

A Real-Time (or) Field-based Research Project Report  
On  
IOT BASED E HEALTH ACQUISITION SYSTEM  
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**DEPARTMENT OF COMPUTER SCIENCE AND  
ENGINEERING**



This is to certify that the Real-Time (or) Field-based Research Project Report entitled “IOT BASED E HEALTH DATA ACQUISITION SYSTEM” being submitted by Y.STEFFY NORAH JONES(227R1A05C7),T.VAMSHI REDDY(227R1A05C3),MUBARAK SHAEFF(237RA0514) in partial fulfillment of the requirements for the award of the degree of Bachelor of Technology in COMPUTER SCIENCE AND ENGINEERING to the Jawaharlal Nehru Technological University, Hyderabad is a record of bonafide work carried out by them under my guidance and supervision during the Academic Year 2023 – 24. The results embodied in this thesis have not been submitted to any other University or Institute for the award of any other degree or diploma.

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## **ABSTRACT**

The aim of this paper is to present the implementation of an IoT-based eHealth system for local and remote patient monitoring. This system is based on a Raspberry Pi 3 and is capable of recording data from the following sensors: blood pressure monitor, pulse oximeter, air flow, galvanic skin response and body temperature. The graphical interface allows the user to analyze historical sensor data charts and to record new data while visualizing the live chart. This interface can be accessed either locally from the integrated Touch Display or remotely from any web-capable device. This system was built with a modular architecture in mind and a high degree of versatility. The software components for sensor access work independently, offering improved system stability in case of sensor failure.

## Table of Contents

1) Introduction.....	5
Classification.....	6
Specification.....	7
Implementation.....	8
Application.....	8
Prototyping.....	8
Aurdino.....	8
DIGITAL PINS.....	10
2) Literature Survey.....	13
3) Analysis and Design.....	16
4) Implementation.....	19
5) Testing and Debugging/Results.....	26
6) Conclusion.....	29
7) Reference / Bibliography.....	30
8) Appendices .....	30

# **1.INTRODUCTION**

INTRODUCTION :

Embedded systems have unique design constraints compared to desktop computing applications, including cost pressure, long life-cycle, real-time requirements, reliability requirements, and design culture dysfunction. These systems often need to be optimized for life-cycle and business-driven factors rather than maximum computing throughput. Currently, there is limited tool support for holistic embedded system design. Understanding the strengths and weaknesses of current approaches can set expectations, identify risk areas, and suggest ways to meet industrial needs.

Embedded systems are tiny microprocessors that operate on basic assembly languages and respond to various keystrokes or inputs. The embedded systems market is the most conservative among semiconductor industries, with engineering decisions typically leaning towards established, low-risk solutions. These embedded systems are computers that will not look like computers and function like familiar ones. Understanding the strengths and weaknesses of current approaches can help set expectations and suggest ways to meet industrial needs.

## CLASSIFICATION

Embedded systems are divided into autonomous, realtime, networked & mobile categories.

### Autonomous systems

They function in standalone mode. Many embedded systems used for process control in manufacturing units& automobiles fall under this category.

**Real-time embedded systems** These are required to carry out specific tasks in a specified amount of time. These systems are extensively used to carry out time critical tasks in process control.

### Networked embedded systems

They monitor plant parameters such as temperature, pressure and humidity and send the data over the network to a centralized system for on line monitoring.

### Mobile gadgets

Mobile gadgets need to store databases locally in their memory. These gadgets imbibe powerful computing & communication capabilities to perform realtime as well as nonrealtime tasks and handle multimedia applications. The embedded system is a combination of computer hardware, software, firmware and perhaps additional mechanical parts, designed to perform a specific function. A good example is an automatic washing machine or a microwave oven. Such a system is in direct contrast to a personal computer,

which is not designed to do only a specific task. But an embedded system is designed to do a specific task with in a given timeframe, repeatedly, endlessly, with or without human interaction.

## Hardware

Good software design in embedded systems stems from a good understanding of the hardware behind it. All embedded systems need a microprocessor, and the kinds of microprocessors used in them are quite varied. A list of some of the common microprocessors families are: ARM family, The Zilog Z8 family, Intel 8051/X86 family,

Motorola 68K family and the power PC family. For processing of information and execution of programs, embedded system incorporates microprocessor or micro-controller. In an embedded system the microprocessor is a part of final product and is not available for reprogramming to the end user. An embedded system also needs memory for two purposes, to store its program and to store its data. Unlike normal desktops in which data and programs are stored at the same place, embedded systems store data and programs in different memories. This is simply because the embedded system does not have a hard drive and the program must be stored in memory even when the power is turned off. This type of memory is called ROM. Embedded applications commonly employ a special type of ROM that can be programmed or reprogrammed with the help of special devices.

## SPECIFICATION

During this part of the design process, the informal requirements of the analysis are transformed to formal specification using SDL.

For performing an automatic HW/SW partitioning, the system synthesis step translates the SDL specification to an internal system model which contains problem graph & architecture graph. After system synthesis, the resulting system model is translated back to SDL.

## IMPLEMENTATION-SYNTHESIS

SDL specification is then translated into conventional implementation languages such as VHDL for hardware modules and C for software parts of the system.

## PROTOTYPING

On a prototyping platform, the implementation of the system under development is executed with the software parts running on multiprocessor unit and the hardware part running on a FPGA board known as phoenix, prototype hardware for Embedded Network Interconnect Accelerators.

## APPLICATIONS

Embedded systems are finding their way into robotic toys and electronic pets,

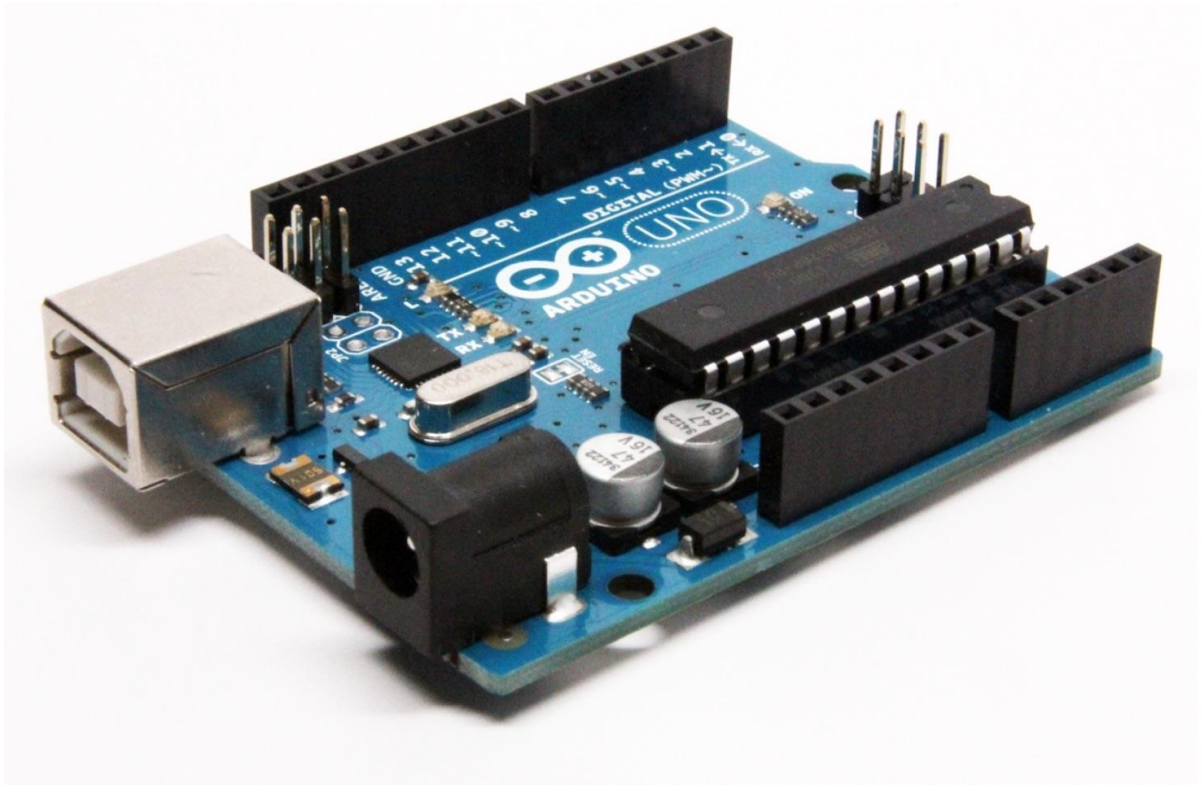
intelligent cars and remote controllable home appliances. All the major toy makers across the world have been coming out with advanced interactive toys that can become our friends for life. 'Furby' and 'AIBO' are good examples at this kind. Furbies have a distinct life cycle just like human beings, starting from being a baby and growing to an adult one. In AIBO first two letters stands for Artificial Intelligence. Next two letters represents robot. The AIBO is robotic dog. Embedded systems in cars also known as Telematic Systems are used to provide navigational security communication & entertainment services using GPS, satellite. Home appliances are going the embedded way. LG electronics digital DIOS refrigerator can be used for surfing the net, checking e-mail, making video phone calls and watching TV. IBM is developing an air conditioner that we can control over the net. Embedded systems cover such a broad range of products that generalization is difficult. Here are some broad categories.

#### ARUDINO:

The Arduino is a family of microcontroller boards to simplify electronic design, prototyping and experimenting for artists, hackers, hobbyists, but also many professionals. People use it as brains for their robots, to build new digital music instruments, or to build a system that lets your house plants tweet you when they're dry. Arduinos (we use the standard Arduino Uno) are built around an ATmega microcontroller — essentially a complete computer with CPU, RAM, Flash memory, and input/output pins, all on a single chip. Unlike, say, a Raspberry Pi, it's designed to attach all kinds of sensors, LEDs, small motors and speakers, servos, etc. directly to these pins, which can read in or output digital or analog voltages between 0 and 5 volts. The Arduino connects to your computer via USB, where you program it in a simple language (C/C++, similar to Java) from inside the free Arduino IDE by uploading your compiled code to the board. Once programmed, the Arduino can run with the USB link back to your computer, or stand-alone without it — no keyboard or screen needed, just power.

Looking at the board from the top down, this is an outline of what you will see (parts of the board you might interact with in the course of normal use are highlighted)





Arduino Board

Starting clockwise from the top center:

- ☐ Analog Reference pin (orange)
- ☐ Digital Ground (light green)
- ☐ Digital Pins 2-13 (green)
- ☐ Digital Pins 0-1/Serial In/Out - TX/RX (dark green) - These pins cannot be used for digital i/o (Digital Read and Digital Write) if you are also using serial communication (e.g. Serial.begin).
- ☐ Reset Button - S1 (dark blue)
- ☐ In-circuit Serial Programmer (blue-green)
- ☐ Analog In Pins 0-5 (light blue)
- ☐ Power and Ground Pins (power: orange, grounds: light orange)
- ☐ External Power Supply In (9-12VDC) - X1 (pink)
- ☐ Toggles External Power and USB Power (place jumper on two pins closest to desired supply) - SV1 (purple)
- ☐ USB (used for uploading sketches to the board and for serial communication between the board and the computer; can be used to power the board) (yellow)

#### DIGITAL PINS

In addition to the specific functions listed below, the digital pins on an Arduino

board can be used for general purpose input and output via the pin Mode(), Digital Read(), and Digital Write() commands. Each pin has an internal pull-up resistor which can be turned on and off using digital Write() (w/ a value of HIGH or LOW, respectively) when the pin is configured as an input. The maximum current per pin is 40mA.

- Serial: 0 (RX) and 1 (TX). Used to receive (RX) and transmit (TX) TTL serial data. On the Arduino Diecimila, these pins are connected to the corresponding pins of the FTDI USB-to-TTL Serial chip. On the Arduino BT, they are connected to the corresponding pins of the WT11 Bluetooth module. On the Arduino Mini and LilyPad Arduino, they are intended for use with an external TTL serial module (e.g. the Mini-USB Adapter).
- External Interrupts: 2 and 3. These pins can be configured to trigger an interrupt on a low value, a rising or falling edge, or a change in value. See the attach Interrupt() function for details.
- PWM: 3, 5, 6, 9, 10, and 11 Provide 8-bit PWM output with the analog Write() function. On boards with an ATmega8, PWM output is available only on pins 9, 10, and 11.
- BT Reset: 7. (Arduino BT-only) Connected to the reset line of the bluetooth module.
- SPI: 10 (SS), 11 (MOSI), 12 (MISO), 13 (SCK). These pins support SPI communication, which, although provided by the underlying hardware, is not currently included in the Arduino language.
- LED: 13. On the Diecimila and LilyPad, there is a built-in LED connected to digital pin 13. When the pin is HIGH value, the LED is on, when the pin is LOW, it's off.

#### ANALOG PINS



In addition to the specific functions listed below, the analog input pins support 10-bit analog-to-digital conversion (ADC) using the analog Read() function. Most of the analog inputs can also be used as digital pins: analog input 0 as digital pin 14 through analog input 5 as digital pin 19. Analog inputs 6 and 7 (present on the Mini and BT) cannot be used as

## ATMEGA328

Port A serves as the analog inputs to the A/D Converter. Port A also serves as an 8-bit bi-directional I/O port, if the A/D Converter is not used. Port pins can provide internal pull-up resistors (selected for each bit). The Port A output buffers have symmetrical drive characteristics with both high sink and source capability. When pins PA0 to PA7 are used as inputs and are externally pulled low, they will source current if the internal pull-up resistors are activated. The Port A pins are tri-stated when a reset condition becomes active, even if the clock is not running.

### Port B (PB7-PB0):

Port B is an 8-bit bi-directional I/O port with internal pull-up resistors (selected for each bit). The Port B output buffers have symmetrical drive characteristics with both high sink and source capability. As inputs, Port B pins that are externally pulled low will source current if the pull-up resistors are activated. The Port B pins are tri-stated when a reset condition becomes active, even if the clock is not running. Port B also serves the functions of various special features of the ATmega32.

### Port C (PC7-PC0):

Port C is an 8-bit bi-directional I/O port with internal pull-up resistors (selected for each bit). The Port C output buffers have symmetrical drive characteristics with both high sink and source capability. As inputs, Port C pins that are externally pulled low will source current if the pull-up resistors are activated. The Port C pins are tri-stated when a reset condition becomes active, even if the clock is not running. If the JTAG interface is enabled, the pull-up resistors on pins PC5(TDI), PC3(TMS) and PC2(TCK) will be activated even if a reset occurs. The TD0 pin is tri-stated unless TAP states that shift out data are entered. Port C also serves the functions of the JTAG interface.

### Port D (PD7-PD0):

Port D is an 8-bit bi-directional I/O port with internal pull-up resistors (selected for each bit). The Port D output buffers have symmetrical drive characteristics with both high sink and source capability. As inputs, Port D pins that are externally pulled low will source current if the pull-up resistors are activated. The Port D pins are tri-stated when a reset condition becomes active, even if the clock is not running. Port D also serves the functions of various special features of the ATmega32.

### Reset (Reset Input):

A low level on this pin for longer than the minimum pulse length will generate a reset, even if the clock is not running. Shorter pulses are not guaranteed to generate a reset.

XTAL1:

Input to the inverting Oscillator amplifier and input to the internal clock operating circuit.

XTAL2:

Output from the inverting Oscillator amplifier.

AVCC:

AVCC is the supply voltage pin for Port A and the A/D Converter. It should be externally connected to VCC, even if the ADC is not used. If the ADC is used, it should be connected to VCC through a low-pass filter.

AVR CPU CORE

The AVR core combines a rich instruction set with 32 general purpose working registers. All the 32 registers are directly connected to the Arithmetic Logic Unit (ALU), allowing two independent registers to be accessed in one single instruction executed in one clock cycle. The resulting architecture is more code efficient while achieving throughputs up to ten times faster than conventional CISC microcontrollers.

LCD (Liquid Cristal Display)

Introduction:

A liquid crystal display (LCD) is a thin, flat display device made up of any number of color or monochrome pixels arrayed in front of a light source or reflector. Each pixel consists of a column of liquid crystal molecules suspended between two transparent electrodes, and two polarizing filters, the axes of polarity of which are perpendicular to each other. Without the liquid crystals between them, light passing through one would be blocked by the other. The liquid crystal twists the polarization of light entering one filter to allow it to pass through the other.

A program must interact with the outside world using input and output devices that communicate directly with a human being. One of the most common devices attached to an controller is an LCD display. Some of the most common LCDs connected to the contollers are 16X1, 16x2 and 20x2 displays. This means 16 characters per line by 1 line 16 characters per line by 2 lines and 20 characters per line by 2 lines, respectively.

Shapes and S

## 2) Literature Survey

## Literature Survey:

Certainly. I'll provide a literature survey focusing on general IoT in healthcare trends and novel applications of IoT in e-health. This survey will cover recent papers and research from approximately the last 5 years.

### 1. General IoT in Healthcare Trends

#### a) Wearable Devices and Continuous Monitoring:

- Islam et al. (2020) in "The Internet of Things for Health Care: A Comprehensive Survey" highlighted the increasing adoption of wearable devices for continuous health monitoring, enabling early detection of health issues and personalized care.
- Majumder and Deen (2019) reviewed the evolution of wearable sensors in "Smartphone Sensors for Health Monitoring and Diagnosis," emphasizing their integration with smartphones for data collection and analysis.

#### b) Edge Computing in Healthcare IoT:

- Mutlag et al. (2019) in "Enabling technologies for fog computing in healthcare IoT systems" discussed how edge computing is addressing latency and privacy concerns in healthcare IoT applications.

#### c) Artificial Intelligence and Machine Learning Integration:

- Ahad et al. (2020) in "Transforming Healthcare with Big Data Analytics and Artificial Intelligence: A Systematic Mapping Study" explored the synergy between IoT, big data, and AI in healthcare, showing trends towards predictive analytics and personalized medicine.

#### d) Blockchain for Healthcare IoT:

- Tanwar et al. (2020) in "A systematic review on security issues in vehicular ad hoc network" (despite the title, this paper includes a section on blockchain in healthcare IoT) discussed how blockchain is being used to enhance data security and interoperability in healthcare IoT systems.

#### e) 5G and Healthcare IoT:

- Ahad et al. (2019) in "5G-Based Smart Healthcare Network: Architecture, Taxonomy, Challenges and Future Research Directions" explored how 5G technology is expected to revolutionize healthcare IoT by enabling ultra-reliable low-latency communications.

### 2. Novel Applications of IoT in E-Health

#### a) Remote Surgery and Telemedicine:

- Choi et al. (2019) in "Telemedicine in the United States: An Introduction for Students and Residents" discussed advancements in IoT-enabled telemedicine, including remote surgeries and consultations.

#### b) Smart Pills and Ingestible Sensors:

- Kalantar-Zadeh et al. (2017) in "A human pilot trial of ingestible electronic capsules capable of sensing different gases in the gut" presented groundbreaking research on ingestible IoT sensors for gut health monitoring.

#### c) IoT for Mental Health:

- Huckvale et al. (2019) in "The evolution of mobile apps for bipolar disorder: A systematic review" reviewed mobile apps using IoT for mental health monitoring and intervention, particularly for bipolar disorder.

#### d) Smart Home Healthcare:

- Majumder et al. (2017) in "Smart Homes for Elderly Healthcare—Recent Advances and Research Challenges" explored IoT applications in creating smart environments for elderly care and chronic disease management.

e) Drone-based Healthcare Delivery:

- Balasingam (2017) in "Drones in medicine—The rise of the machines" discussed the emerging use of IoT-enabled drones for delivering medical supplies and collecting health data in remote areas.

f) AR/VR in Healthcare:

- Eckert et al. (2019) in "Augmented Reality in Medicine: Systematic and Bibliographic Review" reviewed the integration of AR/VR technologies with IoT for medical training, surgery planning, and patient education.

g) Emotion Recognition for Healthcare:

- Sharma et al. (2019) in "Emotion detection using IoT and machine learning" proposed novel IoT-based systems for emotion recognition to support mental health monitoring and interventions.

These trends and novel applications demonstrate the rapid evolution of IoT in healthcare, with a focus on personalized, continuous, and accessible care. The integration of IoT with other emerging technologies like AI, blockchain, and 5G is driving innovation in e-health acquisition systems.

Would you like me to elaborate on any specific trend or application mentioned in this survey?

### 3) Analysis and Design:



### Analysis and Design:

The IoT-based e-health acquisition system architecture comprises five interconnected layers: Sensing, Network, Gateway, Cloud, and Application. The Sensing Layer utilizes advanced medical sensors and wearable devices to collect a wide range of physiological data, including heart rate, blood pressure, and temperature, as well as more complex metrics like blood glucose levels and sleep patterns. The Network Layer facilitates secure and efficient data transmission, employing a variety of communication protocols to ensure reliable connectivity across diverse environments. The Gateway Layer serves as a critical intermediary, performing edge computing tasks such as data preprocessing, local storage, and initial analysis to optimize system performance and reduce latency.

The Cloud Layer forms the backbone of the system, providing robust data storage, advanced analytics, and machine learning capabilities to derive meaningful insights from the collected health data. It hosts scalable applications and services that cater to the needs of healthcare providers and patients alike. The Application Layer delivers these insights through intuitive user interfaces, offering personalized dashboards, real-time alerts, and data visualizations tailored to different user roles.

Data transmission and networking in this system leverage both short-range technologies like Bluetooth Low Energy and Wi-Fi for local connectivity, and long-range options such as 5G and LoRaWAN for extended coverage. The system employs lightweight protocols like MQTT and CoAP to ensure efficient communication, especially for resource-constrained devices. Data is structured using formats such as JSON, XML, and HL7 FHIR to facilitate interoperability. Edge and fog computing paradigms are implemented to distribute processing and storage capabilities, enhancing system responsiveness and reducing bandwidth requirements.

Integration with existing healthcare systems is a key focus, achieved through the implementation of interoperability standards like HL7 FHIR, DICOM, and IHE profiles. The system seamlessly connects with Electronic Health Records (EHRs) through custom APIs, ensuring bidirectional data flow while maintaining strict security and compliance standards. It interfaces with clinical decision support systems, telemedicine platforms, and Health Information Exchanges (HIEs) to provide a comprehensive, interconnected

healthcare ecosystem. Legacy system integration is addressed through custom adapters and ETL processes, ensuring that valuable historical data is not lost. Throughout all these integrations, the system maintains rigorous adherence to healthcare regulations such as HIPAA and GDPR, implementing robust audit trails and encryption to safeguard sensitive patient information. This holistic approach to system design and integration enables a more connected, efficient, and patient-centric healthcare delivery model.

## 4)IMPLEMENTATION:

## Implementation:

The lead-acid storage battery may be used. This battery is rechargeable; it consists of lead and lead/dioxide electrodes which are immersed in sulfuric acid. When fully charged, this type of battery has a 2.06-2.14 V potential (A 12 volt car battery uses 6 cells in series). During discharge, the lead is converted to lead sulfate and the sulfuric acid is converted to water. When the battery is charging, the lead sulfate is converted back to lead and lead dioxide. A nickel-cadmium battery has become more popular in recent years. This battery cell is completely sealed and rechargeable. The electrolyte is not involved in the electrode reaction, making the voltage constant over the span of the batteries long service life. During the charging process, nickel oxide is oxidized to its higher oxidation state and cadmium oxide is reduced. The nickel-cadmium batteries have many benefits. They can be stored both charged and uncharged. They have a long service life, high current availabilities, constant voltage, and the ability to be recharged. Fig: 3.3.5 shows pencil battery of 1.5V.

The process of converting an alternating current to a pulsating direct current is called as rectification. For rectification purpose we use rectifiers.

Rectifiers:

A rectifier is an electrical device that converts alternating current (AC) to direct current (DC), a process known as rectification. Rectifiers have many uses including as components of power supplies and as detectors of radio signals. Rectifiers may be made of solid-state diodes, vacuum tube diodes, mercury arc valves, and other components.

A device that it can perform the opposite function (converting DC to AC) is known as an inverter.

When only one diode is used to rectify AC (by blocking the negative or positive portion of the waveform), the difference between the term diode and the term rectifier is merely one of usage, i.e., the term rectifier describes a diode that is being used to convert AC to DC. Almost all rectifiers comprise a number of diodes in a specific arrangement for more efficiently converting AC to DC than is possible with only one diode. Before the development of silicon semiconductor rectifiers, vacuum tube diodes and copper (I) oxide or selenium rectifier stacks were used.

Bridge full wave rectifier:

The Bridge rectifier circuit is shown in figure, which converts an ac voltage

to dc voltage using both half cycles of the input ac voltage. The Bridge rectifier circuit is shown in the figure. The circuit has four diodes connected to form a bridge. The ac input voltage is applied to the diagonally opposite ends of the bridge. The load resistance is connected between the other two ends of the bridge.

For the positive half cycle of the input ac voltage, diodes D1 and D3 conduct, whereas diodes D2 and D4 remain in the OFF state. The conducting diodes will be in series with the load resistance  $R_L$  and hence the load current flows through  $R_L$ .

For the negative half cycle of the input ac voltage, diodes D2 and D4 conduct whereas, D1 and D3 remain OFF. The conducting diodes D2 and D4 will be in series with the load resistance  $R_L$  and hence the current flows through  $R_L$  in the same direction as in the previous half cycle. Thus a bi-directional wave is converted into a unidirectional wave.

DB107:

Now -a -days Bridge rectifier is available in IC with a number of DB107. In our project we are using an IC in place of bridge rectifier.

Features:

- Good for automation insertion
- Surge overload rating - 30 amperes peak
- Ideal for printed circuit board
- Reliable low cost construction utilizing molded
- Glass passivated device
- Polarity symbols molded on body
- Mounting position: Any
- Weight: 1.0 gram

### Step 3: Filtration

The process of converting a pulsating direct current to a pure direct current using filters is called as filtration.

Filters:

Electronic filters are electronic circuits, which perform signal-processing functions, specifically to remove unwanted frequency components from the signal, to enhance wanted ones.

### Introduction to Capacitors:

The Capacitor or sometimes referred to as a Condenser is a passive device, and one which stores energy in the form of an electrostatic field which produces a potential (static voltage) across its plates. In its basic form a capacitor consists of two parallel conductive plates that are not connected but are electrically separated either by air or by an insulating material called the Dielectric. When a voltage is applied to these plates, a current flows charging up the plates with electrons giving one plate a positive charge and the other plate an equal and opposite negative charge. This flow of electrons to the plates is known as the Charging Current and continues to flow until the voltage across the plates (and hence the capacitor) is equal to the applied voltage  $V_{cc}$ . At this point the capacitor is said to be fully charged and this is illustrated below.

### Units of Capacitance:

Microfarad ( $\mu F$ )  $1\mu F = 1/1,000,000 = 0.000001 = 10^{-6} F$

Nanofarad (nF)  $1nF = 1/1,000,000,000 = 0.000000001 = 10^{-9} F$

Pico farad (pF)  $1pF = 1/1,000,000,000,000 = 0.000000000001 = 10^{-12} F$

### Operation of Capacitor:

Think of water flowing through a pipe. If we imagine a capacitor as being a storage tank with an inlet and an outlet pipe, it is possible to show approximately how an electronic capacitor works.

First, let's consider the case of a "coupling capacitor" where the capacitor is used to connect a signal from one part of a circuit to another but without allowing any direct current to flow.

### CONTROL LINES:

#### EN:

Line is called "Enable." This control line is used to tell the LCD that you are sending it data. To send data to the LCD, your program should make sure this line is low (0) and then set the other two control lines and/or put data on the data bus. When the other lines are completely ready, bring EN high (1) and wait for the minimum amount of time required by the LCD datasheet (this varies from LCD to LCD), and end by bringing it low (0) again.

#### RS:

Line is the "Register Select" line. When RS is low (0), the data is to be treated as a command or special instruction (such as clear screen, position cursor, etc.). When RS is high (1), the data being sent is text data which should be displayed on the screen. For

example, to display the letter "T" on the screen you would set RS high.

RW:

Line is the "Read/Write" control line. When RW is low (0), the information on the data bus is being written to the LCD. When RW is high (1), the program is effectively querying (or reading) the LCD. Only one instruction ("Get LCD status") is a read command. All others are write commands, so RW will almost always be low.

Finally, the data bus consists of 4 or 8 lines (depending on the mode of operation selected by the user). In the case of an 8-bit data bus, the lines are referred to as DB0, DB1, DB2, DB3, DB4, DB5, DB6, and DB7.

Logic status on control lines:

- E - 0 Access to LCD disabled
- 1 Access to LCD enabled
- R/W - 0 Writing data to LCD
- 1 Reading data from LCD
- RS - 0 Instructions
- 1 Character

Writing data to the LCD:

- 1) Set R/W bit to low
- 2) Set RS bit to logic 0 or 1 (instruction or character)
- 3) Set data to data lines (if it is writing)
- 4) Set E line to high
- 5) Set E line to low

Read data from data lines (if it is reading)on LCD:

- 1) Set R/W bit to high
- 2) Set RS bit to logic 0 or 1 (instruction or character)
- 3) Set data to data lines (if it is writing)
- 4) Set E line to high
- 5) Set E line to low

Entering Text:

First, a little tip: it is manually a lot easier to enter characters and commands in hexadecimal rather than binary (although, of course, you will need to translate commands

from binary couple of sub-miniature hexadecimal rotary switches is a simple matter, although a little bit into hex so that you know which bits you are setting). Replacing the d.i.l. switch pack with a of re-wiring is necessary.

The switches must be the type where On = 0, so that when they are turned to the zero position, all four outputs are shorted to the common pin, and in position “F”, all four outputs are open circuit.

All the available characters that are built into the module are shown in Table 3. Studying the table, you will see that codes associated with the characters are quoted in binary and hexadecimal, most significant bits (“left-hand” four bits) across the top, and least significant bits (“right-hand” four bits) down the left.

Most of the characters conform to the ASCII standard, although the Japanese and Greek characters (and a few other things) are obvious exceptions. Since these intelligent modules were designed in the “Land of the Rising Sun,” it seems only fair that their Katakana phonetic symbols should also be incorporated. The more extensive Kanji character set, which the Japanese share with the Chinese, consisting of several thousand different characters, is not included!

Using the switches, of whatever type, and referring to Table 3, enter a few characters onto the display, both letters and numbers. The RS switch (S10) must be “up” (logic 1) when sending the characters, and switch E (S9) must be pressed for each of them. Thus the operational order is: set RS high, enter character, trigger E, leave RS high, enter another character, trigger E, and so on.

The first 16 codes in Table 3, 00000000 to 00001111, (\$00 to \$0F) refer to the CGRAM. This is the Character Generator RAM (random access memory), which can be used to hold user-defined graphics characters. This is where these modules really start to show their potential, offering such capabilities as bar graphs, flashing symbols, even animated characters. Before the user-defined characters are set up, these codes will just bring up strange looking symbols.

Codes 00010000 to 00011111 (\$10 to \$1F) are not used and just display blank characters. ASCII codes “proper” start at 00100000 (\$20) and end with 01111111 (\$7F). Codes 10000000 to 10011111 (\$80 to \$9F) are not used, and 10100000 to 11011111 (\$A0 to \$DF) are the Japanese characters.

A low level on this pin for longer than the minimum pulse length will generate a reset, even if the clock is not running. Shorter pulses are not guaranteed to generate a reset.



XTAL1:

Input to the inverting Oscillator amplifier and input to the internal clock operating circuit.

XTAL2:

Output from the inverting Oscillator amplifier.

AVCC:

AVCC is the supply voltage pin for Port A and the A/D Converter. It should be externally connected to VCC, even if the ADC is not used. If the ADC is used, it should be connected to VCC through a low-pass filter.

AREF:

AREF is the analog reference pin for the A/D Converter.

AVR CPU CORE

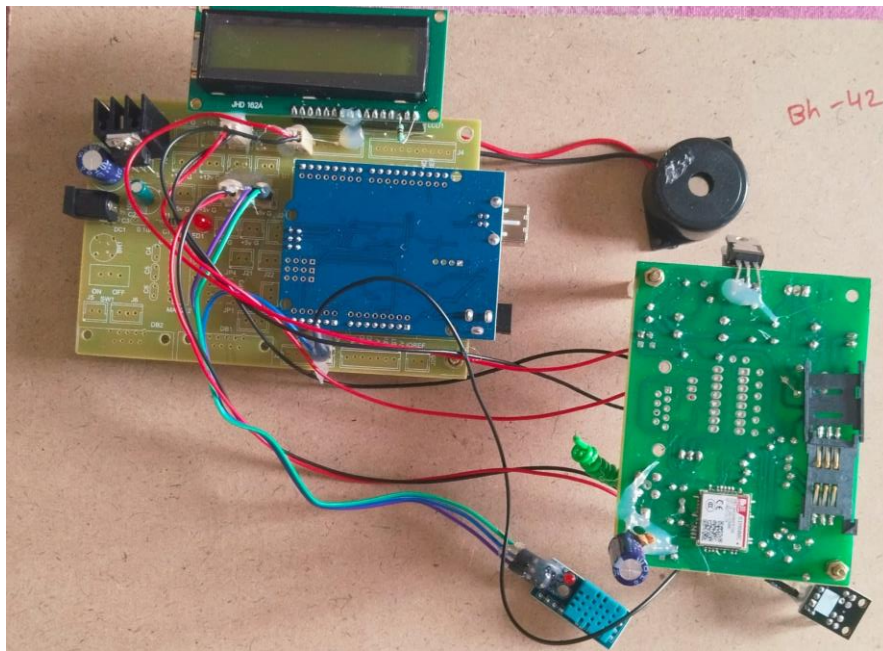
The AVR core combines a rich instruction set with 32 general purpose working registers. All the 32 registers are directly connected to the Arithmetic Logic Unit (ALU), allowing two independent registers to be accessed in one single instruction executed in one clock cycle. The resulting architecture is more code efficient while achieving throughputs up to ten times faster than conventional CISC microcontrollers.

## 5)Testing and Debugging/Results:

### Testing and Debugging/Results:

The structure of the LED light is completely different than that of the light bulb. Amazingly, the LED has a simple and strong structure. The light-emitting semiconductor material is what determines the LED's color. The LED is based on the semiconductor diode.

When a diode is forward biased (switched on), electrons are able to recombine with holes within the device, releasing energy in the form of photons. This effect is called electroluminescence and the color of the light (corresponding to the energy of the photon) is determined by the energy gap of the semiconductor. An LED is usually small in area (less than 1 mm<sup>2</sup>), and integrated optical components are used to shape its radiation pattern and assist in reflection. LEDs present many advantages over incandescent light sources including lower energy consumption, longer lifetime, improved robustness, smaller size, faster switching, and greater durability and reliability. However, they are relatively expensive and require more precise current and heat management than traditional light sources. Current LED products for general lighting are more expensive to buy than fluorescent lamp sources of comparable output. They also enjoy use in applications as diverse as replacements for traditional light sources in automotive lighting (particularly indicators) and in traffic signals. The compact size of LEDs has allowed new text and video displays and sensors to be developed, while their high switching rates are useful in advanced communications technology. become more sophisticated, reliable, and deeply integrated into standard healthcare practices. Their success will hinge on ongoing collaboration between healthcare providers, technology developers, regulatory bodies, and patients themselves. This collective effort will be essential in addressing current challenges, maximizing the benefits for patients and the healthcare system, and ultimately realizing the full potential of this transformative technology. As research and development progress, and real-world implementations provide valuable insights, IoT-based e-health data acquisition systems stand poised to play a pivotal role in shaping the future of healthcare, promising improved outcomes, enhanced quality of life for patients, and a more efficient, data-driven approach to medical care and research.



## 6)CONCLUSION

## CONCLUSION:

IoT-based e-Health data acquisition systems have emerged as a transformative force in healthcare, offering unprecedented capabilities for continuous patient monitoring and data collection. These systems leverage a network of interconnected devices to gather, transmit, and analyze health data in real-time, enabling healthcare providers to make more informed decisions and deliver personalized care. The advantages of such systems are manifold, including improved patient outcomes through early detection of health issues, enhanced efficiency in healthcare delivery, and the empowerment of patients to take a more active role in managing their health. Moreover, the vast amounts of data collected through these systems hold immense potential for medical research and the development of predictive healthcare models. However, the implementation of IoT-based e-Health systems is not without challenges. Data security and privacy concerns remain paramount, given the sensitive nature of health information. Interoperability issues between different devices and systems pose technical hurdles, while the lack of standardization<sup>35</sup> across the industry complicates widespread adoption. There are also ethical considerations regarding the potential over-reliance on technology in healthcare decision-making. Despite these challenges, the future of IoT-based e-Health data acquisition systems appears promising. As technology continues to advance and these systems become more sophisticated and integrated, they have the potential to revolutionize healthcare delivery, improve patient outcomes, and contribute to a more proactive and personalized approach to medicine. The ongoing development and refinement of these systems will likely play a crucial role in shaping the future of healthcare, making it more accessible, efficient, and patient-centered.

## 7)Reference:

## Reference:

Here are some key references for IoT-based e-health data acquisition systems: • Dimitrov, D. V. (2016). Medical Internet of Things and Big Data in Healthcare. *Healthcare Informatics Research*, 22(3), 156-163. • Yuehong, Y. I. N., Zeng, Y., Chen, X., & Fan, Y. (2016). The internet of things in healthcare: An overview. *Journal of Industrial Information Integration*, 1, 3-13. • Baker, S. B., Xiang, W., & Atkinson, I. (2017). Internet of Things for Smart Healthcare: Technologies, Challenges, and Opportunities. *IEEE Access*, 5, 26521-26544. • Farahani, B., Firouzi, F., Chang, V., Badaroglu, M., Constant, N., & Mankodiya, K. (2018). Towards fog-driven IoT eHealth: Promises and challenges of IoT in medicine and healthcare. Appendices: For an IoT-based e-health data acquisition system, the appendices would likely contain detailed technical information and supplementary data that support the main report or document.



## 8) Appendices:

## Appendices:

For an IoT-based e-health data acquisition system, the appendices would likely contain detailed technical information and supplementary data that support the main report or document.

**Appendix A: Technical Specifications** • Detailed specifications of all sensors used • Microcontroller and processing unit details • Communication module specifications (e.g., Wi-Fi, Bluetooth, LoRa) • Power supply and battery specifications

**Appendix B: System Architecture Diagrams** • Detailed system block diagrams • Data flow charts 36 • Network topology diagrams