#### SafeTrace: A Safety-Driven Requirement Traceability Framework on Device Interaction Hazards for MD PnP

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#### Motivation

- Safety analysis and Traceability is mandated by medical devices standard or such as IEC 62304 and FDA
- However, Safety analysis is partially/not traced in traceability
  - Ex: IBM Rational DOORS, Yakindu Traceability, and Intland codeBeamer
- Even if some tools support safety analysis such as FMEA, however, the trace links are at relative higher level and *lack of a more fine grained control of trace links*.
- An **outdated** safety analysis may not reflect the latest safety status of a system

#### Intland - codeBeamer

- Support only FMEA (Failure Mode Effectiveness Analysis, a table based safety analysis)
- To set up traceability, a downstream artifact should be manually added from the immediate upstream artifacts.

DETAILS			Open-Loop Safe Airway Laser Systems » Trackers 2 System Requirements » Traceability Browser #8482					
Surgical Fire			Show dependent	cies Permanent Link	Load/Manage Presets	Save current Settings	Export to Office	
Requirement(s) in the <b>Mitigation Requirement</b> field of this risk will not appear in the Risk Matrix Diagram. To create risks related to a Requirement, please navigate to your Requirements tracker, and use either the risk field, or the 'Generate Risk' option.			TRACEABILITY BROWSER CURRENT SELECTION					
			Initial Tracker(s)	Image: System Requirements         Image: Analysis	NII Items	<b>♦ 3</b> + Add		
			Level 1	Failure Mode 😂 + Add				
Status: NEW			Level 2 Architecture C + Add					
Requirement:	Open Loop Safe shall provide safe	)	Level 3	+ Add				
Failure Cause:	By allowing both the ventilator and the laser staying at the in- operation status.		Associations: incoming 🛛 outgoing References: incoming 🗹 outgoing Version Exclude folders and information					
			Initial Tracker(s) 💡 2	System Requirements	> Level 1 S Failure Mo	de	> Level 2 S 4 Architecture	
Failure Mode:       1. Ventilator is On, then turned on laser         1. Laser is On, then resume oxygen supply in ventilator			SYSREQ-4415] To avoid patient brain damage due to hypoxia, the ventilator should remain in its no-operation state for no longer than a specified period.			[ARCH-4423] Open Loop Safe shall provide timed actions		
	Surgical Fire		SYSREQ-4414 the laser scalpel sh in-operation states	] To avoid fire, the ventilator and ould never be in their respective at the same time.	[FM-4419] Surgic	al Fire SUSPECTED 🕁	[ARCH-4420] Open Loop Safe shall provide safe devices interlocks	

**FMEA** editor

Traceability Browser, starting from a "tracker" and tracing to different levels

#### **IBM Doors**

• No support for specific safety analysis methods (Hazard and risks in their terms), but only generic text, diagrams (ex: UML).

Create Artifact	×	←   > 04 Safety Analysis >	317517 Hazard_and_risk* 🖓
Initial content:	G	Gateway Gateway Gateway	→ G ⊕ ⊕ ⊕ Style →
Name:	Hazard_and_risk The name can be automatically created based on the content, or you can type one.	Data Message Horizontal Pool	
Type Artifact type: *	i Hazard and Risk ▼	Horizontal Vertical Pool Vertical Lane	
Artifact format: * Populate Artifact Value	Text Collection	Annotation	
Template:	Module Diagram You can populate the artifact with information from an artifact template.	Some         Some         Control         Cont	
Location			
Folder:	04 Safety Analysis Browse	Component Package Node	
Tags:	Add Tags	UML Behavior Diagrams	
<ul> <li>Open artifact</li> </ul>	OK Cancel	Data Flow Diagram     Wireframes	
	,	javascript:void(null):	

# Challenges

- How can we represent device interactions in safety analysis?
- What should be traced in safety analysis?

How can we leverage the analysis?

- How to integrate the trace links among safety requirements, system design, and safety analysis?
- How to perform change impact analysis?

#### SafeTrace

- A safety-driven traceability framework integrating safety analysis
- Use fault-tree as safety analysis method
- Provide change impact analysis of requirements, and design changes on fault trees.

#### Fault-Tree Analysis

- A widely used safety analysis method
- Embedded events and logics in a Tree Structure
- Provide quantitative evaluation such as reliability or Mean Time To Failure (MTTF)
- Provide qualitative evaluation for examining the system event combinations
- Many other possible semantics such as events
   happen on certain Conditions



## Fault-Tree Analysis

- Minimum cut set (mcs)
  - a set of primary events whose
     occurrence (at the same time) ensures
     that the TOP event occurs.
  - Preserve the logical relations
  - > Ex: mcs = {{A}, {B,C}}
- Safe Guard Event always produces the False value
  - Ex: if B is a Safe Guard event,
     the path from C to root is broken



## Medical Scenario

- Tracheotomy Laser Surgery
- A physician uses a *laser scalpel* to unblock the patient's trachea when *ventilator* pauses supplying oxygen
- Potential Hazards:
  - Surgical fire: laser operating when oxygen level is high
  - Hypoxia: blocking of oxygen flow exceeds a certain duration



# MD PnP System Design for Tracheotomy

- Based on Medical Device Plug-and-Play (MD PnP) to provide medical devices interoperability
- Supervisory computer for devices coordination's
- A certified safe adapter on each device
  - Laser Scalpel
  - Ventilator
- Assume networked communication may fail anytime



# MD PnP for Tracheotomy - Command Flow

• Laser sends requests to Supervisory

computer for devices coordination

- Supervisory prepares Ventilator
- Ventilator acknowledges
- Supervisor acknowledges Laser



#### MD PnP Tracheotomy System Safety Requirements

 Safety Requirement 1 (SafeReq-1): To avoid fire, the ventilator and the laser scalpel should never be in their respective in-operation states at the same time

> => requires device interactions

• Safety Requirement 2 (SafeReq-2): To avoid patient brain damage due to hypoxia, the ventilator should remain in its no-operation state for no longer than a specified period.

#### Fault Tree of Hypoxia



#### Fault Tree of Surgical Fire



#### SafeTrace Architecture



#### Trace Links



# Requirement Change Impact Analysis

- Changes made to a *requirement* artifact includes the actions Creating, Deleting, or Updating
- Creating a req., see if the current design or FTA supports the new req.
- Deleting a req., see if the root of FTA becomes or design becomes isolated
- Updating a req., see if the current design or FTA supports the modified req.

# Design Change Impact Analysis

- Changes made to a *design* artifact includes the actions Creating, Deleting, or Updating
- Key idea: Whether an Update in design will propagate to the failure at the root of a fault tree
- For each design artifact change *a*, find the associated events *e*, MCSs *mcs*, and requirements *req* and fault-tree *ft* 
  - For each e associated with *a*, if *e* is the only event in *mcs*,
    - report req and ft could be impacted => Ex: mcs = {{e}, {B,C}}
  - > Else if no safe guard event in mcs,
    - report req and ft could be impacted => Ex: mcs = {{A}, {B,e}}
  - *Else // e is in a cut set has a safe guard event* 
    - report req and ft may NOT be impacted => Ex: mcs = {{A}, {B,e}}, B is a safe guard event

# Case Study - New Requirement

#### • New Requirement:

Safety Requirement 3 (SafeReq-3): The system shall bring the patient connected to the system to a safe state (i.e., supply the patient with oxygen) without causing either fire or hypoxia *if communications between the supervisor computer and medical devices fail.* 

#### • Design changes:

- > Adding open-loop software into MD PnP application
- > Adding open-loop software into device Adapter
- Need to update the traceability graph and fault-tree analysis

#### Case Study - Traceability Graph without SafeReq-3



Note 1: Vertical arrows in design represent information flow only. They are not part of trace links. Note 2: No trace links setup for uncontrollable basic events  $E_{b.1}$ ,  $E_{b.3}$ , and  $E_{b.4}$ 

# Case Study- Phase 3 - Hypoxia



#### Case Study - Phase 3 - Fire FT



# Case Study - Updated Traceability



Note: Vertical arrows in design represent information flow only. They are not part of trace links.

**Top Events in Fault-Tree Analysis**  $E_{t_1}$  (Fire)  $\rightarrow$  SafeReq-1  $E_{t,2}$  (Hypoxia)  $\rightarrow$  SafeReq-2 **Basic Events in Fault-Tree Analysis** E<sub>b.1</sub> (MD PnP platform crashes) E<sub>b.2</sub> (MD PnP application crashes) E<sub>b.3</sub> (Network crashes) E<sub>b.4</sub> (SpO2 drops below safe threshold) E<sub>b.5</sub> (Open-loop safe software crashes) E<sub>b.6</sub> (Ventilator is turned On) E<sub>b.7</sub> (Laser is turned On) Safeguard Event in FTA in Phase 3 E<sub>s.1</sub> (Open-loop safe MD PnP device adapter crashes)

#### Discussion

- Manual setting up trace links could be tedious and error prone
  - Need computer-added automation in tool implementations
- The impact analysis based on MCS theory does not provide whether it is positive or negative impact
- Need to integrate SafeTrace with other artifacts such as source code, testing, statechart

#### Conclusion

- SafeTrace manages traceability in life-critical systems including trace links
  - > (1) between **design artifacts** and **basic events** in fault trees
  - (2) between safety requirements and the top event (i.e., failure proposition) of each tree
- Provides impact-analysis algorithms to identify the impacts on safety analysis that are caused by requirement- and design changes.
- Leverages the minimum cut sets of fault-tree analysis

#### **THANK YOU AND Q&A**

#### **BACKUP SLIDES**

#### **TO BE DELETED**

#### Motivation

- Safety issues due to devices interactions
- Safety hazards in Airway Laser Tracheotomy
  - Surgical fire: laser scalpel is emitting while ventilator is supplying oxygen (SpO<sub>2</sub> is high)
  - Brain hypoxia: the oxygen supply in the ventilator is not resumed in time
- Medical Device Plug-and-Play Program
  - Provide medical device interoperability
  - Reduce the human errors

Picture Source: Airway Fires during Surgery, PA PSRS Patient Safe Advise 2007 Mar;4(1):1,4-6.



# Medical Device Plug-and-Play

- System architecture
  - Supervisor
  - Client-Adapter
  - Medical Devices
  - Wired Network
- Could we adopt MD PnP in a wireless network environment?
- What are the new challenges?



#### Challenges

#### • Fault model:

- Both the network and supervisor software may fail during the medical operations
- The supervisor runs on a commercial computer which is not certified as a medical device
- The communication might not be reliable

#### • Assumptions:

- Client adapters and medical devices are certified safe component (Class-3)
- The rate of failure could be negligible during the service of operations

## The Open-Loop Safe Problem

- An open-loop safe system is a system that satisfies its safety constraints while the communication is not guaranteed.
  - Ex: commands to resume oxygen supply could suffer long delay => Could violate safety constraints
  - Ex: commands to query device status might not arrive
     => Unknown system states, cannot perform surgeries
  - Ex: acknowledgements might not reach the other end
     => Unknown the status of a sent command

#### **Research Questions**

- Given a system of devices, devices status, safety constraints, system state to perform medical operations,
  - Can the system operate open-loop safely to perform the medical operations?
  - If the system is open-loop safe, what are the possible system transitions?
  - How can we find a path of system transitions that has the longest time in a system state allowing performing medical operations?

### Contributions

#### • This work

- Provides a workflow toward developing an open-loop safe system
- Derives a series of open-loop safe transitions as a foundation for systems with multiple medical devices
- Incorporates safety constraints of interactions between devices.
- Assists to select a system transition path that can allow medical personnel with the longest operation time for performing surgeries.

#### Workflow for Open-Loop Safe System Developments

- Phase I: decide the existence of an open-loop safe path given a system model, safety constraints and the objective state.
- Phase II: find out the path that can allow a system to stay at for the longest period of time to perform the medical task.



#### System Models

- An open-loop safe system model is a three-tuple, (S, SC, P)
- S : set of system states  $s = (d_{1.status} \dots d_{i.status})$ , each state s has a type
  - > Open-Loop Safe State (OLSState)
  - Transient Safe State (TSState)
  - Operation State (OState)
  - UnSafe State (USState)
- SC: SafetyConstraints is a two-tuple,  $(s_i, p_i)$  where the system is allowed to stay at  $s_i$  state for  $p_i$  unit of time each time.
- *P*: an open-loop safe path *p*, *p* has a source state, a destination state and a series intermediate states between the source and the destination state.
  - Ex: OLSState -> TSState -> TSState -> TSState -> OState (roll back to OLSState)

#### Determining an Open-Loop Safe System

- 1) Construct an undirected weighted graph based on the given system states and safety constraints
  - > Ex: state distance of (1,0,0) and (1,1,0) is one -> an edge with weight one
  - Ex: distance of (1,0,0) and (0,1,0) is two -> an edge with weight infinite
- 2) With the graph, next, we use the shortest path algorithm to find out the shortest path.
  - Compare the length of the path with the state distance between the source and the destination state.
  - > OLSState (1,0,0) to OState (0,1,1)
    - => state distance is three



#### Finding the Open-Loop Safe Path for Surgeries

- **Transient Safe Period (TSP)** is a period of time that a device can stay at the certain status so that the whole system remains safe temporarily.
- A TSP for a device can be configured as a timer by an OLS-Client adapter
  - A device changes status when the timer starts
  - > A device changes status again when the timer is fired
- TSP calculation example for laser in Airway Laser Surgery

$$d_{laser.on.timer} = d_{vent.off.timer} - 2(d_{transit} + d_{reside}) = d_{ops} + 2 \times d_{transit}$$

39



#### Finding the Open-Loop Safe Path for Surgeries (Cont.)

- With a list of potential paths, for each candidate path p
- Find the first device  $(d_{init})$  associated with a safety constraint along the path p
- Consider the safety constraint from that device  $d_{init}$  sequentially along the path
  - Gradually shrink the TSP of each device along the path.
  - If a device also has a safety constraint specifying the maximum limited period of time staying in the certain status, then we take it into account when calculating the TSP for the device => minimum of the two constraints.
- For the devices listed before  $d_{init}$  on the path, we expand the timer period backward from the initial device to the rest of devices.

# Case Study

- Initially, an open-loop safe Tracheotomy surgery with two safety requirements
- Initial safety requirements
  - > 1<sup>st</sup> No surgical fire
  - > 2<sup>nd</sup> No brain hypoxia, Ventilator\_Off\_Max
- New safety constraints:
  - 3<sup>rd</sup> The laser scalpel can only operate safely and continuously within a period of time, Laser\_On\_Max
  - 4<sup>th</sup> Once the oxygen supply is paused, it is required to enable the plain air supply.

#### **Updated System States**

System State Table

System State Graph



#### **Updated State Transitions**

- Each path has the same weight of three, but the max operation time depends on the order of transitions on the path.
- P1: the oxygen is paused (0,0,0) and then the plain air is supplying (0,1,0)
- P2: first, the plain air is supplying (1,1,0), then the oxygen is paused (0,1,0)
- P2 has a longer period  $d_{ops}$  for medical operations than P1



# Conclusion

- MD PnP in wireless network environment shall be able to counter against
  - > 1) communication network failures
  - > 2) supervisory computer crashes
- The paper suggests a framework toward achieving an open-loop safe MD PnP system by
  - Constructing System State Graph based on System Models and Safety Constraints
  - Generating system paths form the system graph
  - Finding the longest TSP for performing medical operations

#### **Future Work**

- Other challenges remain:
  - Communication protocol to coordinate devices is needed
  - Dynamic system states because of medical device joining and aborting
  - Support multi-valued devices and complex transitions inside a device
  - Support other safety constraints, such as minimum staying period

Thank you very much!