

AMUSE: 10 & 11 May '07

Stephen Strowes
University of Glasgow

Outline

- Wider-area SMC
 - Core services
- Discussed scenario & simulation
 - Characters, data transfer, data storage
 - Brief simulation description
- Visualisation
 - Using stored data

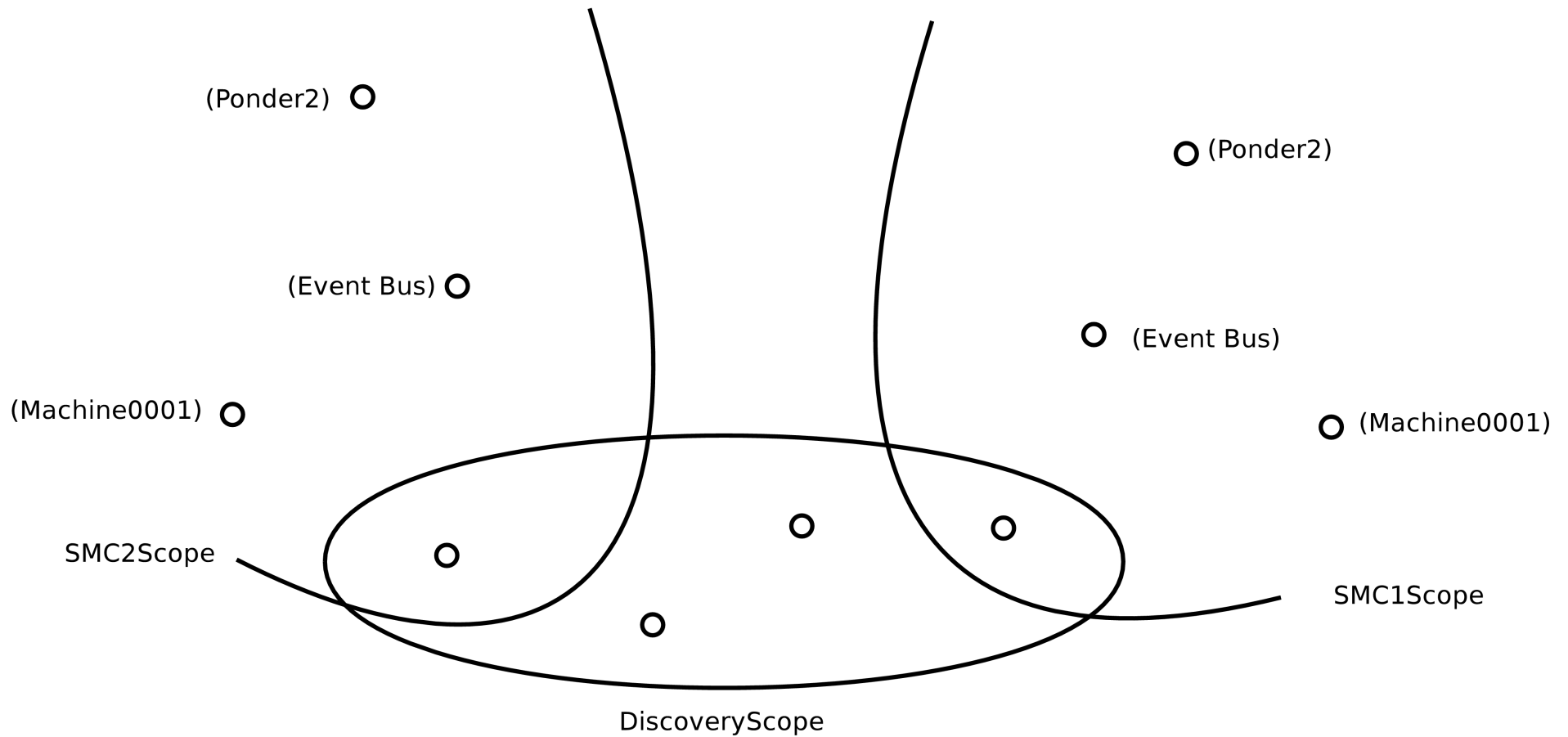
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Wider-area SMC: Discovery

- Service-Location Protocol (SLP)
 - Defines user, service, and directory agents
 - In essence, replaces our broadcast mechanism
 - Operates naturally within subnets, though DAs in different subnets can be attached to cross this boundary
 - SLP defines *scopes*, within which advertisements exist (either for a given time, or indefinitely)
 - Each SMC is a member of two scopes:
 - DiscoveryScope
 - (SMC Name)...

Wider-area SMC: Discovery



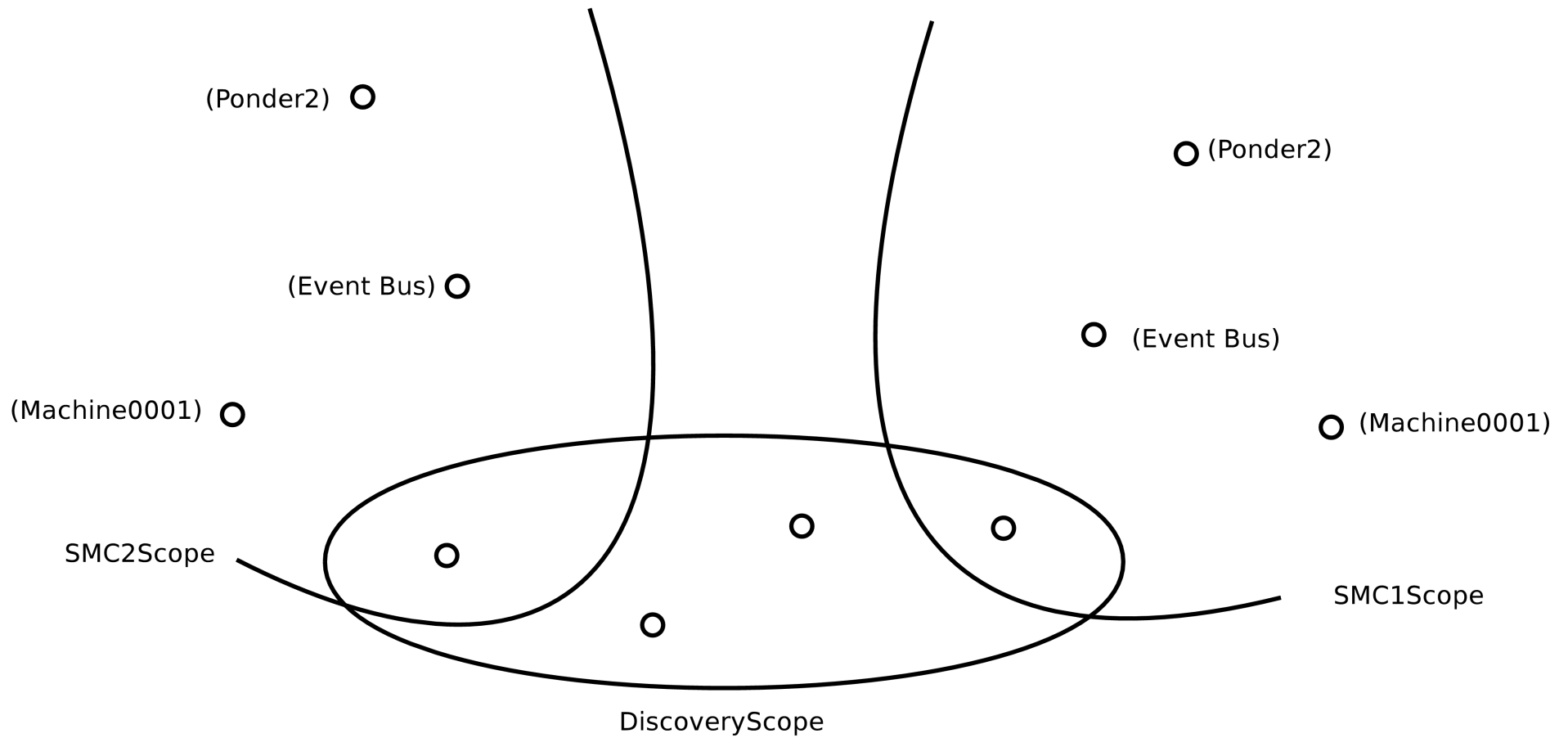
Wider-area SMC: Event Bus

- Siena
 - Closely related to the small event bus built for PDAs
 - Designed to scale to larger systems naturally

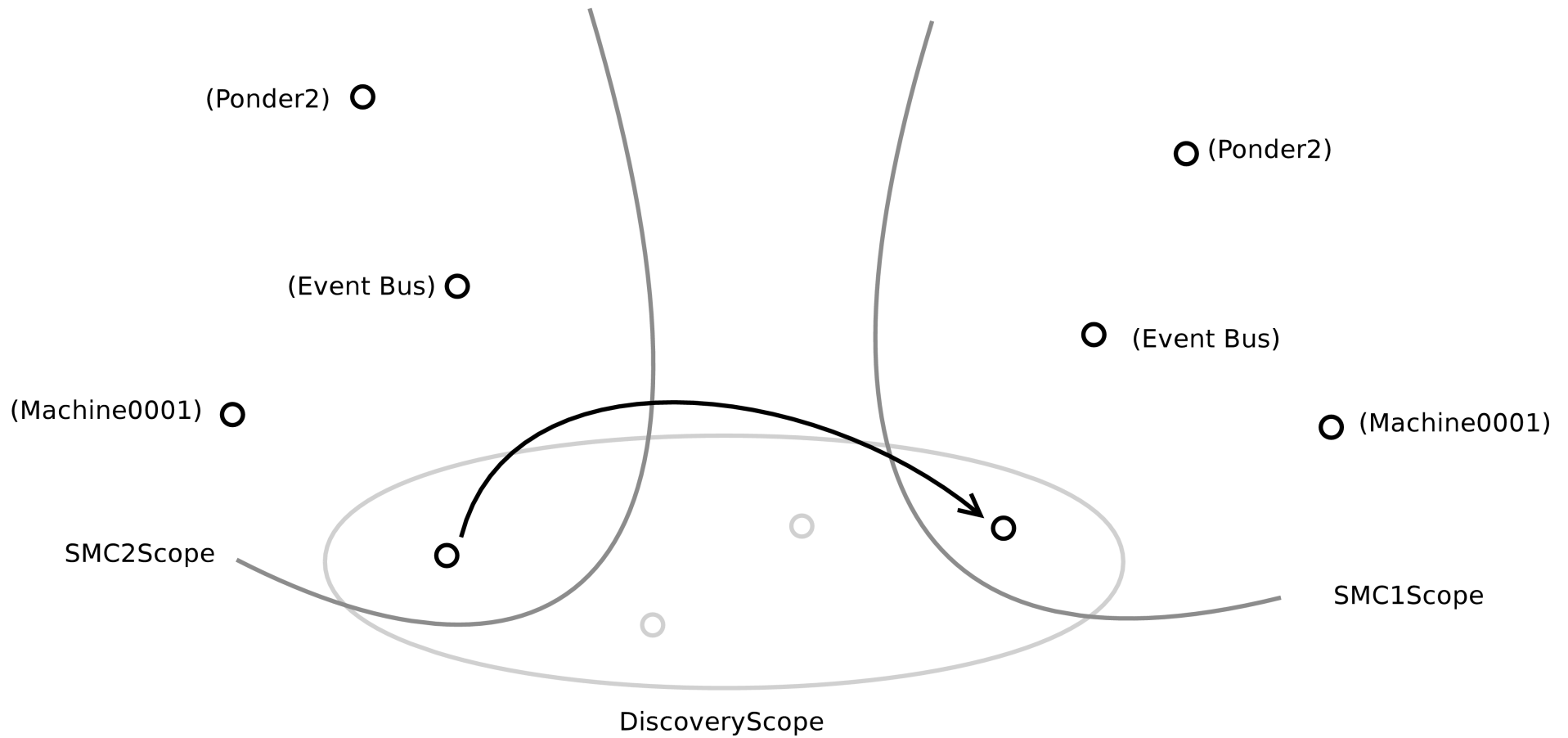
Wider-area SMC: Policy

- Ponder2
 - Handles managed object representations of the discovery service and event bus
 - Configured via boot.xml, or XML commands
 - Using Alberto's implementation to pair SMCs in a P2P fashion after discovery

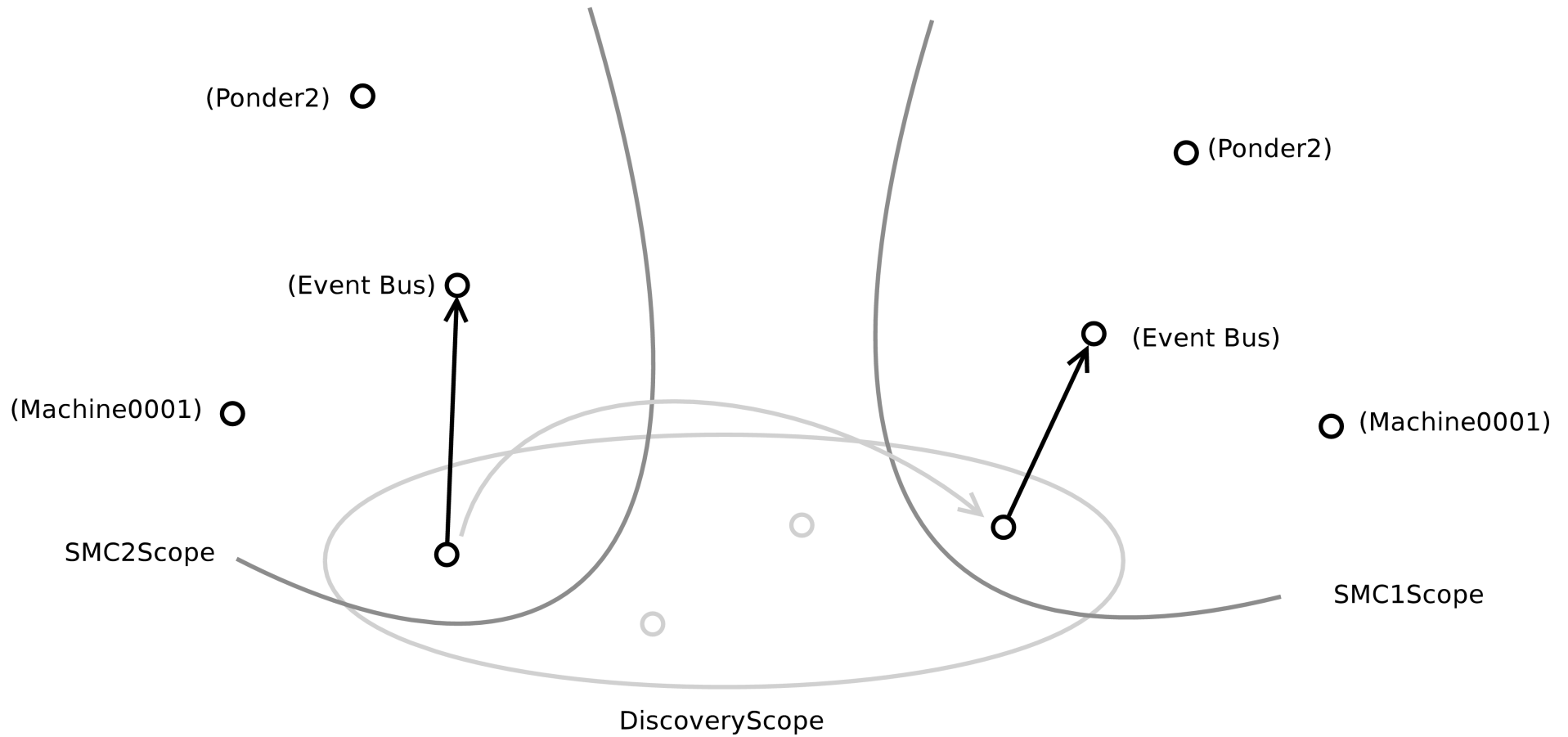
Wider-area SMC



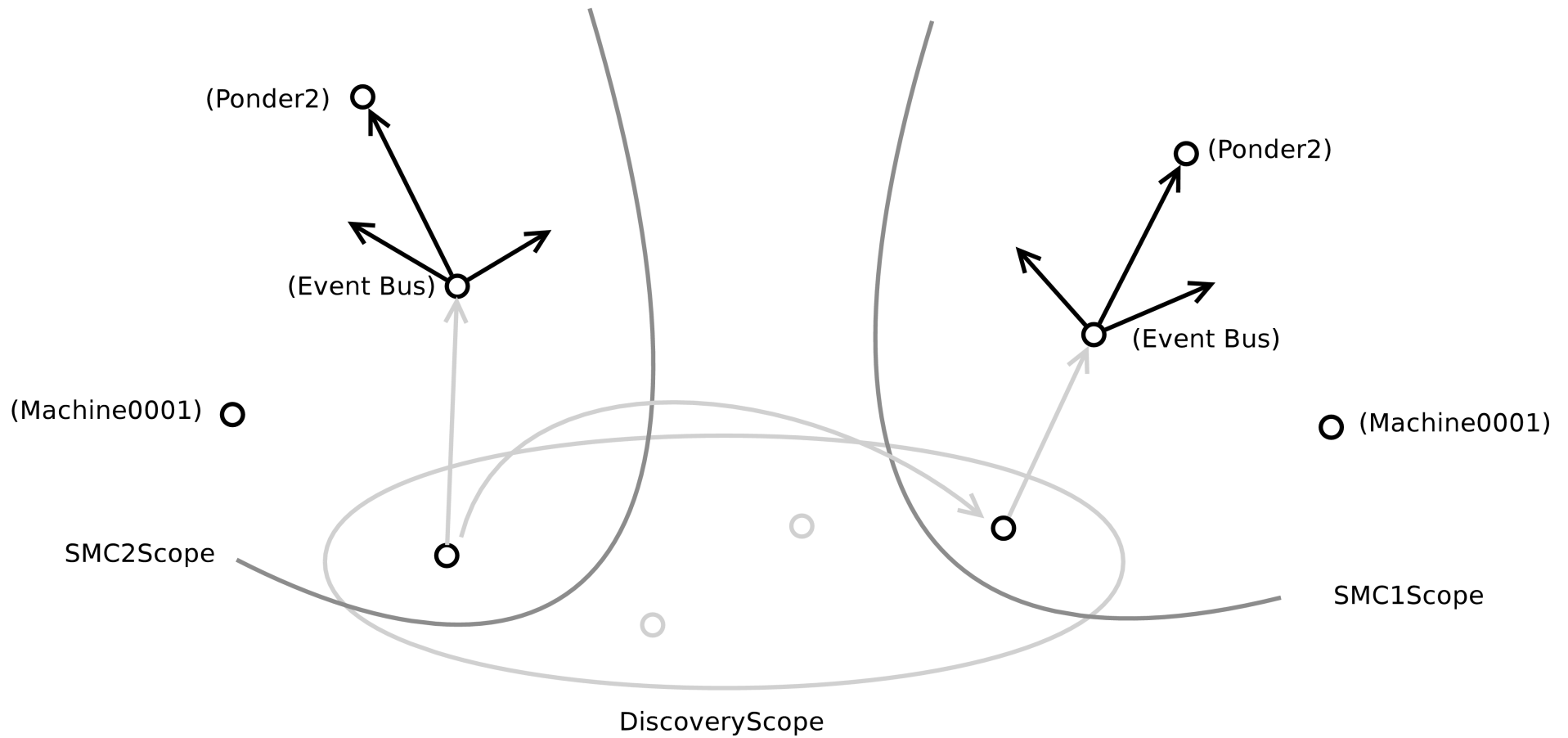
Wider-area SMC



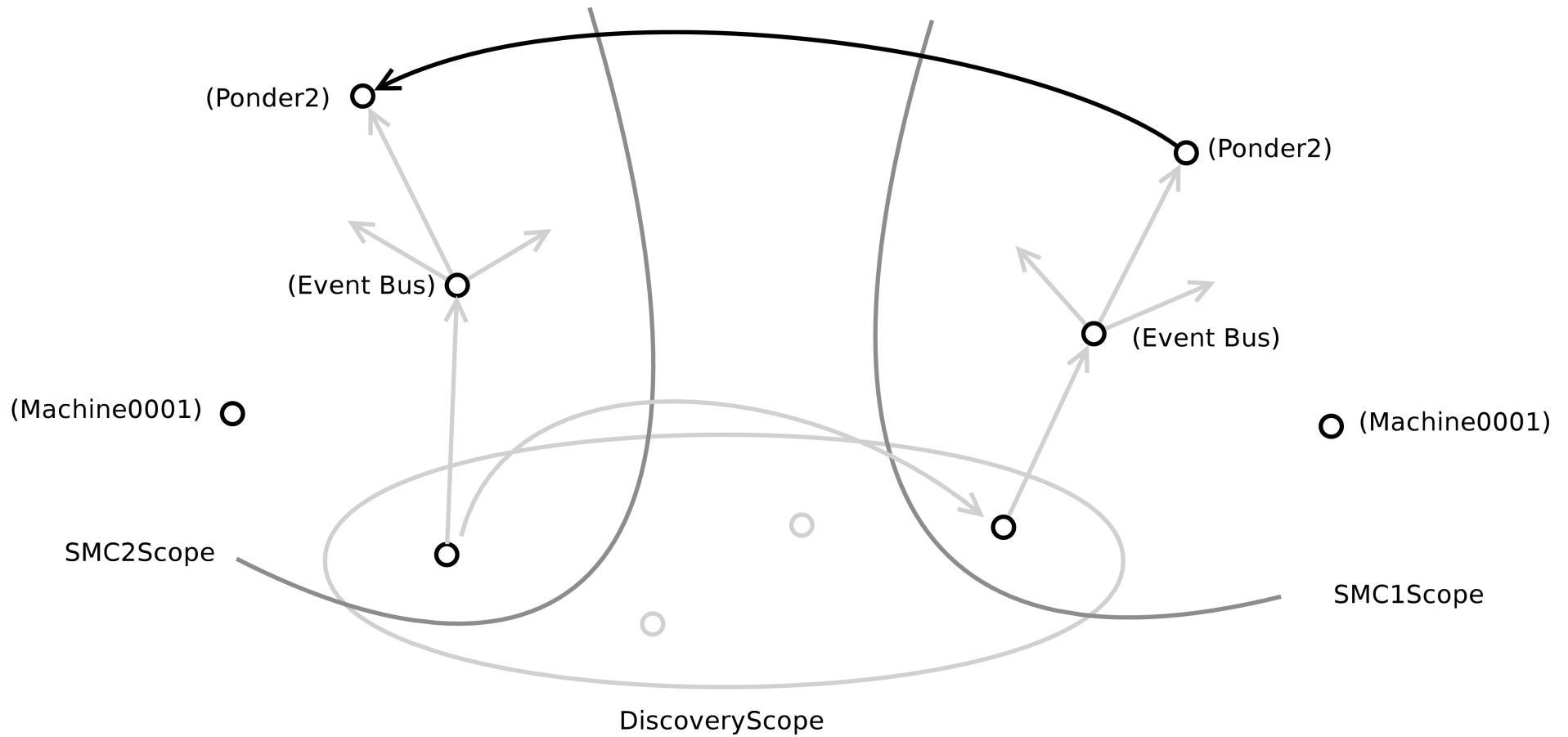
Wider-area SMC



Wider-area SMC



Wider-area SMC



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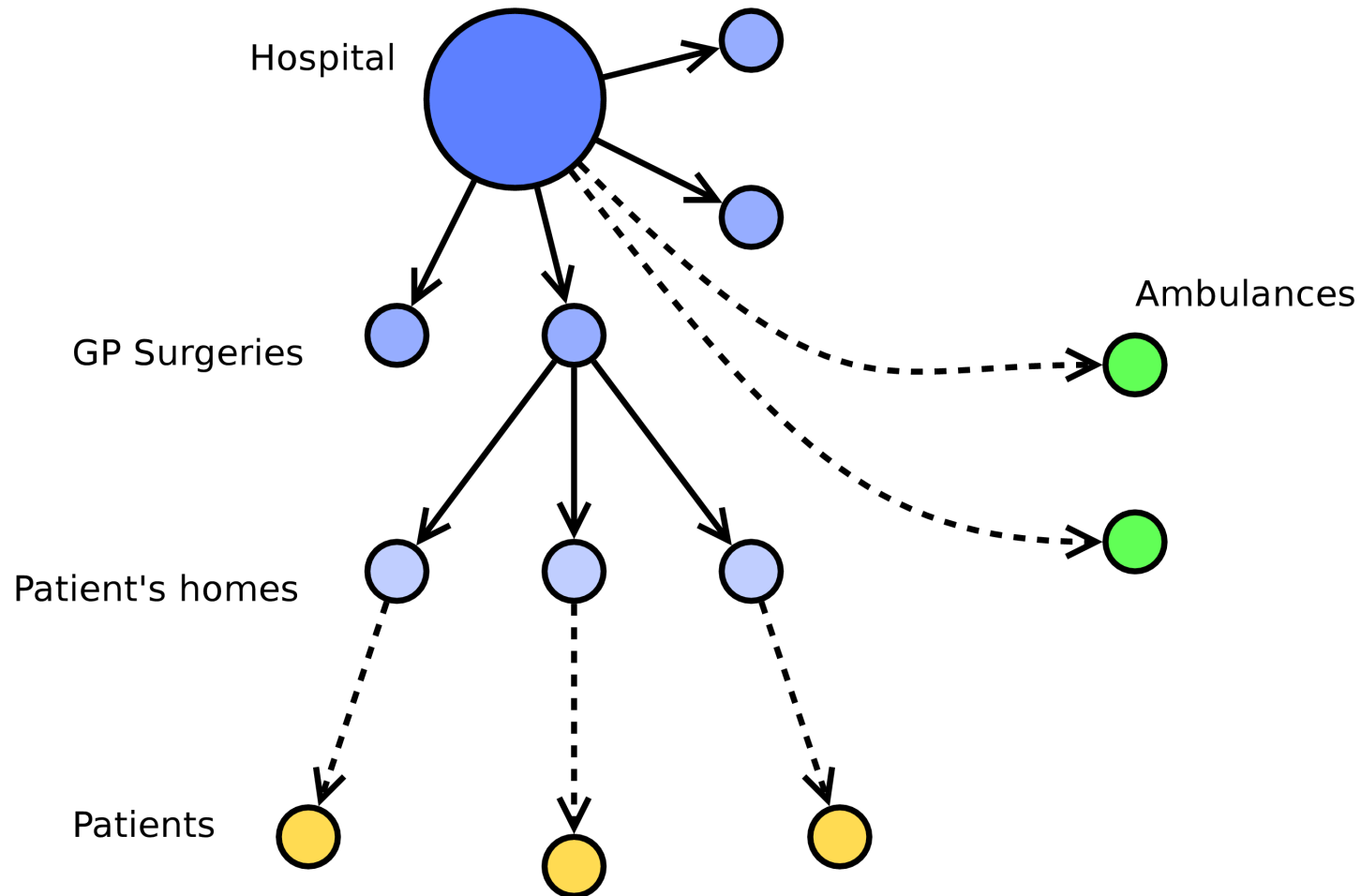
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Scenario

- Patient's asthma inhaler *is* the patient's SMC
- Inhaler configured to relay data back to data store at GP Surgery frequently
 - e.g., once every week, for 1 year
 - Inhaler obviously must be configured on a per-patient basis, so we may assume specifics such as the name or ID of the GP Surgery are pushed to the patient's SMC prior to monitoring

Scenario

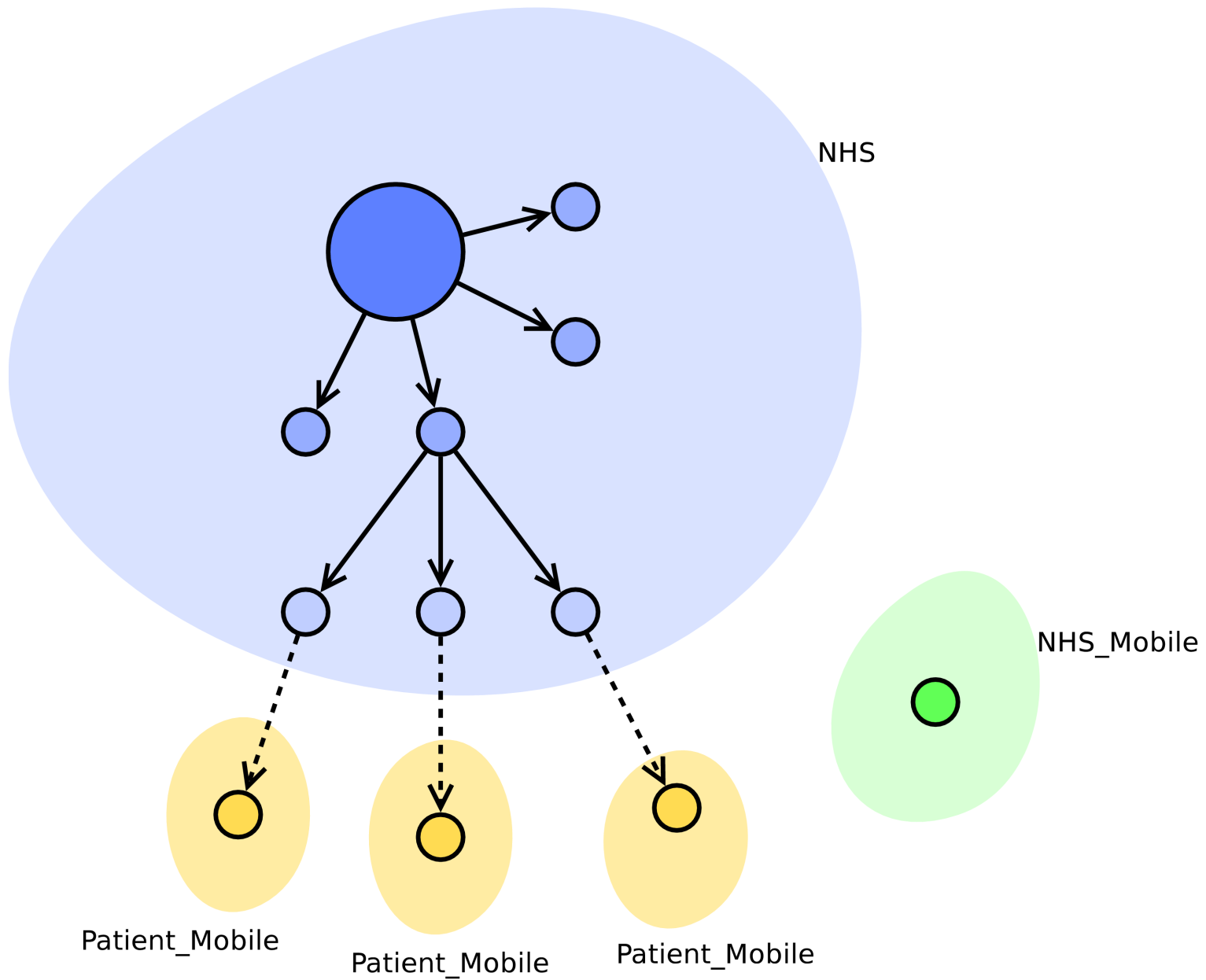
- Characters:



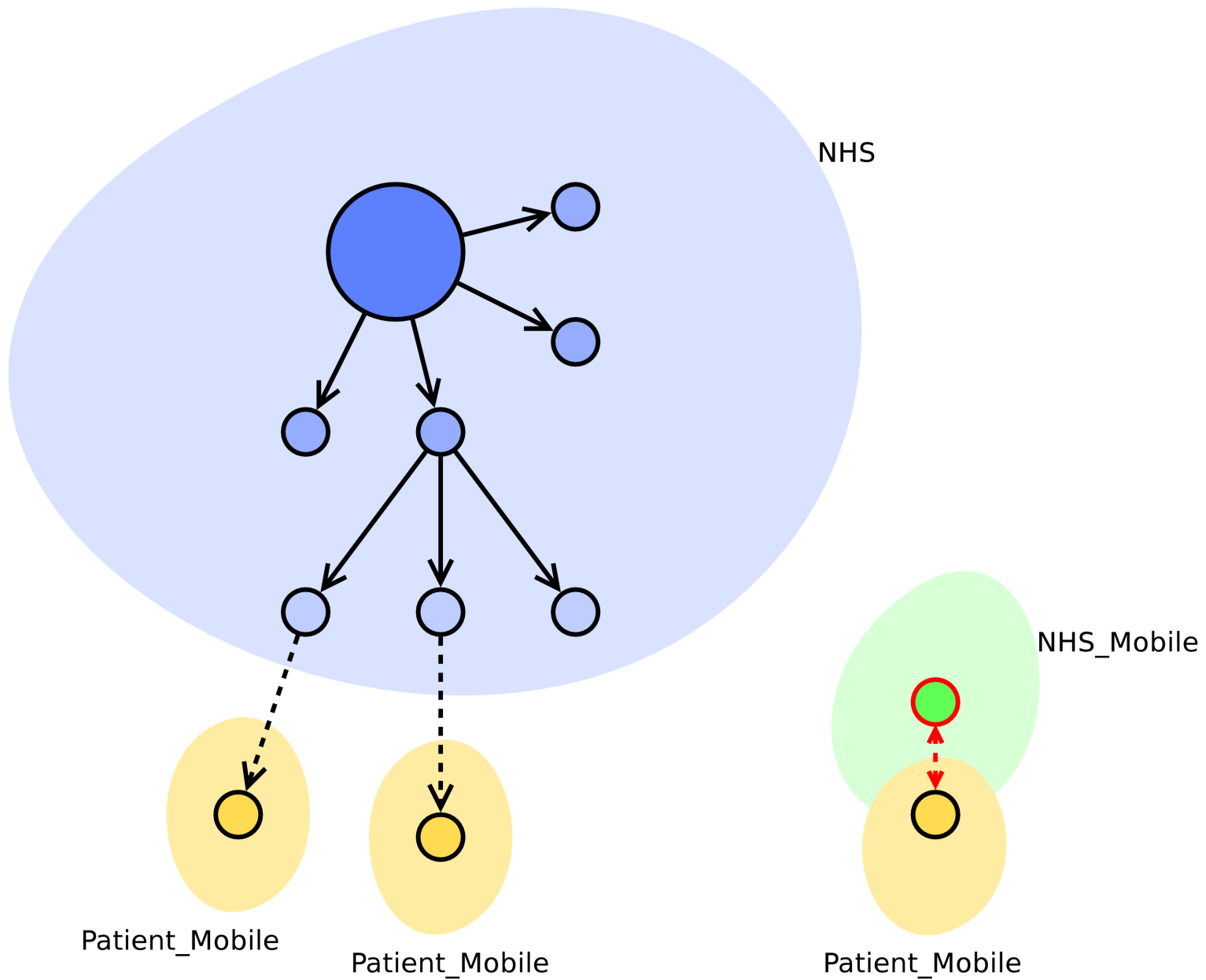
Scenario

- Data transfer (delay tolerant networking):
 - Cannot assume the following:
 - patient or NHS will absorb the cost of providing more than one communication mechanism to patient
 - patient or NHS will absorb the cost of using wide-area networks (e.g., GPRS, UMTS)
 - wide-area networks will always be available
 - device restrictions (space, battery power, robustness, ease of transport) would allow more than the most basic of hardware
 - Allows for inter-SMC data transfer which applications may use (not a requirement!)

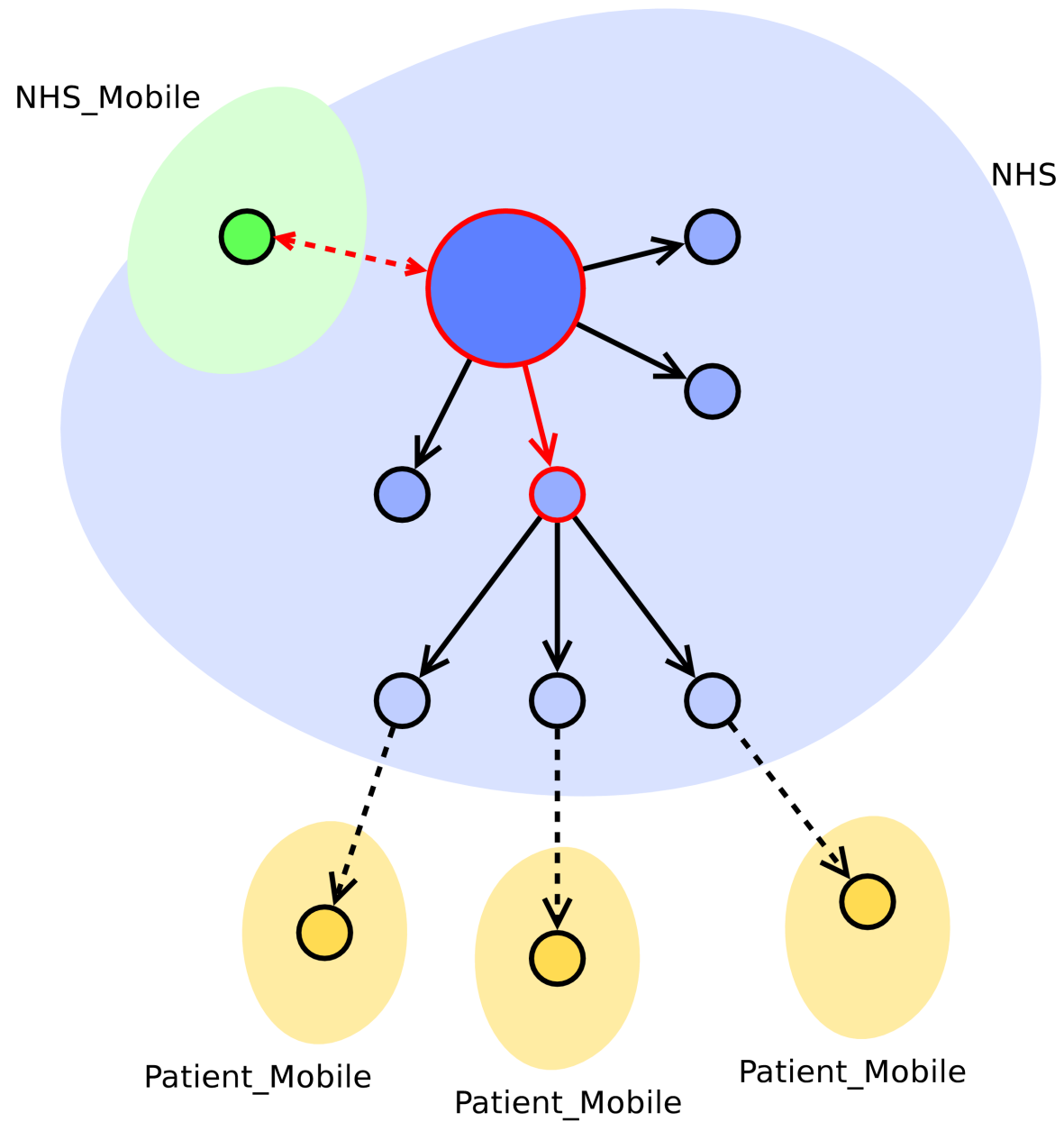
Scenario



Scenario



Scenario



Simulation

- Using the core services with DTN functionality, I aim to simulate a network similar to that described in previous slides
 - Size of network (example)
 - 4 hospitals
 - 1 ambulance
 - 12 GP surgeries
 - 24 patient's homes & 24 patients

Simulation

- Data within system:
 - From Patient -> Stored at GP
 - patient ID; timestamp; usage count
 - From GP -> Used by Visualisation system
 - postal region; timeframe/date; usage count for area

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Visualisation

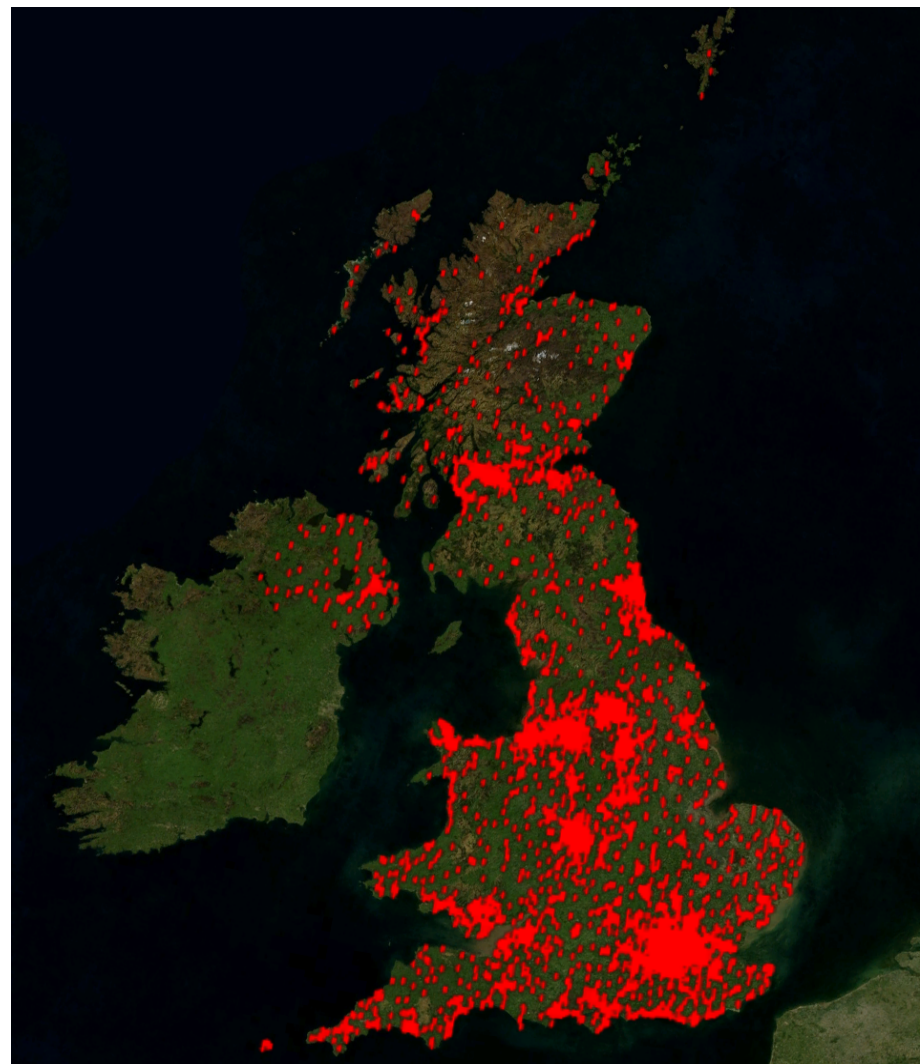
- Problem: information retrieval
 - We suggest storing patient data at GP surgeries
- There are over 150 GP surgeries in Glasgow; thousands across UK...
 - Industrial strength databases would have no problem with a few hundred nodes
 - Each GP has a unique ID, and data tagged with an ID is stored within this distributed DB only at that GP surgery...

Visualisation

- But are we describing a system that requires surgeries to be coupled together so tightly?
 - In our favour, we're creating geographically located data
 - GP surgeries operate within postal code regions
 - Queries will likely exhibit some geographic locality
 - Such a system could utilise two tiers of DBs:
 - first lookup postal code(s), get DB info for relevant surgeries
 - second, use this info to query each DB, collate & cache results

Visualisation

- Once we have the data, it's dirt simple to build basic overlays for visualisation tools such as NASA's World Wind
 - More complex overlays aren't even that difficult
- (World Wind currently opening up a Java SDK...)



Time...

- (Three weeks remaining)
- Plan is to conduct the simulation
 - Also, delve deeper into data retrieval once data is collected
 - Further consider how this data can be visualised

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Questions?
Discussion?