BUILDING AN ASSURANCE CASE FOR AORTA GEOMETRY RECONSTRUCTION SOFTWARE

BUILDING AN ASSURANCE CASE FOR AORTA GEOMETRY RECONSTRUCTION SOFTWARE

$$\operatorname{BY}$$ JINGYI LIN, M.Eng.

A REPORT SUBMITTED TO THE DEPARTMENT OF COMPUTING AND SOFTWARE AND THE SCHOOL OF GRADUATE STUDIES OF McMaster University IN PARTIAL FULFILMENT OF THE REQUIREMENTS FOR THE DEGREE OF Masters of Engineering

© Copyright by Jingyi Lin, August 2023 All Rights Reserved Masters of Engineering (2023)
(Department of Computing and Software)

McMaster University

Hamilton, Ontario, Canada

TITLE: Building an Assurance Case for Aorta Geometry Recon-

struction Software

AUTHOR: Jingyi Lin

M.Eng. (Computing and Software CRP),

McMaster University, Hamilton, Canada

SUPERVISOR: Smith Spencer

NUMBER OF PAGES: xvii, 120

Medical image for domain Softwar is another domain that requires to

Abstract

used to build safe Assurance cases have been proven to be effective developing a real-time system software. Another domain that requires the high standard correctness, completeness, and

consistency is medical software. Therefore, we have investigated adopting to med (coldine assumes cases techniques to med Throughout the development of the Aorta Geometry Reconstruction software, we implicitly listed the evidences that are essential to build our confidence in the software for assurance cases, build the artifact and the evidences simultaneously.

that the assurance cases can a to introduce ASK.

All a sentina to introduce ASK.

Le perfect about your our dence Finally, we present this software with the list of the evidences built for assurance cases, to show that the assurance cases can apply well on the medical software

iii

Your Dedication
Optional second line

Acknowledgements

I would like to thank all the people who contributed in some way to the work described in this thesis.

First and foremost, I would like to express my sincere thanks and gratitude to my supervisor Dr. Spencer Smith for his motivation, patience, and the continuous support of my master's studies and research. His guidance helped me in all the time of research and writing of this thesis.

Contents

A	bstra	act	ii
A	ckno	wledgements	v
N	otati	on, Definitions, and Abbreviations	xi
D	eclar	ation of Academic Achievement	xvi
1	Inti	roduction	1
	1.1	Background	5
	1.2	Methodology	Ę
	1.3	Thesis Outline	6
2	Aor	rtaGeomRecon Research and Development	8
	2.1	Existing Methods	S
	2.2	Our Segmentation Algorithm	12
	2.3	3D Slicer Extension Development	20
3	Ass	urance Cases and Selected Evidence for AortaGeomRecon	27
	3.1	Assurance Case Development	27

	3.2	Assurance Case for Software Specification Requirements	28
	3.3	Assurance Case for the Implementation	42
	3.4	The Design Documentation of the AortaGeomRecon	49
	3.5	Assurance Case for Operational Assumptions	61
	3.6	Assurance Case for Inputs Assumptions	64
4	Cor	nclusion and Future Works	68
	4.1	Thesis Summary	68
	4.2	Challenge	70
	4.3	Future Works	71
A	Soft	tware Requirements Specification for AortaGeomRecon	73
В	Mo	dule Guide for AortaGeomRecon	95

List of Figures

1.1	Aorta	į
1.2	Organ Segmentation	4
1.3	Simple Assurance Case Diagram	Ę.
2.1	ITK-Snap's Bubble Segmentation UI	10
2.2	3D Slicer Built-in Segmentation UI	11
2.3	The Aorta Seeds	13
2.4	Level Sets Segmentation	15
2.5	A label image	16
2.6	A Distance Map	17
2.7	Code That Shows How To Calculate The Threshold Range	17
2.8	A Segmented Image	18
2.9	Segmentation Result	20
2.10	Jupyter Notebook Research	21
2.11	3D Slicer UI	23
2.12	AortaGeomRecon Module UI	24
2.13	AortaGeomRecon Warning message	25
3.1	AGR Assurance Cases Top Level	29
3.2	AGR Assurance Cases GR	30

3.3	AGR SRS Table Of Content	32
3.4	AGR SRS Assumptions	34
3.5	AGR SRS Data Definitions	35
3.6	AGR SRS Instance Model Region Of Interest	36
3.7	AGR SRS Instance Model Region Of Interest	37
3.8	AGR Functional Requirements	38
3.9	AGR Non- Functional Requirements	39
3.10	AGR Traceability Matrix between Data Definitions and Instance Model	40
3.11	AGR Traceability Matrix Between Requirements and Other sections .	40
3.12	AGR Traceability Matrix Between Assumptions and Other sections .	41
3.13	GitHub Repo Documentation Review Requests	42
3.14	AGR Assurance Cases For Implementation	43
3.15	AGR Manual Test Procedure	47
3.16	AGR Test Report	49
3.17	AGR Anticipated Changes	50
3.18	AGR Modules	51
3.19	AGR Module Decomposition Example	52
3.20	AGR Modules Traceability Matrices	53
3.21	AGR Part Of The Traceability Matrix On Modules And Code	54
3.22	AGR Design Document Website	55
3.23	AGR Design Document Glossary	56
3.24	Spyder Variable Explorer	60
3.25	AGR Assurance Case Operational Assumptions	61
3 26	ACR User Manual On CitHub README	62

3.27	AGR User Instructions on YouTube	63
3.28	AGR Assurance Case Inputs Assumptions	64
3.29	AGR Warning Message	66
4.1	Project List Of Tasks	69
4 2	Aorta Double Oblique Plane	72

List of Tables

If you don't have only tables,
you can delete this
you can delete

Notation, Definitions, and

Abbreviations

Definitions

Aorta

The aorta is the largest artery of the body and carries blood from the heart to the circulatory system. It has several sections: the aortic root is the transition point where blood first exits the heart. It functions as the water main of the body, the aortic arch, is the curved segment that gives the aorta its cane-like shape. It bridges the ascending and descending aorta. Throughout the documentation, aorta would only include ascending aorta, aortic arch and descending aorta. Abdominal aorta is outside of the scope of the current work.

Ascending Aorta

The ascending aorta is the first part of the aorta, which is the largest blood vessel in the body. It comes out of your heart and pumps blood through the aortic arch and into the descending aorta.

This is a serious academic integrity issue.
This is a serious academic integrity issue.
You cannot are someone object works (except line of the quote). Make swe there are no spot in a tree quote that are capited from someone elections.

The descending agree is the longest part of your agree the largest artery in your body). It begins after your left subclavian artery branches from your aortic arch, and it extends down into your belly. The descending agree runs from your chest (thoracic agree) to your abdominal area (abdominal aorta).

Organ Segmentation

Inferior

tice is a

The definition of the organ boundary or organ segmentation is helpful for the orientation and identification of the regions of interest inside the organ during the diagnostic or treatment procedure. Further, it allows the volume estimation of the organ, such as the aorta.

DICOM Digital Imaging and Communications in Medicine (DICOM) is the standard for the communication and management of medical imaging information and related data.

> Inferior is the direction away from the head; the lower (e.g., the foot is part of the inferior extremity).

Superior is the direction toward the head end of the body; the upper war (e.g., the hand is part of the superior extremity) Superior (e.g., the hand is part of the superior extremity).

A 2-dimensional imagen is retrieved from a 3-dimensional volume.

Slice **Binary Dilation**

> Binary dilation is a mathematical morphology operation that uses a structuring element (kernel) for expanding the shapes in an image.

Label Map A labeled map or a label image is an image that labels each pixel of a source image.

Euclidean Distance Transform

The cuclidean distance transform is the map labeling each pixel of the image with the distance to the nearest obstacle pixel (black pixel for this project).

Contour Line A contour line (also isoline, isopleth, or isarithm) of a function of two variables is a curve along which the function has a constant value so that the curve joins points of equal value.

Level Sets Level Sets are an important category of modern image segmenta-

tion techniques based on partial differential equations (PDE), i.e.

progressive evaluation of the differences among neighboring pixels

to find object boundaries. The pictures 2.4 demonstrate an example

of how Level Sets method work on finding the region of the heart.

It starts with a seed contour that is within the region of interest,

then by finding the gradient based on the contour line, the segmen-

tation result will propagate towards outside of the region until the

maximum difference between the neighboring pixels are reached.

Segmented slice

your own?

A 2-dimensional image with interested pixels labeled as 1 and other pixels as 0.

the & relevant

Kernel Size The size of the kernel for binary dilation.

Stop Limit This limit is used to stop the segmentation algorithm. It is used differently in segmentation in inferior direction and segmentation in superior direction.

Threshold Coefficient

This coefficient is used to compute the lower and upper threshold passing through the segmentation filter SITK's ThresholdSegmentationLevelSetImageFilter. The algorithm first uses SITK's Label-StatisticsImageFilter to get the mean and the standard deviation of the intensity values of the pixels that are labeled as the white pixel. Larger values with this coefficient imply a larger range of thresholds when performing the segmentation, which leads to a larger segmented region.

RMS Error Value of RMS change below which the filter should stop. This is a convergence criterion.

Maximum Iteration Maximum

Number of iterations to run

Curvature Scaling

Weight of the curvature contribution to the speed term.

Propagation Scaling

Weight of the propagation contribution to the speed term.

Abbreviations

AC Assurance Case

AGR AortaGeomRecon

AortaGeomRecon

3D Slicer's extension module, Aorta Geometry Reconstruction

CT computerized tomography

DD Design Document

DICOM Digital Imaging and Communications in Medicine

GUI Graphical User Interface

MG Module Guide

NFR Non-Functional Requirement

FR Requirement

SITK SimpleITK

SRS Software Requirements Specification

UI User Interface

VTK The Visualization Toolkit

Declaration of Academic

Achievement

You should complete this

The student will declare his/her research contribution and, as appropriate, those of colleagues or other contributors to the contents of the thesis.

Chapter 1

Introduction

Medical Software is a critical component of patient diagnosis and treatment. Medical software refers to computer programs, applications, or systems specifically designed for use within the healthcare and medical field. These software solutions are developed to assist healthcare professionals, researchers, administrators, and patients in various aspects of medical care, research, management, and education [22]. Our project focuses on medical software that could potentially influence a patients' well-being, particularly software that contributes to diagnosing issues related to the aorta. The aorta, a vital artery responsible for transporting blood from the heart to other bodily organs, holds immense significance. Any malfunction in its blood-carrying function could yield severe and potentially life-threatening consequences for the entire body's physiology. Specifically, we focus on the Aorta Geometry Reconstruction (AortaGeomRecon or AGR) software, which can build a 3-dimensional model of the aorta, to help the health professional disagnosing issues related to the aorta quickly and correctly.

Given the importance of medical software like AGR, we need a means to build

ON.

assurance case can be thought of as a structured argument. The main purpose of an assurance case is to establish confidence and trust in the reliability and safety of a system by presenting a well-structured argument supported by evidence [23]. Assurance cases have been applied regularly in the medical device for approval in U.S. In Europe, the assurance cases are required in systems as diverse as flight control systems, nuclear reactor shutdown systems, and railroad signaling systems, which are all critical systems [23]. Previous work [20] building assurance cases for scientific computing software such as 3dfim+, a medical imaging software analysing activity in the brain, has demonstrated a great success in showing the software's correctness and reliability. The motivation of our project is to build an assurance case for AGR by adding more details on the evidence needed to support our claims thus building our confidence in AGR.

In this chapter, we first explain in details the contexts for the key concepts that will be discussed throughout the document, including what is organ segmentation, what is the aorta, listing the diseases that aorta segmentation could detect, and demonstrating an example of assurance case by showing a simple diagram of assurance case. Next, we will briefly discuss the methodology, especially how we achieve the objective of design, implementation of the software, and building confidence with the evidences in assurance case. In the final section, we explain our thesis outline covering the entire report.

to come to com

1.1 Background

In this section, we present the contexts of the key concepts within the scope of our work, including background information on the aorta (section 1.1.1), organ segmentation (section 1.1.2), and assurance cases (section 1.1.3).

1.1.1 Aorta

The aorta is the largest artery in the body. It carries blood from the heart to the circulatory system. It has a cane-liked shape made up of the ascending aorta, aortic arch and descending aorta. Figure 1.1 shows the entire aorta, but the abdominal aorta is outside the scope of the current work. Our work focus on building the 3D geometry from the aortic root to descending aorta.

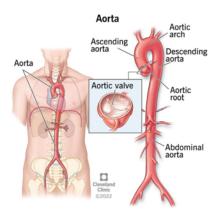


Figure 1.1: Aorta [17]

1.1.2 Organ Segmentation

The definition of the organ boundary or organ segmentation is helpful for the orientation and identification of the regions of interest inside the organ during the diagnostic

Ticeture and

or treatment procedure. Further, it allows the volume estimation of the organ, such as the aorta. A segmentation takes a medical image as input and outputs the portion of the image that corresponds to the organ of interest. Figure 1.2 demonstrates an example of abdominal organ segmentation.

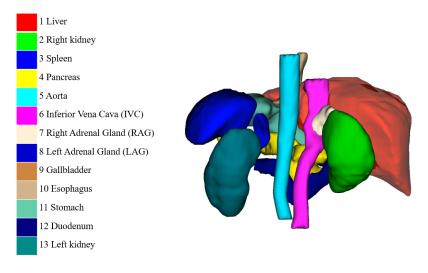


Figure 1.2: Organ Segmentation [16]

Aorta segmentation in CT (computerized tomography) scans is important for:

- Coarctation of the aorta (Miles in the docta)
 Aortic Aneurysm (Mules in the docta)
- Aortic calcification quantification
- To guide the segmentation of other central vessels.

1.1.3 Assurance Case

An Assurance Case (AC) can be thought of as a structured argument. When building an AC, you're making a point that specific evidence backs up a particular statement.

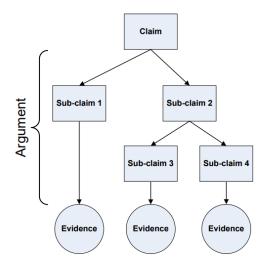


Figure 1.3: Simple Assurance Case Diagram [4]

The fundamental structure is depicted in Figure 1.3. An AC essentially boils down to an organized collection of arguments, backed by a body of evidence, that helps validate the belief in a specific claim [4].

In a practical sense, creating an AC involves beginning with a main claim and then breaking it down into smaller claims through a step-by-step process. These smaller claims, at the most bottom, are supported by concrete evidence.

1.2 Methodology

In this study, we present the outcomes of integrating AC throughout the development of medical software to reinforce the stakeholders' confidence in the software's capabilities. The software, known as AortaGeomRecon (AGR), represents a 3D Slicer [11] extension module designed to semi-automatically construct a 3D model of the aorta using CT scans from a patient's chest. We started by gathering requirements for the AGR from a domain expert, drafted our requirements, and high-level design.

We researched and worked on the implementation of the software, while building the infrastructure for continuous integration, version control, and project managment using GitHub. When we have a functional prototype, we delved into our assurance cases, encompassing chosen arguments and supporting evidence. AC functions as a method to provide assurance for a system by presenting arguments that substantiate claims about the system. These arguments are based on evidence related to the system's design, development, and tested behavior. By constructing the AC, we were able to follow the best practice including documentation review on the requirements and high-level design. Our goal was to finalize our documentation, and ensure the documentation's completeness and correctness. We have built user documentation to define all operational assumptions, and guide the user to use the valid inputs with a sequence of correct operations. Finally, our assurance case evidence consists of continuous integration tests, code review, and several algorithm reviews reinforced. This increased our confidence in the implementation of the software which has strickly complied with the requirements that are complete and correct.

1.3 Thesis Outline

The thesis is organized into three broad parts. In Chapter 2, we introduce our program AortaGeomRecon by mentioning the existing methods, the AGR's algorithm overview and step-by-step workflow. We explain necessary terms and information to understand how the software functions. We also introduce the 3D Slicer [11] extension module that the user interacts with to get the segmentation result with our algorithm. In Chapter 3, we present our AC_pand focusing on the evidence including some sections of our requirements, high-level design, detailed design, Algorithm Review, and a test case we

and 15

developed for verifying and validating the correctness of AGR. In Chapter 4, future work is proposed and conclusions are drawn based on the developed requirements, segmentation algorithm, 3D Slicer module extension, and AC.