A. On every meeting the backlog in Scrum terms has been updated according to our eventually changes priority. We did not define a scrum master or product owner, but on every meeting one of the project members did take the lead on updating the status list and together we did a prioritization of the backlog (Pending activities). Below see example for the contents of meeting status.

Scrum Status 25. May:

<Name>:

Done:

- Meeting minutes
- Added text to Chapter 5

Problems:

- What exactly to put into ch 11+12

Next:

- Architecture document chapter 11. and 12.

Next scrum meeting Tuesday at 9:00

- Scrum status
- Status on writing Architecture document
- Status on report writing and assignment of tasks
- Continue to 16:00



Action list (Backlog) to final delivery 04. June:

- Finalize Product Architecture Document
- Finalize Project Report
- Implement ECG to Pulse filter

.....

Notes to be deleted:

Scrum meetings and minutes – Lesson 8 – Scrum short

Schedule – Specification

Part of ROPES – Lesson 8 – L3\_ROPES\_Process

ROPES Microcycle for UC#1 (3-4 weeks for D1)

Iterations see specification D1 and D2

Prototyping (First prototype with technology clarification)

Model Base Development (Testing design in Rhapsody)

Risk analysis – see minutes notes (NotesMeeting1904\_2010.txt)

Fast prototype to reduce risk of new technology

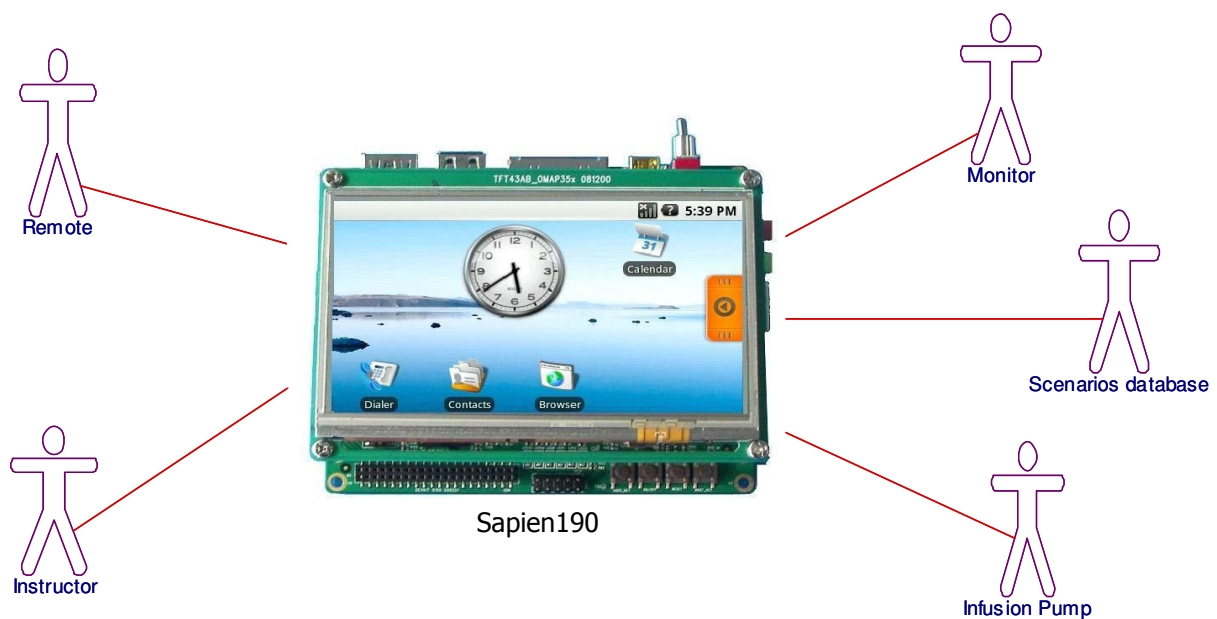
WFDB patient record library on target

HW interfacing on target and load

GUI programming with Qt

### 3.3. Analysis process and methods (Kim)

In the requirement analysis phase with reference to the ROPES spiral model we have created a number of use cases to define the required functionality of the product. A detailed specification of this work can be found in "Requirement Specification for Sapien 190" [5]. The first step has been to define the actor-context diagram to identify the actors of the patient simulator. Here we have used the specifications of the PSIMU, LMON, IPUMP and interface specification referenced in [5] chapter 1.2



**Figure 5 Actor-Context Diagram**

The second step in the use case analysis was to identify a number of use cases for each actor as illustrated in use case diagram Figure 2. These use cases is described in details in the identified to be:

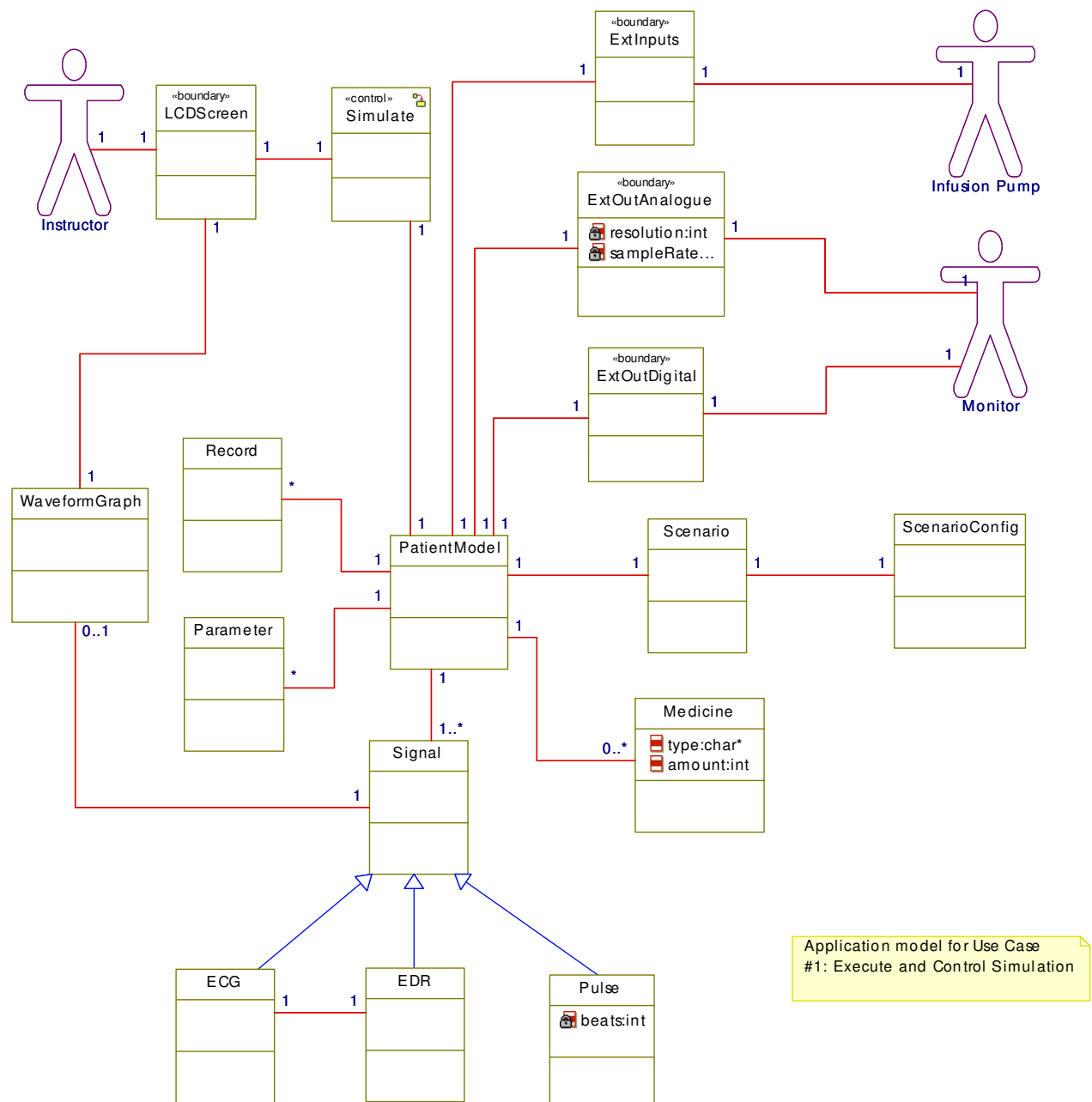
- 1. Execute and Control Simulation**
- 2. Select and Initiate Scenario**
- 3. Adjust Scenario Parameters**
- 4. Monitor Medicine**
- 5. Manage Scenarios**

For each use case specification a main scenario and extension is described like on page 9 in the "Requirement Specification for Sapien 190" [5]. This document contains the textual description of the system context, interface to external actors, non functional requirements like performance, prioritized product qualities and design constrains. Finally the document contains a description of the original planned deliveries of use cases to be contained in the two first deliveries to our "Customer". We have prioritized maintainability, correctness and usability as the most important quality factors for the patient simulator. The simulator application is expected to have a longer life time than the hardware and must be able to be maintained for many years in the future. Therefore it is important for the product to focus on these factors in creating the architecture and design.

The domain analysis is based on the use case requirement specification where we did start with the use case "Execute and Control Simulation". This approach is defined in the Unified Process<sup>4</sup> (UP). A domain model is created to identify the conceptual domain classes and relations between them to give us a better and deeper understanding of the actual problem. We have chosen the "Execute and Control Simulation" use case to be the first in creating this domain model since it is the most complicated and contains the essential functionality for the patient simulator. The UML domain class diagram is illustrated in Figure 3. To this first domain model we added boundary and one control classes. The purpose of the boundary classes is to separate the model from the external actors and the control class is used to encapsulates the control of the scenario described in the UC#1.

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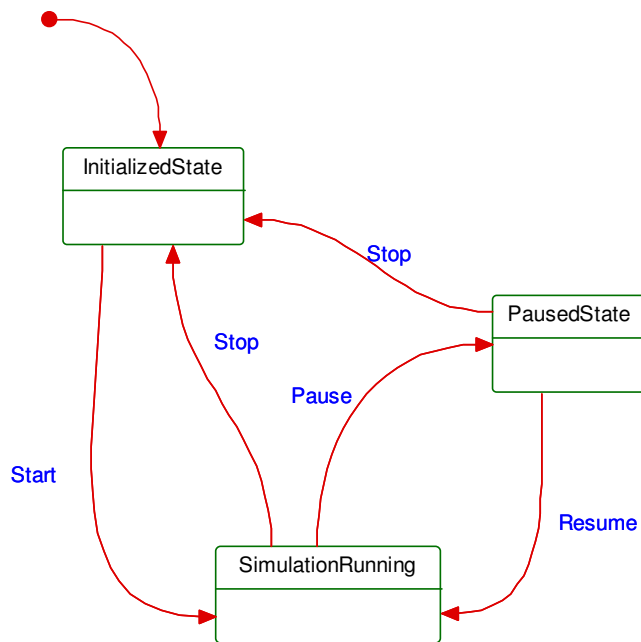
<sup>4</sup> Craig Larman, Applying UML and Patterns, Third Edition chapter 9 Domain Models



**Figure 6 Domain model with boundary and control classes**

In the domain model for this first iteration we have identified all the important classes and the relations between them. The domain model is saved in a separate Rhapsody project since the domain model in the following design iterations is changed a number of times. The domain model illustrates how the patient model is the central class for coordinating the patient simulation. When the patient simulation is running it will perform reading of the digitized physiologic signals from a record and send these "real time" values as analogue signals to local connected bedside monitoring equipments. Up to 2 analogue channels with different signals is possible to be simulated simultaneously. The simulated signals can be ECG or EDR. The pulse will be signaled to the bedside monitoring equipment as a digital

signal. The basic idea is that the instructor later should be able to select between different scenarios that describes the configuration of a simulation which include a certain patient model (Normal or with Infusion Pump), patient records from the PhysioBank<sup>5</sup> database and parameter settings for the simulation like gain and rate for replaying the patient record. More details can be found in the requirement specification [5]. In the UML state diagram below we have added a simple functionality for the instructor to start, stop, pause and resume the patient simulation with a fixed scenario configured for the final prototype. That means UC#1, UC#2 and UC#3 is implemented without being able to select a scenario in UC#2.



**Figure 7 State chart for domain control class simulate**

Part of the analysis phase we have identified a number of external and internal generated events that plays an important role in constraining and defining the system behavior. The events listed below are crucial for analysis of the schedulability and deadlines later in the design process (RMA analysis). For this analysis we have defined number of parameter that can be adjusted to find the optimal timing and scheduling being able to generate the ECG, EDR and the pulse signal. At the same time we should be able to processing information from the IPUMP and updating the waveform signal graph on the LCD screen. A frame buffer has been defined for the number of samples to be collected before updating the LCD screen.

<sup>5</sup> <http://www.physionet.org/physiobank/physiobank-intro.shtml>

### Internal and external event list

#	Event Id	System response	Arrival Pattern	Event Source	Response time
1	Sample	Calculate and generate EDR and ECG signals	Frequency of 250 (Fs) max 400	Internal timer	Less than sample periode
2	Pulse	Calculate pulse every 200 (Np) samples	Fs/Np	Internal timer	Less than sample periode
3	PDU	Updates medicine information	Every second (Fi)	IPUMP	Less than ½ second
4	FrameBuffer	Updates signal graph on LCD display	Every 50 (Nf) samples (1/8 of LCD display in pixels)	Internal timer	Less than period updating framebuffer

### Parameters identified to be used for RMA analysis in design phase:

Time units		Default value	Units
Fs	Sample frequency	250	Hz
Np	Num samples for pulse calculation	200	Number
Fi	PDU frequency	1	Hz
Nf	Frame buffer size	50	Number

Notes to be deleted:

Analysis method (Identification of the essential characteristics of possible correct solution)

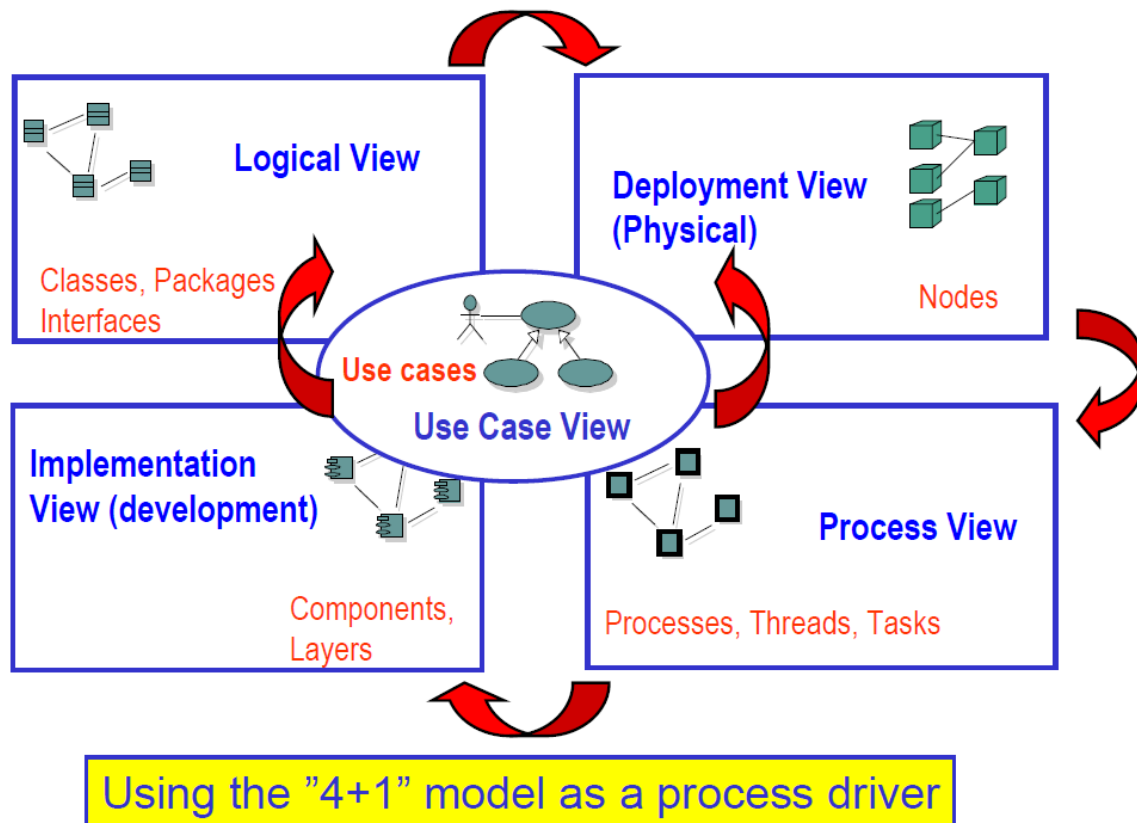
Use Case Specification and analysis work

Use case UML domain model analysis

Event analysis

### 3.4. Design process and methods (Kim -> Anders -> Peter)

We have used the 4+1 view designed by Phillipe Kruchten<sup>6</sup> as the process driver for the design work in the project. The Use Case view is the driver for focus on what to design in the other 4 views as show in the figure below. We have started with UC#1 defining a number of scenarios that is used as the foundation for the architectural, mechanistic and detailed design that is described in details in the "System/product architecture document for Sapien 190" reference [4].



**Figure 8<sup>7</sup> "4+1" view model**

The UC #1 has been selected for the first iteration of the ROPES spiral microcycle in making the architectural, mechanistic and detailed design. This use case is significant and provides the central functionality of the patient Simulator and contains the real-time constraints. This use case provides the basis functionality that allows the monitor to be connected being able to display the ECG and EDR signals. It also reduces the risk for developing the patient monitor since it covers all the unknown technologies of the product like:

- Reading the patient record files on the target (Linux, WFDB and target)
- Generating the analogue output signals (Writing to drivers)

<sup>6</sup> Kruchten, Phillipe, Architectural Blueprints – The "4+1" View Model of Software Architecture

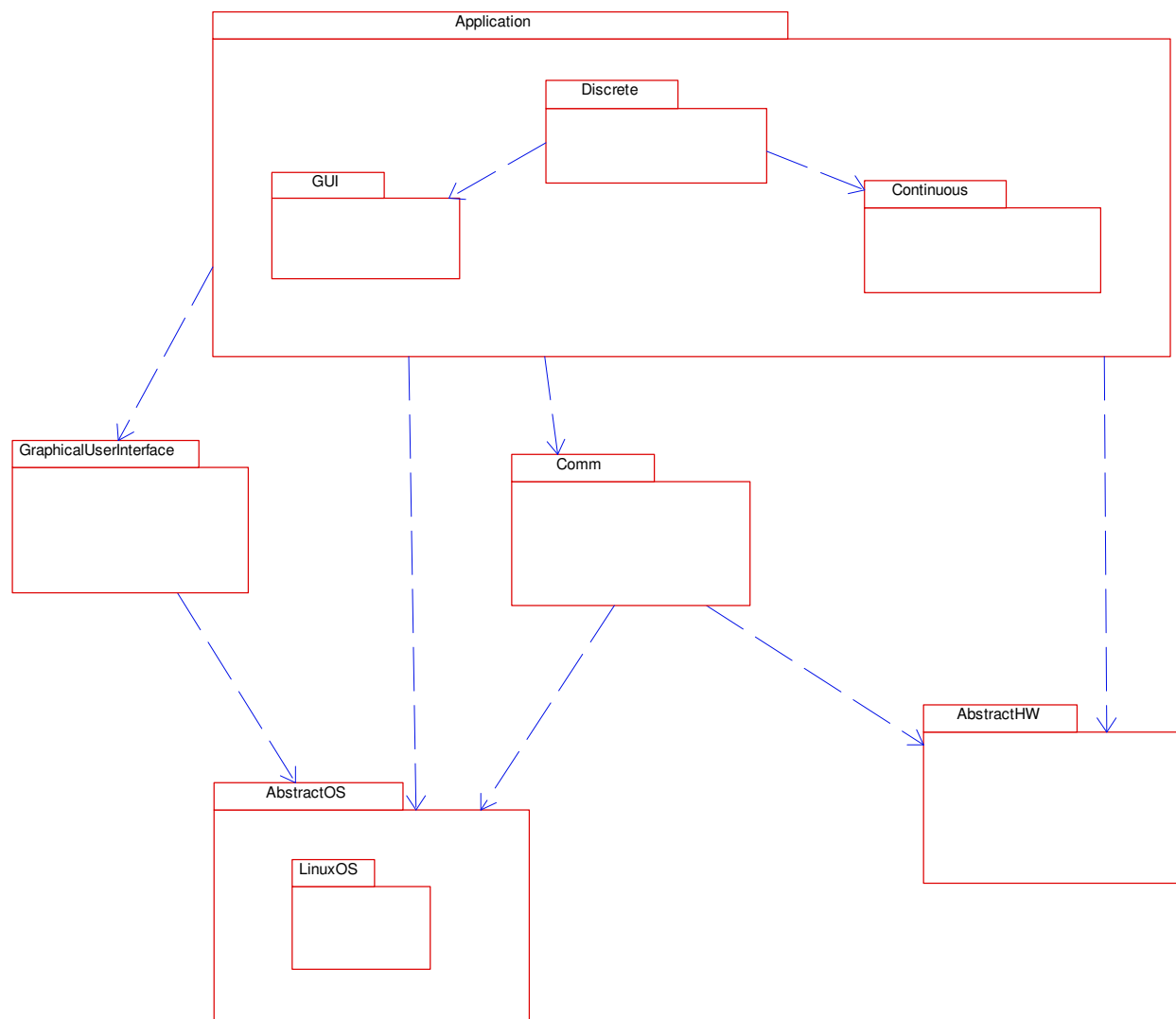
<sup>7</sup> Slide 4 from Lesson 8, DevelopmentOfRealtimeSystems

- Display of signal waveform using Qt on target (Working with Qt on target)

The deployment, logical, process and deployment views are designed according to the steps described in development of real-time embedded systems<sup>8</sup>:

- Step 2: Find and document use case #1, #2 and #3 (Chapter 4. and 5.3 Ref. [4])
- Step 3: Select a suitable HW architecture (Chapter 7. Ref. [4])
- Step 4: Develop a logical model (Chapter 5. Ref. [4])
- Step 5: Select a concurrency model (Chapter 6. Ref. [4])
- Step 6: Design, Implement, Test and Measure (Chapter 6.5 Rate Monotonic Analysis Ref. [4])

The architectural design is based on the five-layer architecture pattern described in chapter 4.2 reference [2] illustrated in the package diagram shown below.



**Figure 9 Five layered architecture for logical view**

<sup>8</sup> Slides 1 – 17 Lesson 8, DevelopmentOfRealTimeSystem

Each abstraction layer is a logical layer representing a well defined domain. Dividing the system into several layers ensures high cohesion for each domain and low coupling between the domains. This simplifies the process of modifying our design or extending it. The application package uses the two-part<sup>9</sup> architectural model for the discrete and continuous parts of the patient Simulator. These packages contains also the most complex part of our design. After having defined the overall architecture of the design we have focused on mechanistic design of the continuous and discrete package by refining the domain model in where we have introduced a number of creational, structural and behavioral design patterns from the GoF<sup>10</sup> book.

The list below briefly summarize the patterns that has been used in the design:

### Behavioral Patterns (GoF)

- **Observer** (Updating waveform graph) – To notify the UI with a new frame buffer of samples that is updating the waveform graph. By use of this design pattern it would be easy to extend the design with new observers like creation of a FFT view of the ECG signal. This solution separates the continuous package being direct depended on the UI controller in the discrete package.
- **Command** (Setting parameters) – Encapsulates setting parameters in the continuous package by sending a request as an object, thereby letting the UI controller being able to send different type of parameters. It hides the way the parameter is updated in classes that belongs to the continuous package.
- **State** (UI controller in discrete package) – The UI controller depends on its state. The state pattern has been used to handle state changes in combination with the command pattern. Currently this choice is perhaps a bit overkill compared to the simple state machine described in Figure 7, but it will be easy to extend when adding selection of scenarios and new functionality in the future.
- **Command** (In combination with state) – The command pattern has been used in combination with the state pattern to encapsulate generating events to the state machine in the discrete package. This design makes it easy to add new events when the state machine is extended in future software releases.
- **Mediator** (Updating medicine information from IPUMP) – Promotes a loose coupling between the communication package and the continuous package. It provides a way to extend the product by adding different types of devices that can provide inputs to the patient model and thereby manipulating the patient simulation.

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<sup>9</sup> Hans Peter Jepsen, Finn Overgaard Hansen, Designing Event-Controlled Continuous Processing Systems

<sup>10</sup> Gang of four, Erich Gamma and co., Design Patterns, Elements of Reusable OO Software



- **Strategy** (PhysioModel) – It defines the family of algorithms to compute the patient simulation. Different types of algorithms can easily be added in combination with the filter and pipes pattern. Currently we have designed the NormalModel and InfusionPumpModel more details to be found in chapter 3.4.3.
- **Iterator** (Reading records) – To provide a way to access samples in the records without exposing the underlying representation. The same iterator is used for reading patient records and generating signals for testing.

### Structural Patterns (GoF)

- **Proxy** – (Reading records) - To provide a place holder for reading records. The proxy pattern has been selected for future extension in where the proxy pattern could be used in combination with the broker pattern as described in chapter 8 reference [2]. This approach would allow us to access records directly from the PhysioBank database on the internet reference [3].
- **Façade** - (Class in continuous package SimulatorRealtime) – To provide a simple unified interface for the subsystems of the real-time part of the patient simulator. It makes it easier for the UI controller to operate on the complex structure of classes in the continuous package.

### Creational Patterns (GoF)

- **Factory method** (Creating records and filters) – The factory method pattern has been used to make it easy to create new patient record objects. Methods in the façade of the SimulatorRealtime class are provided to generate new objects based on the record file name.
- **Singleton** (DAC + Command State pattern) – Ensure that the states only has one instance and is only created ones. This approach saves a lot of new and deletes operation every time a state is changed in the UI controller. The DAC also uses a modified singleton ensuring we only have one instance per DAC channel. The flyweight<sup>11</sup> pattern could as an alternative be used to ensure only one object per channel. Would be a better approach moving to a platform with many DAC channels.

### Concurrency Patterns (B.D.)

- **Message Queuing Pattern** (A mailbox of frame buffers) – Used to transfer frame buffers as asynchronous communication messages between the real-time thread and the distributor thread. The frame buffers are used to update the waveform graph by using the observer pattern.
- **Monitor** (Classes PatientModel and FrameBufferPool) – Used to protect shared information between the different threads in the system. The classes PatientModel and FrameBufferPool are designed as monitors since different threads should be synchronized in invocation of methods operating on the same data.

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<sup>11</sup> The Flyweight pattern is a structural pattern in GoF. The pattern is used to share a large number of fine-grained objects efficiently.

### Memory Patterns (B.D.)

- **Pool Allocation Pattern** (Allocation of frame buffers) – Creates a pool of frame buffers that is used by the real-time and distributer threads. Frame buffers are created on startup and available on request by the real-time thread. This approach save time performing new and delete operation and it ensures a more predictable real-time thread.

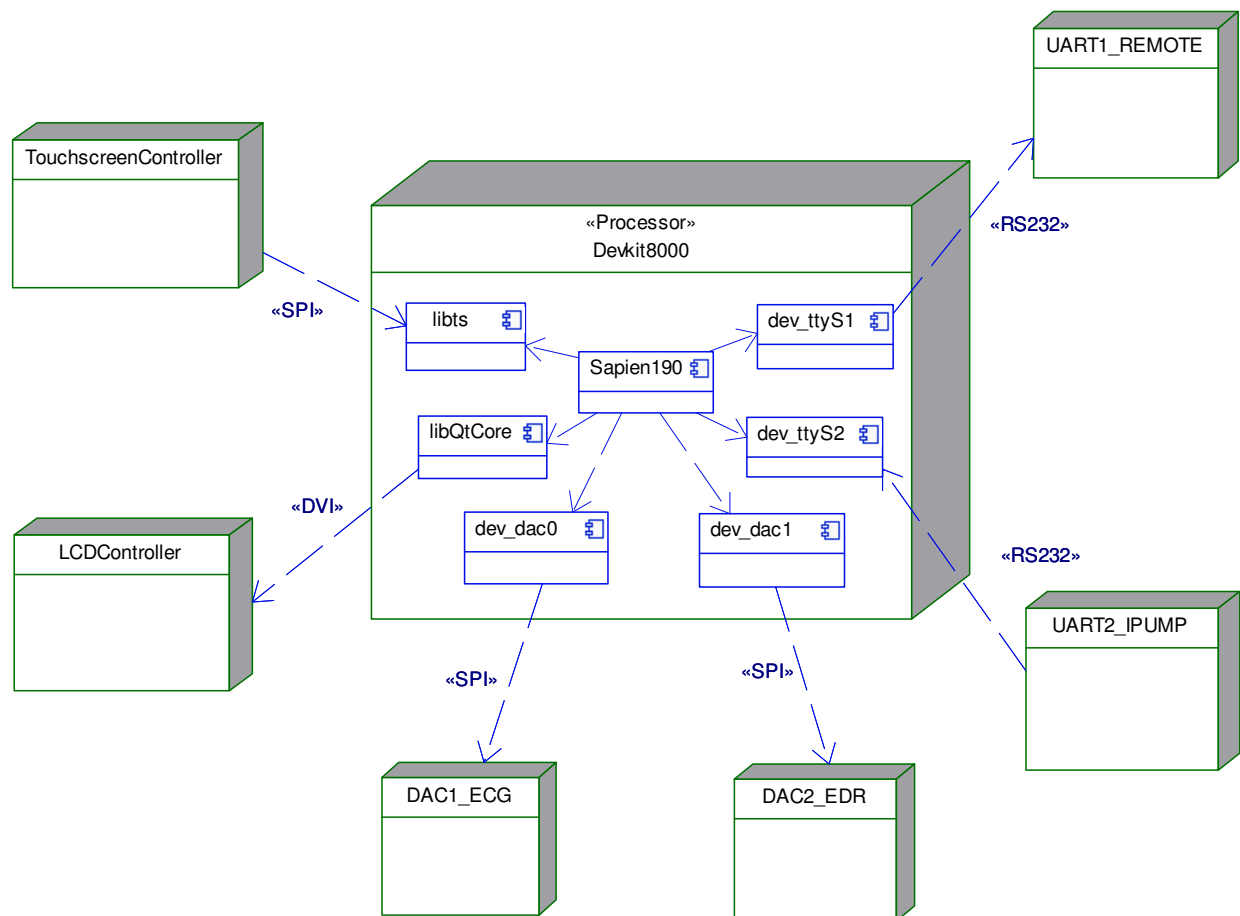
### Other patterns

- **Filters and pipes** (Filter and calculation of samples) – The filters and pipes pattern is used to compute samples for the different signals (ECG, EDR and Pulse) based on record readings. The structure of the filters and pipes are setup by the strategy (NormalModel and InfusionPumpModel). Different filters is designed for generating the EDR signals, adjusting the gain of the input signal and generating the pulse based on the ECG input signal. The filters and pipes design pattern makes it easy to add more filters or setup of new strategies for computing signals.

In the following chapters we have chosen to give a summary based on the architecture document of some of the essential designs we have implemented. There will be a discussion on the considerations and choices we have made. We have also give a more detailed discussion on some of the design patterns described above.

#### 3.4.1. *Deployment view*

Our target platform is the DevKit8000 that is running Linux. The Sapien 190 application is dependent on Qt libraries and library for the touch screen. The essential hardware components for generating the ECG and EDR signals is the digital to analog converters (DAC) on the add-on board. Linux drivers were already implemented being able to send one sample value at every write to the driver. A better solution would be to write a more complicated DAC driver that was able to send out a buffer of samples based on a sample rate set from the application. This driver could be implemented using the kernel timer API or creating a process in kernel space. This solution would be more accurate than to use a thread running in user space as we have done in this project. Since Linux driver development is not part of this course we have decided not to choose this path in our development strategy. Actual the solution we have made seems to be good enough as long the target platform is not running other heavy CPU consuming applications like Ethernet network traffic.



**Figure 10 Essential HW nodes used from DevKit8000 used for Sapien190**

### 3.4.2. Logical view - discrete package

The figure below illustrates how the command and state pattern is used to implement the state machine for the UI controller in the discrete package. We have modified the state pattern represented with the SimState class and its sub-states. We have implemented a bidirectional association between the context (UI Controller) and state (SimState) to remove passing the reference to the context every time a command is executed and the state is changed. Instead the reference to the context is passed to the state when it is created. The approach has been implemented for the command pattern. Every time a command is created an association to the state is established and thereby saves passing a parameter to the execute method in the command. Since this part of the design is using a number of Qt classes and primitives like slots and signals we have only used Rhapsody as a drawing tool for this part of the design see complete UML class diagram for design of the command and state pattern.

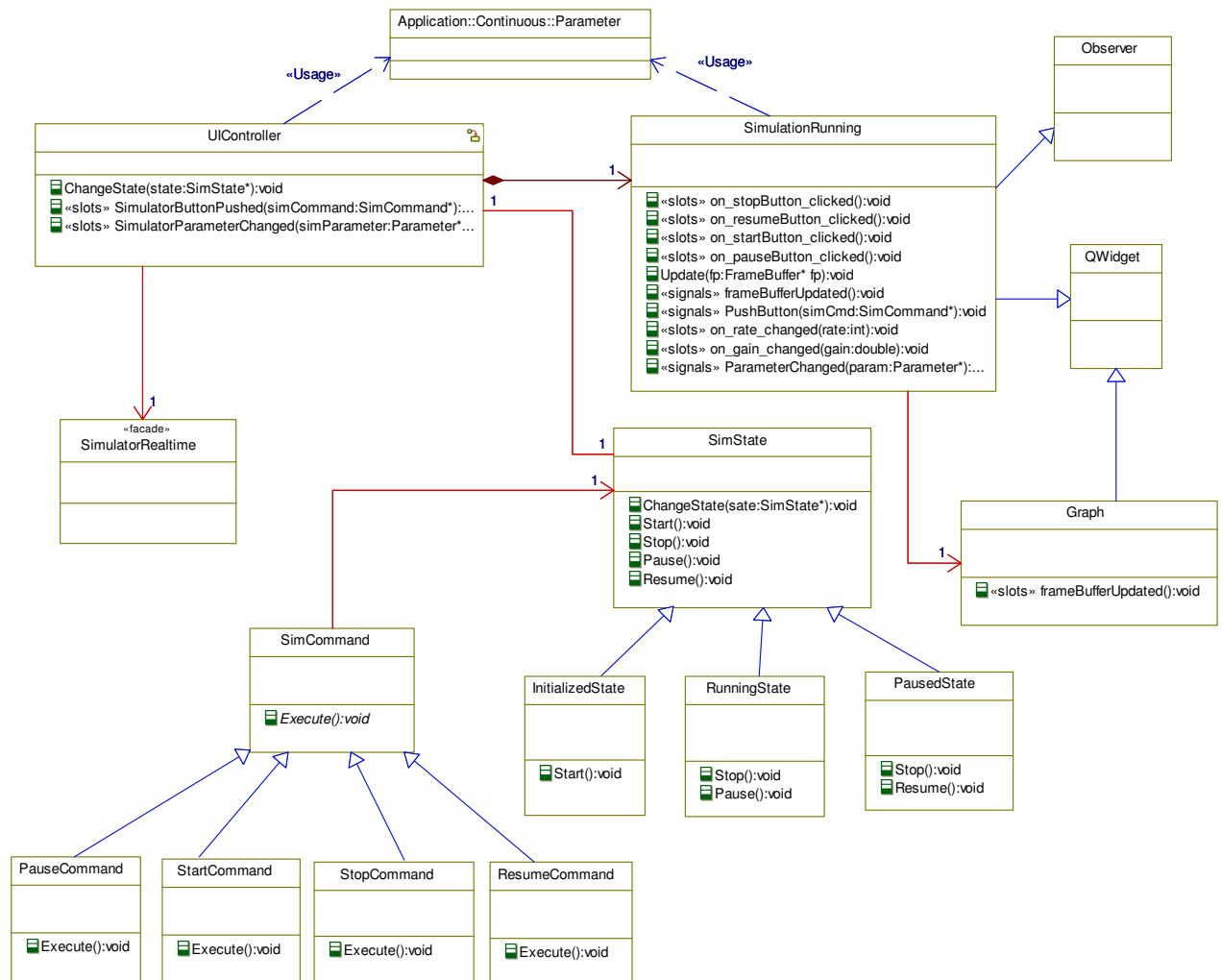


Figure 11 Command, State and Observer pattern used to design SapienApplication (Controller)

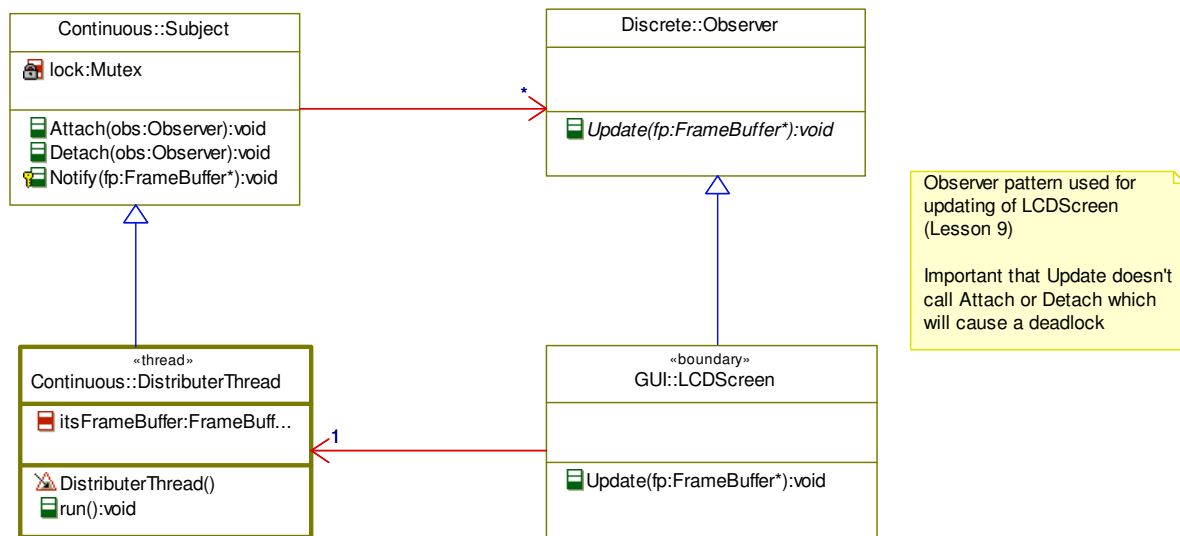


Figure 12 Observer pattern used to notify GUI with new frame buffer

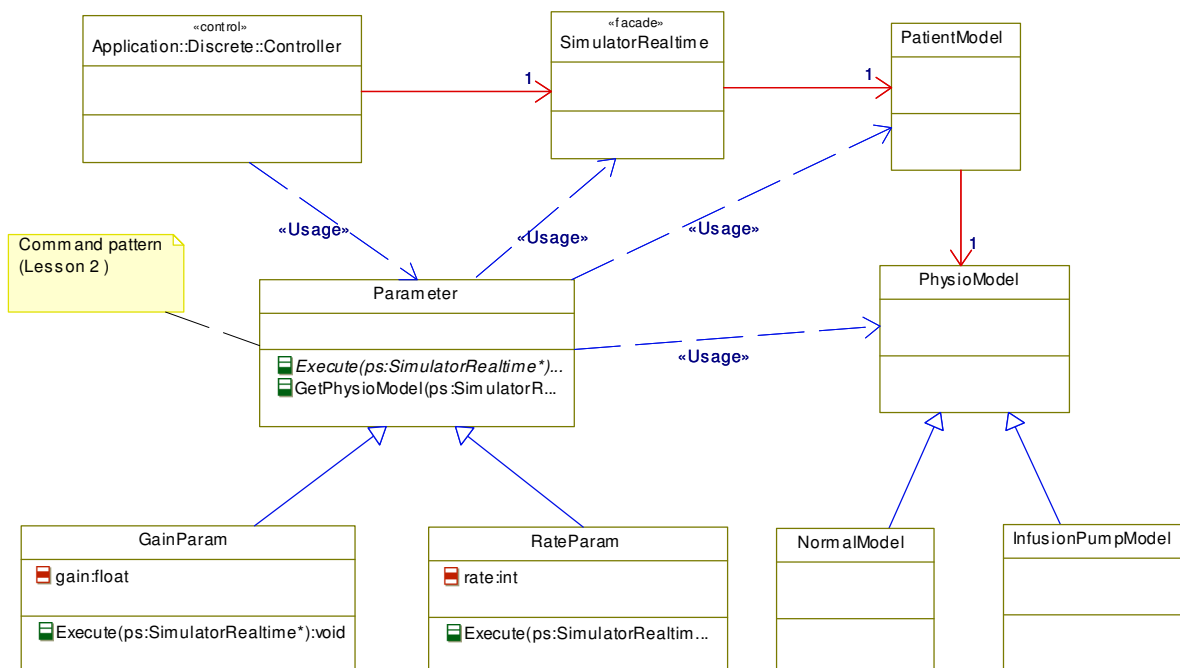


Figure 13 Command pattern used to set parameters in real-time simulator

### 3.4.3. Logical view - continuous package

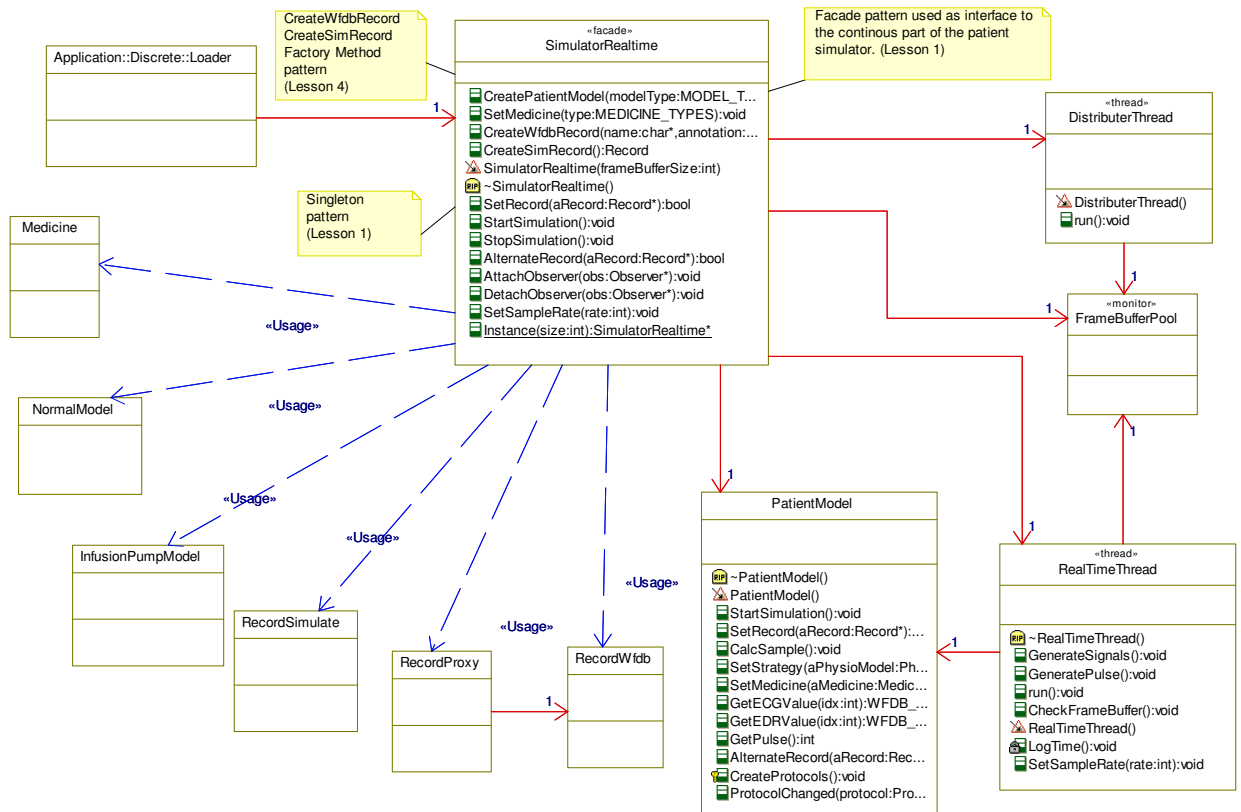


Figure 14 Façade Pattern used for interface to the Continuous Package

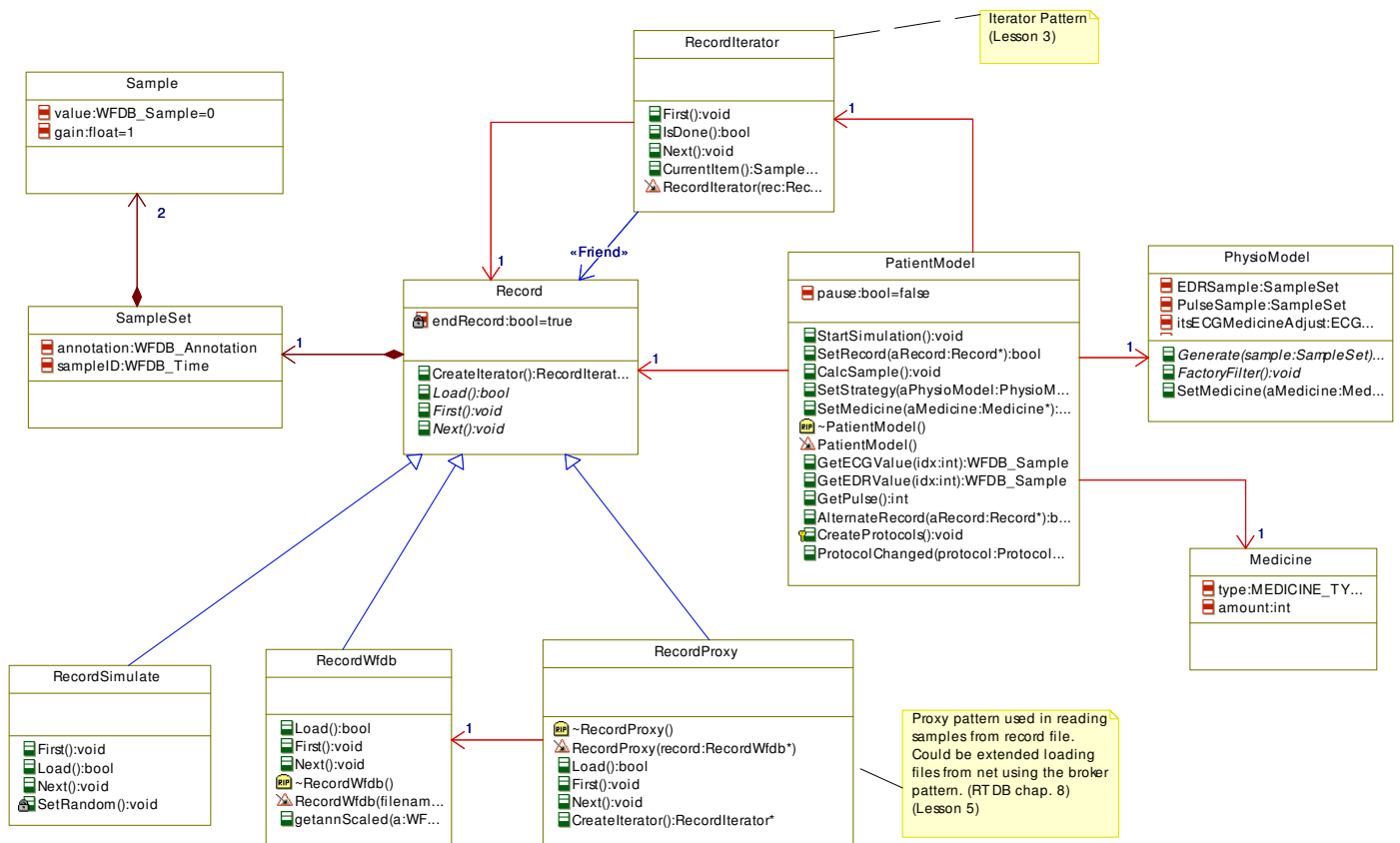


Figure 15 Proxy and Iterator Pattern used to access Records from the PatientModel

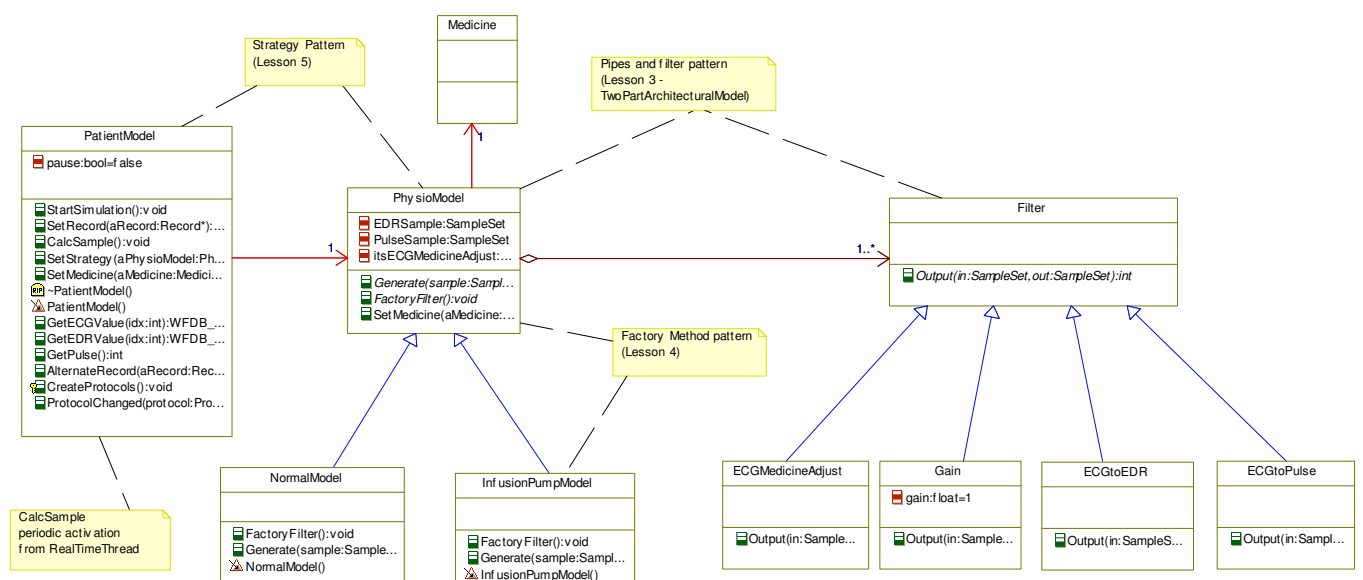
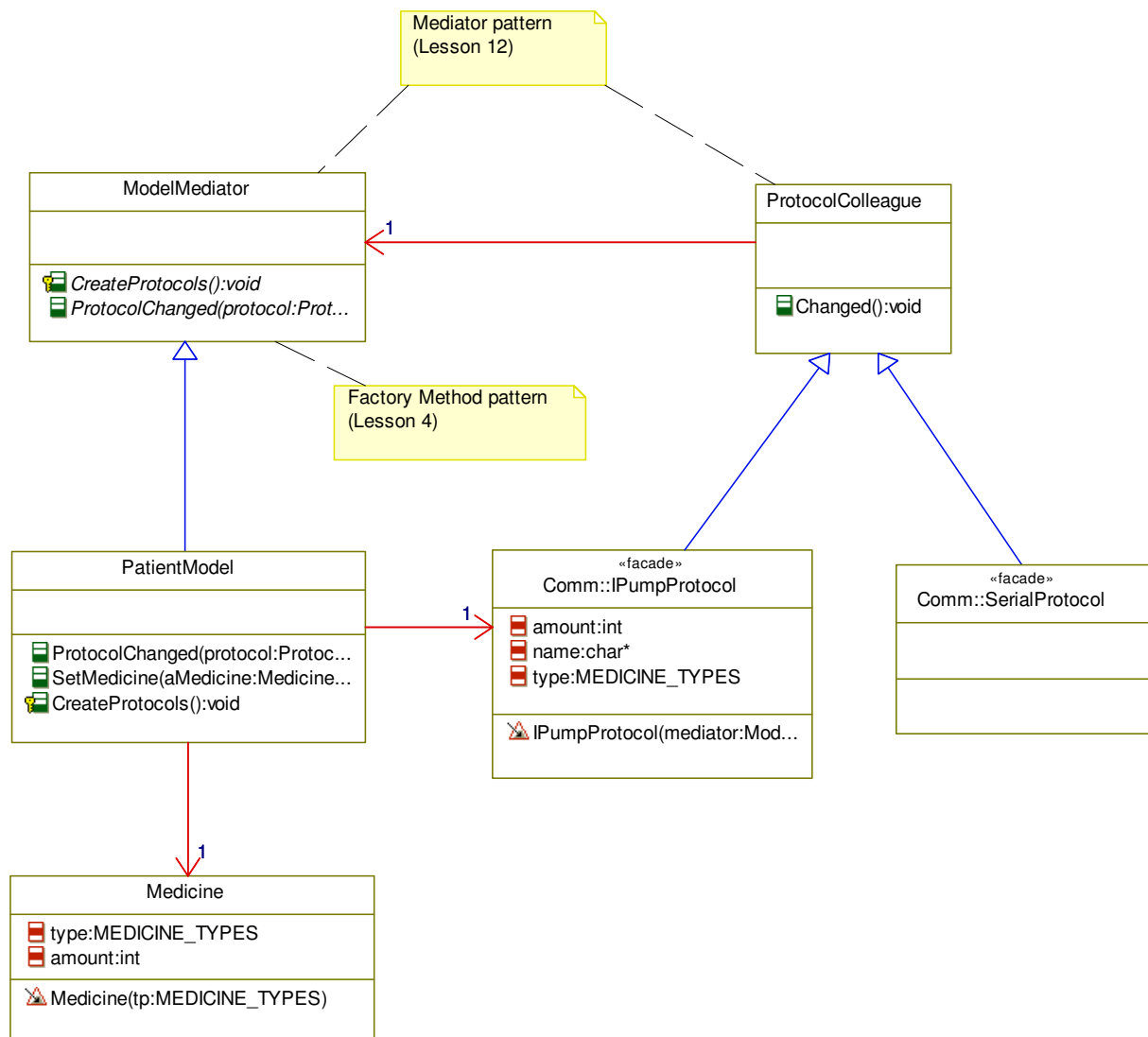


Figure 16 Strategy, Filter and Pipes Pattern used for PhysioModel

#### 3.4.4. Logical view - communication package



**Figure 17 Mediator pattern used to update PatientModel with external input from protocols**



### 3.4.5. Process view

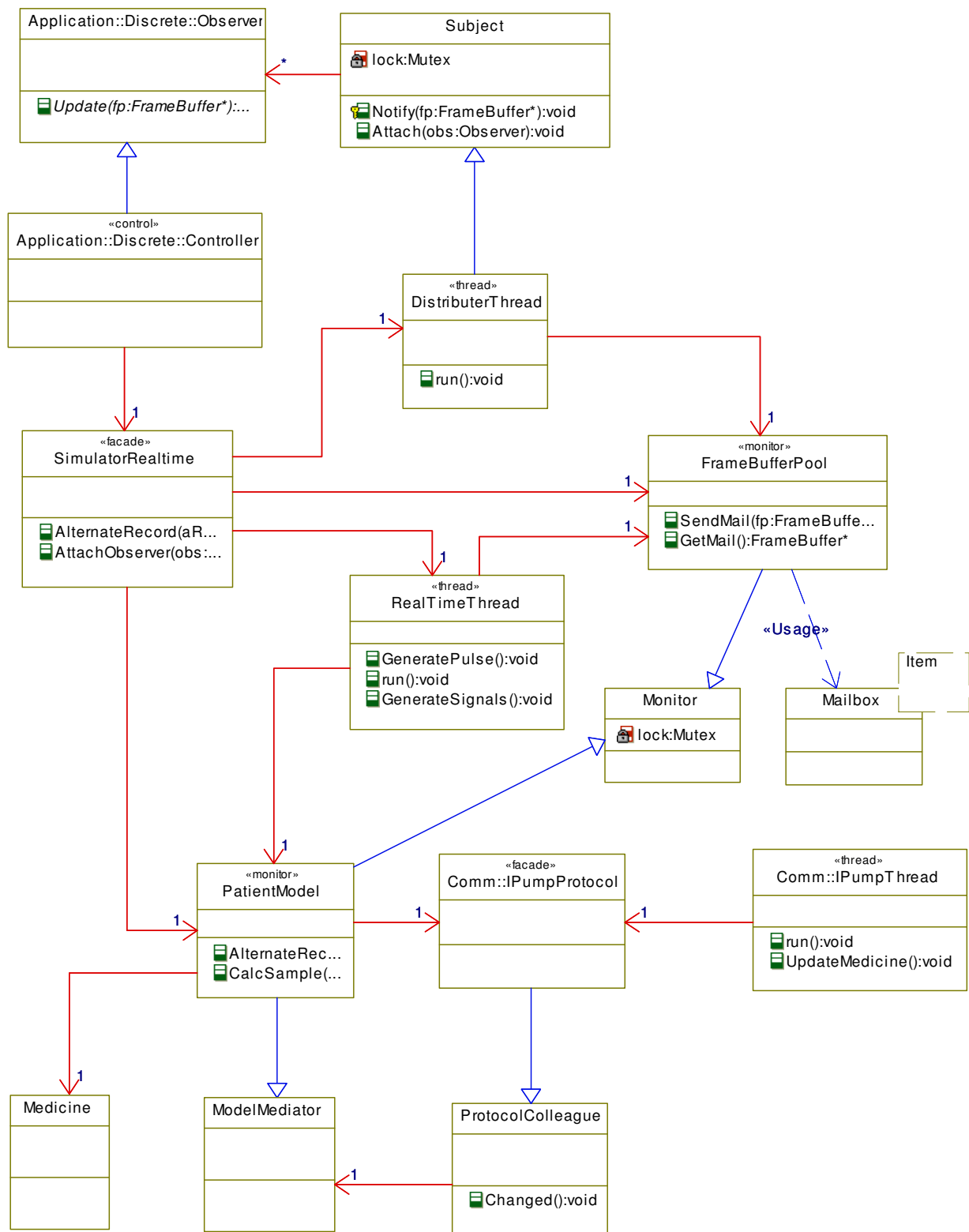
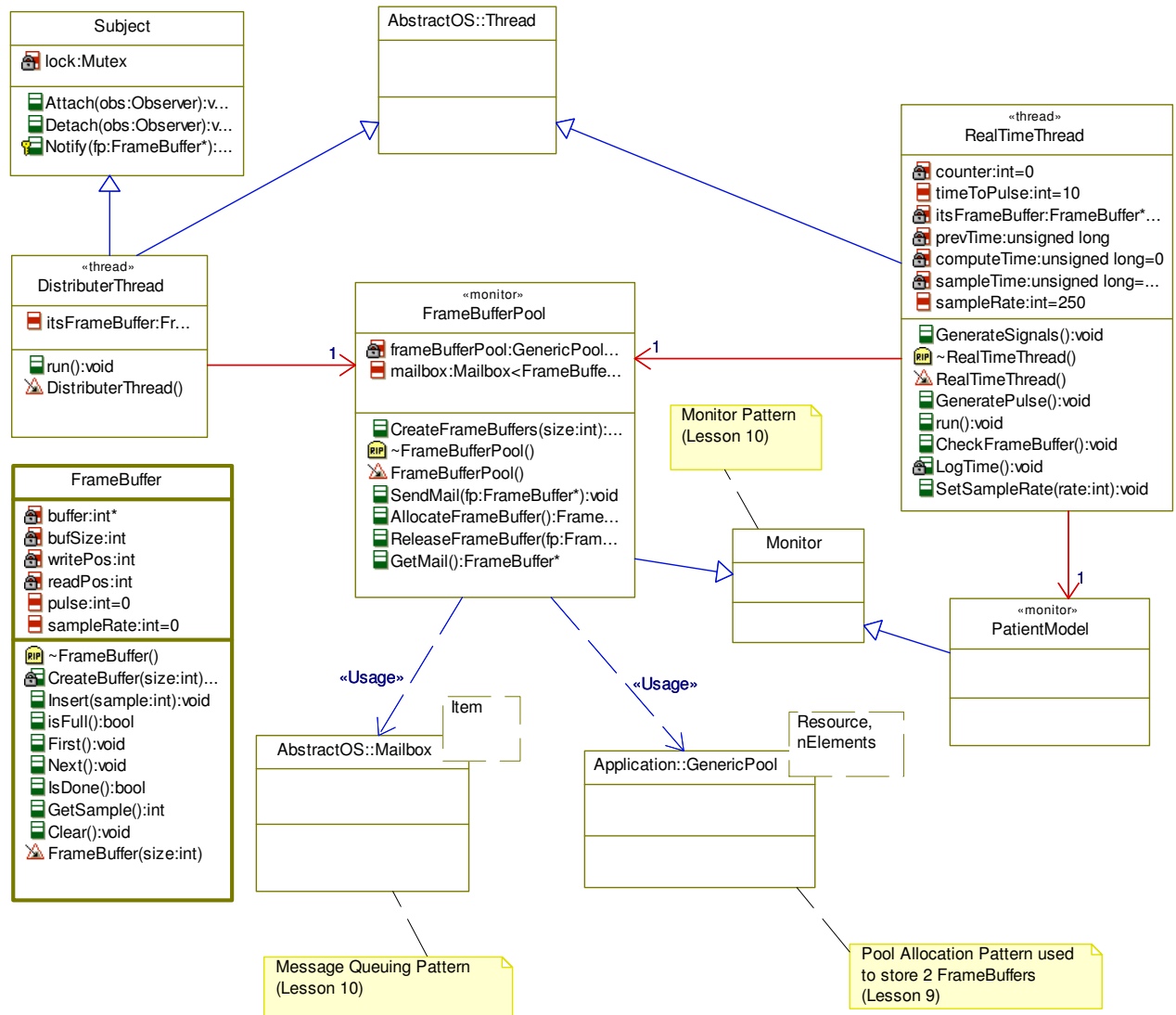
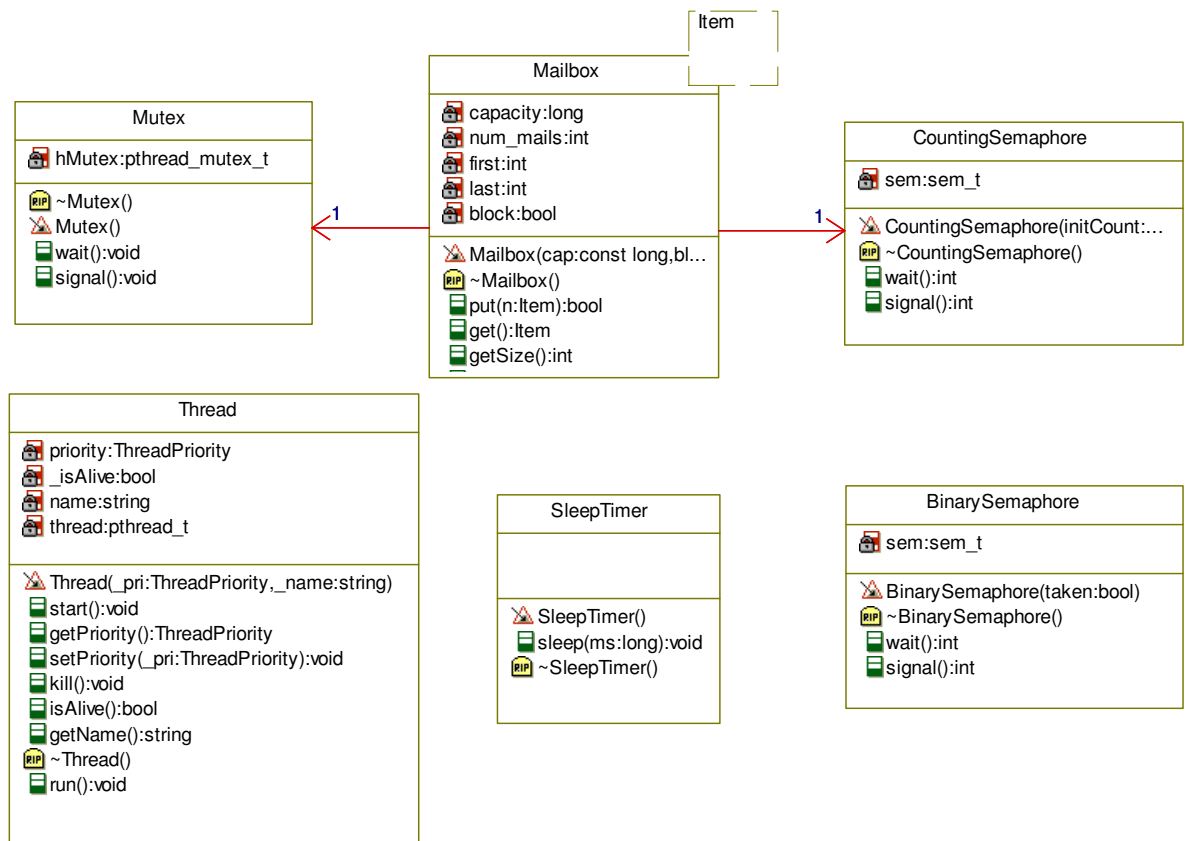


Figure 18 Overview of all threads for the Sapien 190 design



**Figure 19 Process view for Distributer and RealTime threads and mechanism for synchronization**



**Figure 20 Abstract OS (Linux)**

Based on the event analysis made in chapter 3.3 we have included a Rate Monotonic Analysis of the scheduling of threads. The WCE times and blocking delays is based on measurements and estimates. We have measured the time it takes to generate new ECG and EDR samples WCE (250) and the time it takes to update the waveform graph to only ~4000 us instead of the 100 ms (Bi for DistributerThread) used in the RMA below. All times below is in us.

#	Event Id	Arrival Period (Ti)	Action	Thread
1	Sample	4000	Run (GererateSignals)	RealTimeThread
2	Pulse	40000	Run (GeneratePulse)	RealTimeThread
3	PDU	1000000	Run (UpdateMedicine)	IPumpThread
4	FrameBuffer	200000	Run (Notify)	DistributerThread

WCE Time (Ci)	Priority	Blocking Delays (Bi)	Blocking term (Bti = Bi/Ti)	Deadline (Di)
250	Very High	40	0.01	4000

50	Very High	0	0	4000
200	High	40	0.00004	10000
200	Medium	100000	0.5	200000

In the below calculation we can see that with a sample rate of 250 Hz we will be able to schedule the threads using a frame buffer of 50 samples. We can see that the calculated total utilization (UBtotal) is less than the utilization bound (Ubound).

#### Rate Monotonic Analysis with Task Blocking

(U = Utilization, UB = Utilization and Blocking, B = Blocking)

Utotal	sum (Ci/Ti)	0.06
Ubound	$n(2^{1/n} - 1)$	<b>0.76</b>
Btotal	max(Bti)	0.50
UBtotal	Utotal + Btotal	<b>0.56</b>

***Ubound > UBtotal***

In the next part we have added calculation of the utilization bound for the FrameBuffer event, since this is the part that is most complicated and critical for the scheduling updating the waveform graph. More details can be found in chapter 6.5 of the architecture document reference [4].

#### Utilization bound for FrameBuffer (e4) valid as long $N_f > N_p$

<u>Step 1: Identify H</u>	<u>Step 2: Calculate f</u>
- Higher priority events - e1, e2, e3	
<b>H1 = e3</b> $T_i \geq D_i(4)$	$f4 = \text{sum}(C_j/T_j)   H_n + 1/T_i(4) (C_i(4) + B_i(4) + \text{sum}(C_k)   H_1$
<b>Hn = e1, e2</b> $T_i < D_i(4)$	<b>0.57</b>

<u>Step 3: Utilization bound</u>
$u(n, d_i) = n((2^{*d_i})^{1/n} - 1) + 1 - d_i$ <b>0.83</b> ( $0.5 < d_i \leq 1$ )
$d_i = D_i(4) / T_i(4)$ <b>1.00</b> ( $d_i < 0.5$ )

<u>Step 4: Compare effective calculated utilization with bound</u>
Calculate $f < \text{Utilization bound}$ ( $f4 < d_i$ or $u(n, d_i)$ )
<b>TRUE</b>

Notes to be deleted:

Design process for development of real-time systems – Lesson 8 - DevelopmentOfRealtimeSystem.pdf

Design method (Adds elements to the analysis the defines one particular solution)

Ropes design activities – Lesson 5 – ArchitectureAndUML.pdf – slide 20

Architectural

Mechanistic

Detailed

Architecture – Five layered and two layered patterns

UC# 1 most important for the architecture discrete and continuous

Two layered and five layered based on UC#1

Alternative solutions .....

Mechanistic design using patterns from course

Detailed design by adding methods and using sequence diagrams for UC

Description of the design process and an evaluation of this.

Why we haven't used ports – complicated to implement (Lesson 5 – DesigningWithPortsInUML2.pdf)

Open-Close Principle where in design patterns it is used (Lesson 5 – GeneralDesignPrinciples-2.pdf)

Liskov Substitution Principle (LSP) (Lesson 5) –Strategy pattern is a good example PhysioModel

Arguments for the design choices:

Mediator for PatientModel and Medicine – to be extended

RMA even analysis on the screen update and sample calculation (RealTimeThread and DistributerThread and GUI) – see Lesson 6 – ThreadsAndSchedulability

Scheduling policy – see Lesson 10 – Critical Section Pattern used.

Sample based vs. block based processing in driver layer – push and pull

### 3.5. Translation and testing (Kim)

Rhapsody (version 7.5) has been used to create an UML model for the Sapien patient simulator that is used for test of the simulator model including generated C++ source code before compilation on Linux and Target. The Model Driven Architecture (MDA<sup>12</sup>) approach has been used where we have created a platform independent model (PIM) that later translated to the platform specific model (PSM) target the Linux platform by using the code generation from Rhapsody. This approach has fully been executed for the continuous package of our design.

We have created test scenarios by use of the Rhapsody state diagrams and used them for testing the model by setting breakpoints in the states and made inspection of the state variables of the model by using the high level abstractions of that is possible with Rhapsody. This approach has reduced the development time in removing a lot of the manual C++ debugging and coding of the model. In this chapter we will describe how Rhasody has been configured for testing and code generation for Linux and Target.

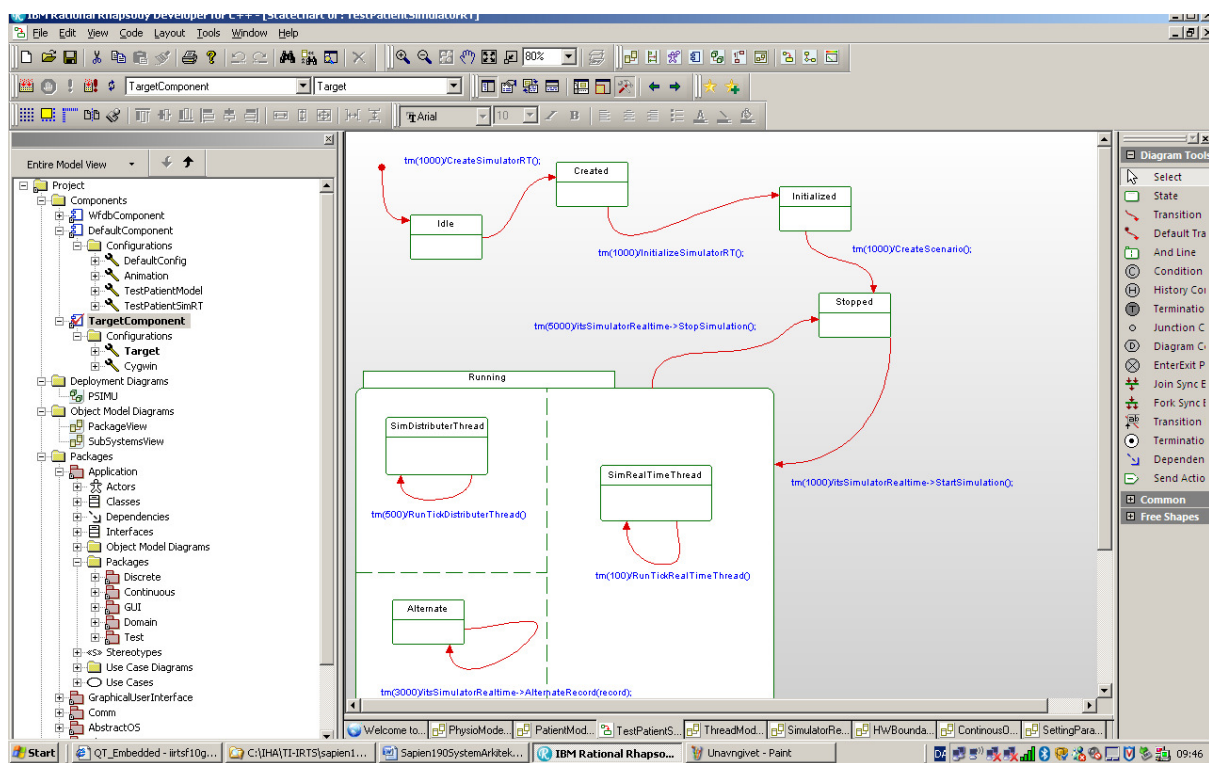


Figure 21 Rhapsody UML model for Sapien 190 used for simulation and test

Test design in high level modeling with Rhapsody

Test design integrated with Qt on Linux

Translation

<sup>12</sup> Slides 31 – 34 from Lesson 8 – L3\_ROPES\_Process.pdf

Creates executable deployable realization of the design

Automatic code generation from Rhapsody

GUI programming in Qt

HW and OS Abstraction manual programming

### **3.6. Development tools (Peter)**

Qt, Eclipse, Linux, WFDB, Rhapsody, Crosscompiler, DevKit8000, Cygwin

See ArchitecturalDocument chapter 13 + 14

File structure and how tools have been integrated.

### **3.7. Results (Anders)**

Objective –

Program running on target that outputs the ECG signals as specified and updating the signal wave graph.

Results in short form – screen dumps – Qt graph – printing samples

Top on target

Measurements of DAC outputs with scope

### **3.8. Discussion on achieved results (Anders)**

Comments with own opinion

Develop a program where a lot of development environments have been in used. Used a lot of time in design and applying patterns – where and how to use them.

Did it work like we thought?

Is there limitations, if there is what is it?

What is the actual benefits from using all those design patterns?

### **3.9. Experience obtained (Anders)**

See guide

QT Framework – cross compilation tool chain – difficult

QT actual uses the observer and message queuing patterns

Thread handling, continuous and GUI

Different design patterns and usage

Thread handling in general

What does it take to make sure that the system is real-time

Use of Rhapsody – perhaps too difficult due to deep tool knowledge is required.

### 3.10. Excellence of the project (Anders)

The system is generic

Easy to add new medicine

Easy to add new records

Easy to implement new type of records

Easy to change GUI

The system work

See guide

### 3.11. Suggestion to improvements

- Project – we should have started with design from ex 1-5
- Product – to be completed – design patterns that could improve and been implemented
- Execution time on target – speed

## 4. Conclusion

### Learning outcomes and competences:

The participants must at the end of the course be able to:

- **analyze and describe** the requirement for an embedded real-time system
- **design and constructs** an architecture for an embedded real-time system
- **evaluate and apply** design patterns in development of an embedded real-time system
- **prepare** a product documentation for an embedded real-time system using UML

See guide

Eg: "We have realized in this project that modelling is a powerful tool in helping us to **evaluate different ideas** applied to the problem being studied. While analyzing the situation we came up with several strategies that have been modelled using UML and VDM++. It was possible to determine whether the solutions to the problem were a correct approach or not and the advantages and disadvantages they presented"



## 5. References

- [1] Erich Gamma et al., Design Patterns: Elements of Reusable Object-Oriented Software, Addison Wesley (GoF)
- [2] Bruce Powell Douglass, Real-Time Design Patterns: Robust Scalable Architecture for Real-Time Systems
- [3] PhysioNet and PhysioBank the research resource for complex physiologic signals.  
<http://www.physionet.org/>
- [4] System/Product architecture document for Sapien 190
- [5] Requirement specification for Sapien 190  
<http://code.google.com/p/iirtsf10grp5/downloads/detail?name=Sapien190Spec.doc&can=2&q=>