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USING WBAN
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**HEALTHCARE MONITORING SYSTEM
USING WBAN**

By

WATHIEQ AKRAM BIN ANWAR

FINAL PROJECT REPORT

Submitted to the Department of Electrical & Electronic Engineering
in Partial Fulfillment of the Requirements
for the Degree
Bachelor of Engineering (Hons)
(Electrical & Electronic Engineering)

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CERTIFICATION OF APPROVAL

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Wathieq Akram Bin Anwar

A project dissertation submitted to the
Department of Electrical & Electronic Engineering
Universiti Teknologi PETRONAS
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Approved:

Dr. Azlan Awang
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UNIVERSITI TEKNOLOGI PETRONAS
TRONOH, PERAK

June 2013

CERTIFICATION OF ORIGINALITY

This is to certify that I am responsible for the work submitted in this project, that the original work is my own except as specified in the references and acknowledgements, and that the original work contained herein have not been undertaken or done by unspecified sources or persons.

Wathieq Akram Bin Anwar

ABSTRACT

The conventional health care monitoring system cannot give real time updates on the medical records of a patient and is bounded by distance, hence resulting in abnormal signs on a patient to go unnoticed until it is too late. The aim of the study is to develop a prototype of healthcare monitoring system that is able to detect and wirelessly transmit pulse rate and temperature of a human body to a host PC. Using Arduino Uno R3 as the platform, a prototype is developed with ZigBee technology chosen as the wireless framework. Later, the precision of the sensors of the prototype is tested by calculating the standard deviation of the data set obtained. Next, the accuracy of the reading is tested by calculating the percentage error of the mean value from the set of data taking readings from established sensors as real value. From the test, the pulse sensor produces 1.35 for the standard deviation and 1.61% of percentage error, while the temperature sensor scores 0.74 for standard deviation and 0.75 for percentage error. Finally, an interface that is able to display the data on the host PC and provide the alarm in case of abnormal reading is design. As a conclusion, the prototype that is built is a success as it is able to detect and wirelessly transmit pulse rate and temperature of a human body to a host PC with precision and accuracy.

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LIST OF ABBREVIATIONS

WBAN	Wireless Body Area Network
WPAN	Wireless Personal Area Network
WSN	Wireless Sensor Network
FYP	Final Year Project
USB	Universal Serial Bus
BPM	Beats Per Minute

CHAPTER 1

INTRODUCTION

1.1 Background of Study

Health monitoring is one of the most essential procedures that are done every day in healthcare. Basically, health monitoring is done taking by the measurement of specific vital signals of the human body in determining the well being of patient in the hospital while helping in the diagnosis of the diseases. Four of the most common vital signs that that are measured are body temperature, pulse rate, blood pressure and respiratory rate. These 4 vital signs are detrimental for medical practitioners in determining the health condition of patient and also act as a warning in case a symptom arises. Overall, good health monitoring is the backbone in providing the best healthcare towards the community.

In recent years, health monitoring has been the highlight in the development of medical fields. As of now, most of the monitoring works are done by nurses that will be recorded in charts that will later be examined by the medical officers. However problem arises when there are cases where patients that are exhibiting dangerous symptom on their vital signal go unnoticed, until only when the symptom has gone bad or the patients simply die. Besides that, there exist hurdles to monitor patients that are far away from hospital or simply refrain from being hospitalised. Third problem is that the current system need is not efficient in term of cost and manpower usage. To check on the health condition of the patients, time is consumes as there are higher number of patient as compared to nurses. While the problem can simply be solved by increasing the number of nurses, this will later increase the cost of management, burdening the hospital administrative. Thus, it is vital for a new health monitoring system that can give the accurate measurement in real time, without the constraint of distance and also low cost is developed.

Wireless Body Area Network or simply called WBAN is among the initiatives that are proposed in developing the new health monitoring system. Due to advancement in the technology of physical sensors, low energy integrated circuits and wireless communication, man can now develop a more accurate and reliable wireless sensor network (WSN) with low cost. Overall, WBAN is the branch of WSN discipline that involves in developing a health monitoring system that is able to capture the measurement in real time, updating the medical records online. The system achieved this by a framework of intelligent sensors placed at human body, working together to measure the human vital signs. Using the wireless technology used in Wireless Personal Area Network (WPAN), WBAN is expected to be able to empower medical practitioners by giving them real time access of every patient medical condition anytime anywhere, helping in diagnosis and warning if dangerous symptom arises. Hopefully, as the technology matures enough, it will be able to replace the conventional method of health monitoring system used now.

Thus, that is the aim of this project which is to devise a working prototype of a Health Monitoring System using WBAN approach by using the ZigBee standard. The prototype will be able to detect body temperature and pulse rate using sensors working together in a wireless network around the body that will relay the information obtain to a host, display the result. The prototype will also come with a program with user interface to display the result.

1.2 Problem Statement

The current health monitoring system used is unable to give real time health update of the patient and is bounded by the distance of the patient from the hospital. Besides the current system takes time to collect the measurement form the patients and is also not cost effective. A new system that is low cost, able to deliver real time health update, anytime anywhere is to be constructed.

1.3 Objectives of Study

1. To design a prototype of a health monitoring system that is able to:
 - a) measure the pulse rate and body temperature
 - b) transmit the data to a host computer in real time
 - c) display the data received from the sensors
 - d) able to give alarm when abnormal reading is detected
2. To test the prototype on a human being.

1.4 Scope of Study

This project ultimate goal is to produce a prototype that is able to satisfy the objectives listed above. Among the scope of the study is to:

- a) Choose the sensor for the prototype
- b) Determine the placement of the sensor on body
- c) Configure the wireless framework
- d) Develop the user interface to display the result and give alarm as abnormal reading is detected
- e) Test the prototype

1.5 Feasibility of the project

The student is given 2 semesters effective from January 2013 to complete project divided to FYP 1 and FYP 2. Within the time period, the student is entitled to complete the project.

Based on the knowledge in project management, the student has developed a well and organize Gantt's chart to plan the project (refer methodology). By having regular informal discussion with the supervisor, it helps the student to gather information in requirement scoping.

As a conclusion, Gantt's chart and regular informal discussion will ensure the project to be on track and fulfil the FYP 1 and FYP 2 need.

CHAPTER 2

LITERATURE REVIEW

2.1 Human Health Monitoring System

Health monitoring system is to perform routine measurement on the vital signs of the human body. Health monitoring is important as it gives the data needed by the medical practitioners to assess the condition of a patient while developing a diagnosis of the problem experienced by the patients. As of now, the health monitoring system is rapidly being developed as the system now is not able to give health updates in real time and bounded by the constrict of distance. It is the hope of this project to be able to build a prototype of a working wireless health monitoring system that is able to update the health records of a patient no matter when or where they are.

2.2 Human vital signs

Human vital signs are the measurements that are taken by medical practitioners on the most basic of human bodily functions. These vital signs are important as their changes from the normal threshold or current condition signifies that the bodily functions are not working well. Furthermore, by routine updates on the measurement of vital signs, a trending can be made to assess whether a patient is improving or vice versa. These measurements may seem simple, but it also acts as a warning on the future condition or symptom that will surface on the patient. Four of primary vital signs that are recorded are body temperature, blood pressure, pulse rate and respiration rate. However in this project, only two vital signs are concerned which are:

2.1.1 *Body temperature*

Body temperature is one of the most basic vital sign that is measure. Body temperature measurement is vital as it conveys the core temperature of the body that is constantly regulated in making sure that chemical reactions in the body are

happening efficiently. Simply, in order for our body to function, it needs to maintain a regular set of core body temperature and if the core body temperature increased or decrease, it will signify that the thermoregulation of the body is not functioning, indicating arising problem. Normally, the human body temperature is at 37°C, however trending must first be establish to indicate a good baseline of the normal temperature for a patient specifically.

2.2.2 *Pulse Rate*

One of the most important organs in the human body is the heart. The heart functions by rhythmic and repeating contraction of its muscle [6] to provide the necessary pressure needed to push the oxygenated blood from the heart to all part of the body through the blood vessel. As the blood is pumped, the blood vessel will began to expand to accommodate the increase in the pressure and will later constrict back as the pressure decreases to prevent the backflow of blood. This rate of expansion and constriction of the artery is taken into measurement of vital signs hence called the pulse rate. Pulse rate is important as it signifies whether the heart is pumping at a normal threshold rate or not. In emergency situation, irregular or no pulse rate may signify that the heart is not working thus preventing the flow of oxygenated blood to the body. If not treated, the patients may die due to this. Besides that, consistent high pulse rate (tachycardia) and low resting pulse rate (bradycardia) is also a warning of arising problem that can be detected by trending of pulse rate. However, it is to be noted that, normal pulse rate varies with the various development stage of human life. The table below shows the difference [3]:

Table 1: Table of normal pulse rate according to stages in life

Stage	Normal Pulse Rate (bit per minute/bpm)
Newborns (0-3 months old)	100-150 bpm
Infants (3-6 months old)	90-120 bpm
Infants (6-12 months old)	80-120 bpm
Children (1-10 years old)	70-130 bpm
Children over 10 and adults	60-100 bpm
Trained athlete	40-60 bpm

Pulse rate and body temperature is two vital sign that will be taken into account of the project. The aim of the system is to develop a wireless health monitoring system to measure this two vital sign.

2.2 Wireless Body Area Network (WBAN)

In the era where health monitoring is becoming a big concern, researchers are constantly developing new technologies to increase the efficiency of health monitoring. One of the recent implementation is the introduction of Wireless Body Area Network as an emerging technology. This new field of research is the sub discipline from the development of Wireless Sensor Networks (WSN) that showcases a new range of intelligent sensor that is low cost and low power that can be embedded to any situation according to the specification. These sensors are able to transmit real data at real time wirelessly to a host that can later used the data to extract relevant information, helping in assessing the current situation and predicting the future outcome. WSN has been used in various fields (ie detecting landslides, real time data of the weather etc), however only now that the sensors produced are small and low power enough that it can be used to detect the human vital signal. Thus, from the development of WSN comes WBAN which instead of placing the sensors on the field or on machinery, the sensors are implemented onto the human body, giving insights on the current condition of human vital signs real time wirelessly.

Although WBAN can be used in recreational terms, the most significant impact is on the healthcare as WBAN can be used to replace the current health monitoring system that relies too much on human operators. In medical application, basically usage of WBAN is clustered into two groups according to the way they are placed on the body [8]. The first one is wearable WBAN which simply translated to wearable sensors that are place in close proximity with the body. Another type is the implantable WBAN that as its name are sensors that can be implemented directly into the human body (i.e. endoscope capsule that are ingested through the mouth cavity into the body). No matter which type of WBAN that is used, the main application for medical WBAN is actually to do detection and waveform sampling of biomedical signals while providing wireless control over medical devices [7].

The structure for a WBAN system consists of three main elements which are: a) sensors b) processing unit and c) wireless architecture. A sensor detects the vital signs that are happening on the body and provides the input to the system. The data that is detected will then be transferred wirelessly through the wireless architecture that is develop for them system. This system will mitigate the sending and receiving of data between the host and the sensors. Finally, the processing unit will act as the brain for the whole system. The processing unit refers to first, the processing unit that is used for the sensors. In the light of sensor development, most of sensors now are intelligent enough to have processing power in itself without the need to be controlled by a microcontroller. This processing unit is used to encode the data enabling it to be safely transmitted to the host. The second processing unit is the centre that will process all the data and transformed it into reliable information that can be used. Besides that, the central processing unit will also act as the administrator for the whole system to function. The diagram below shows a WBAN system [8]:

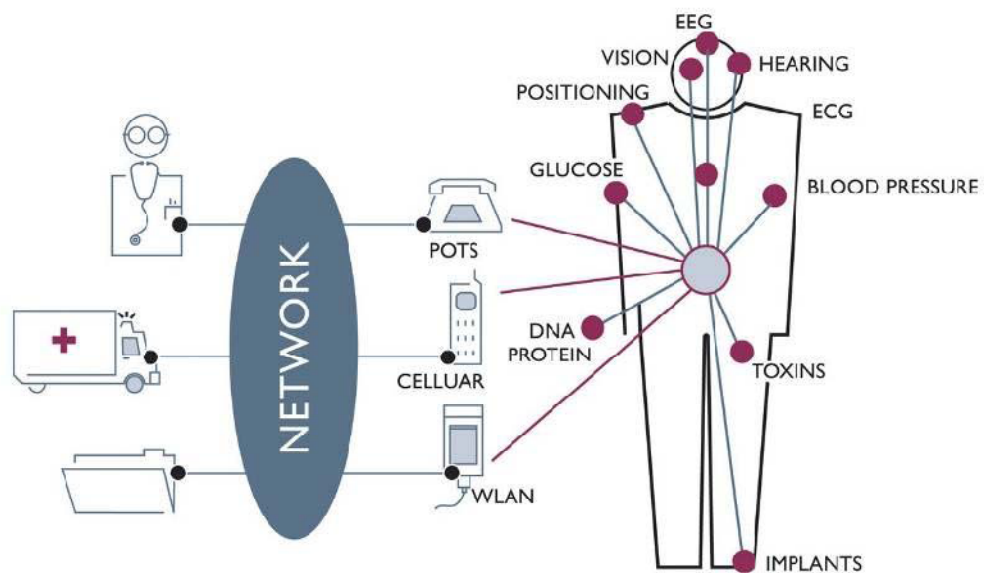


Figure 1: Example of WBAN implementation

To develop a WBAN system, it is important to make sure that the system developed will support low cost, ultra-low power and reliable wireless communication to be used in proximity without affecting the body [7]. Since the

devices that are used for WBAN system originated from WPAN (Wireless Personal Area Network) application, the graph of power consumption versus data rate spectrum [8] based on WPAN technology can be used to determine the best device to use in the system.

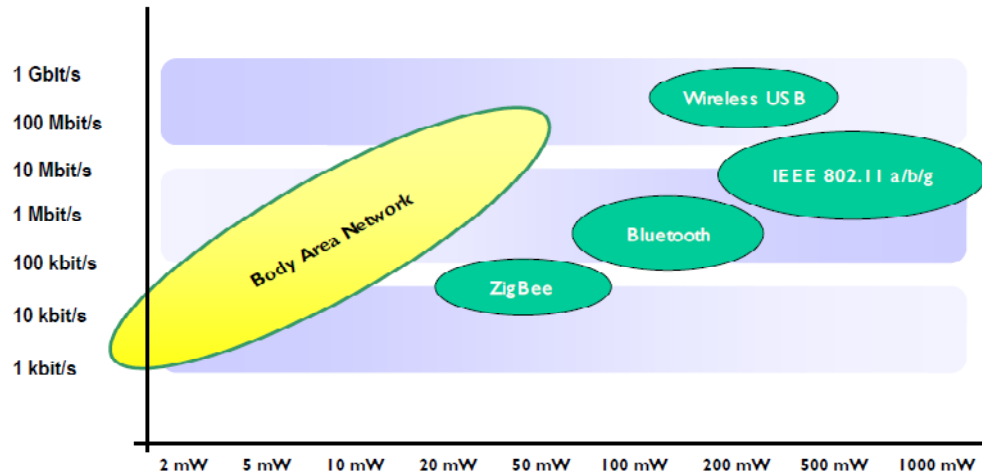


Figure 2: Graph of Power consumption versus data rate spectrum

However, with all development, there are issues that need to be addressed. In the implementation of WBAN, one of the major challenges is the system device itself. The devices in WBAN need to be power efficient, accurate, simple to use and low cost. This poses a problem since accurate with low cost and power efficient has never been on the same page. Simply put, to increase in accuracy of reading, better and higher cost of sensor need to be used. Besides that, there is also the problem of interoperability. From the graph above, many type of technology is used to develop the WBAN and this devices need to work together even though they are from different type of technology. Next, there are also questions on the privacy of the patients. Data that are collected wirelessly can be hacked and obtain by other people. In term of health updates, the information can be misused to blackmail a person.

Thus it is vital for a WBAN system to be integrated with high level of security so that the information will be secure and give access only to the authorized. Finally, the human factors also come in consideration for developing the WBAN system. The WBAN system must not give discomfort for the patients that are wearing them and this is a challenge for systems that are equipped large sensors. It is the utmost importance for the system to be transparent to the patient that he will not know that he is being monitored. Ultimately, a WBAN system must be low cost,

power efficient, transparent from the patient, accurate and have a high level of security to protect from hacking.

Hence in this project, ZigBee technology will be used as the wireless architecture using two sensors, pulse sensor and temperature sensor controlled by Arduino based board to develop the WBAN.

2.3 ZigBee

ZigBee is the protocol that will be used to develop the wireless framework for this project. ZigBee, a standard communications protocol for low power, wireless mesh networking is developed from the network layer known as IEEE 802.15.4 [5]. IEEE 802.15.4 is the standard that specifies the physical layer and media access control for low rate wireless personal area networks. This standard defines the power management, addressing, error correction, message formats and other point to point specific necessary for wireless communication to be established using radio frequency. Meanwhile, ZigBee is built upon this standard and added the upper layers that are not there in IEEE 802.15.4. The layers are[4]:

a) Routing

Routing determines the framework of how a transmitter can pass data from a series of other transmitter all the way to the destination.

b) Ad Hoc Network creation

This enables the radio to create an entire network automatically without help from outside.

c) Self Healing Mesh

An automated process whereby the radio that are broken are detected and measures are taken to reconfigure the network to repair broken routes.

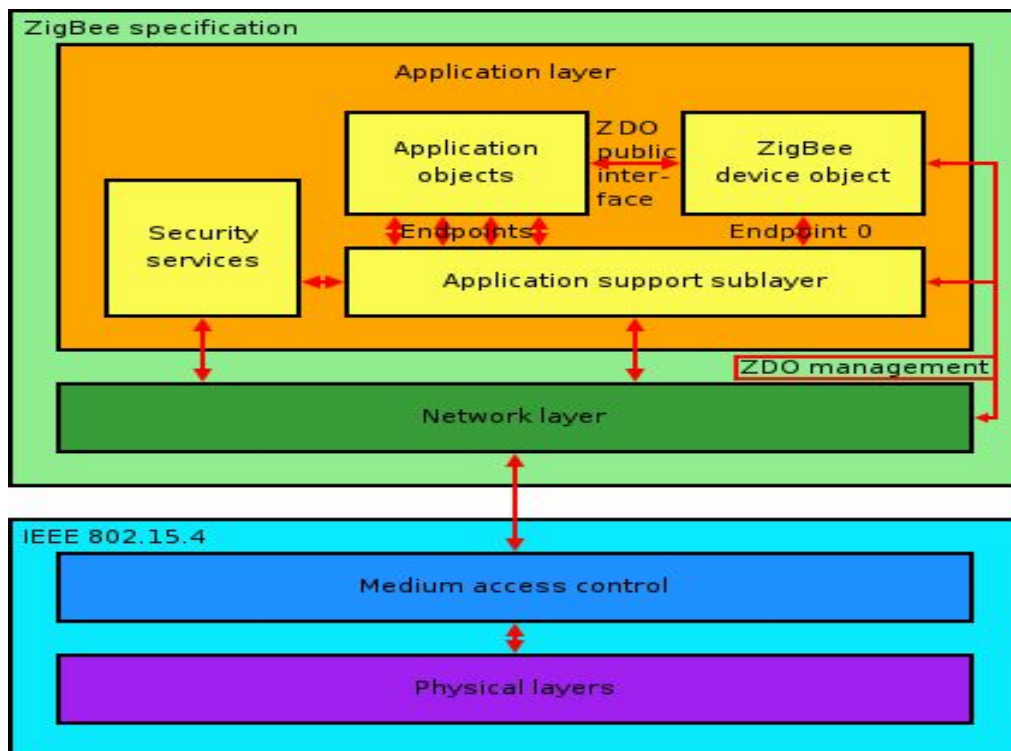


Figure 3 : Layers in ZigBee protocol

Among the advantages in using a ZigBee protocol is that it is capable for nodes to pass data between them instead of directly transferring the data directly to the destination. According to the inverse square law, each time a distance from a node to a destination is increased, the power that is required to transmit the data increase by four times [4]. As radio signals decay in accelerated fashion, there is a need for a transmitter to be fitted with big batteries that will be depleted shortly due to high power needed for the transmission. The ZigBee is built to tackle this problem by instead of having to transfer directly to the destination, it can pass the data between the nodes until the destination. In a network of sensors like WBAN, this is a godsend because it can minimise the amount of power needed for the connection thus lighter and more power efficient nodes can be used.

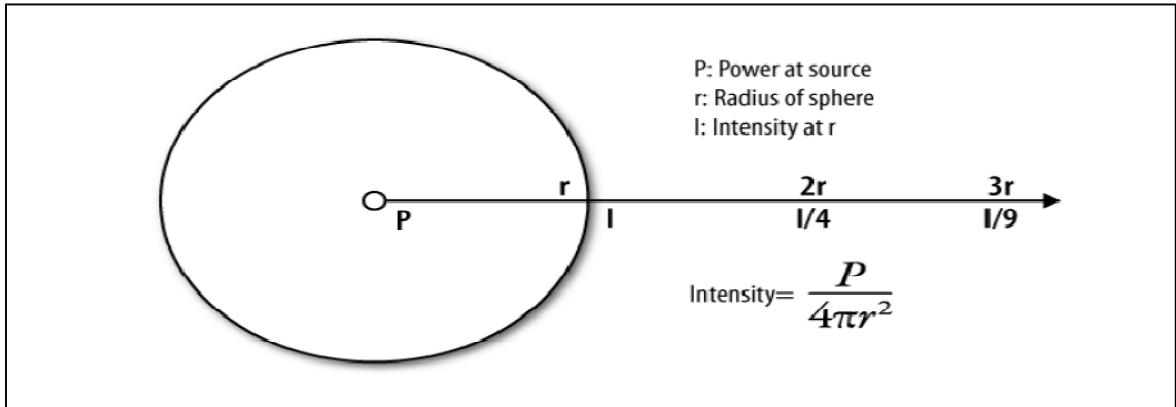


Figure 4 : Inverse square law

ZigBee is also versatile in the the choice of topologies. ZigBee supports 4 types of topologies mainly a) Pair, b) Star, c) Mesh and d) Cluster tree. The diagram shows the difference between the topologies

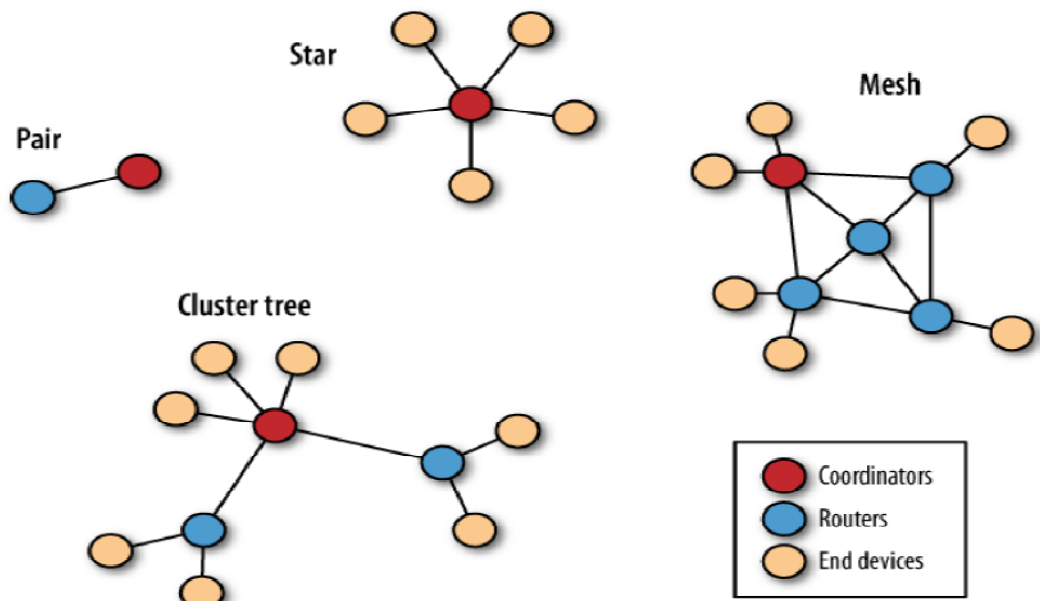


Figure 5: Wireless network topologies supported by ZigBee

However it is also to be noted that for a ZigBee protocol to work, it need at least 2 radios that are performing different roles [4]. The radios need to configure to be:

a) Coordinator

The radio is responsible to form the network, giving out addresses, and controlling the network to ensure that it is working smoothly without interruption. The coordinator acts as the brain for the network to function. Only one coordinator is in one network.

b) Router

Router basically is a medium for two for communications between two nodes that are far apart from each other. Besides acting as an active device or sensor, a router can transmit data from another node to other nodes creating a path to the destination.

c) End Device

End device can only communicate with the coordinator or adjacent nodes. It cannot transfer data from other nodes to other nodes instead only are transferring data from its own input.

The advantage of ZigBee compared to other WPAN technologies is first it is low cost as compared to WiFi or Bluetooth. The power needed for a ZigBee nodes is also much lesser and since ZigBee can be used in sleep mode between nodes, power can be saved enabling a longer battery life. In general, the ZigBee protocols minimize the time the radio is on, so as to reduce power use [1]. In addition to that since, ZigBee nodes can go from sleep to active mode in 30 ms or less, the latency can be low and devices can be responsive, particularly compared to Bluetooth wake-up delays, which are typically around three seconds. Ultimately, the ZigBee protocol is suitable to be used for this project.

CHAPTER 3

METHODOLOGY

3.1 Research Methodology and Project Activities

The research method that will be used is by researching on the subject, learning the ropes of the work needed to be done and making a working prototype that can satisfy the requirement. The aim of this project is to build a working prototype for a Health Monitoring System using WBAN that can detect pulse rate and body temperature of a person and relay it back wirelessly to a host computer. The stages for work that will be done are as follows:

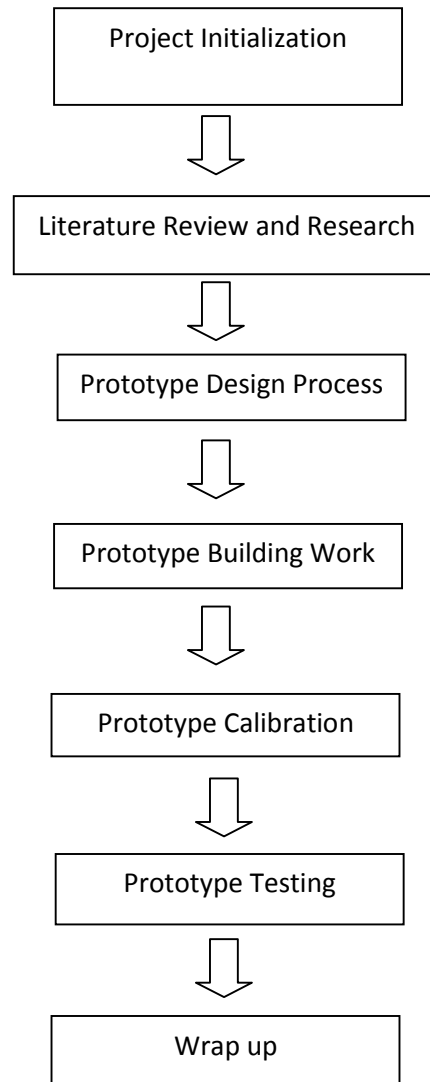


Figure 6: Flowchart of Project activities

3.2 Project Activities

a) Project Initialization

Project is given to the student by Dr Azlan. The project is divided to FYP 1 and FYP 2. FYP 1 is more on finding literature review of the subject and coming up with the design for the prototype while FYP 2 concerns with building, calibrating and testing the prototype.

b) Literature Review and Research

Research is done on the proposed project title. Information is gained from literature review done on past experiments and projects, journal papers, internet and books. An understanding on the topics in the research must be established at the end of this activity. Problem statement, objectives and project scope is determined here.

c) Prototype Design Process

The design of the prototype will be constructed and finalised in this activity. The design processes that will follow are:

- A. Choosing the sensor, microcontroller and technology to develop the wireless network
- B. Design of the prototype
- C. Architecture for the programming
- D. Wireless network topologies
- E. User interface for the prototype

d) Prototype Building work

The prototype will be built during this stage. Minor adjustments may be done on initial design to compensate for any problem surfacing. The programming will also be done in this stage.

e) Prototype Calibration

Since the prototype developed is a measuring device, it need to be calibrated so that it functions normally and able to detect the vital signals.

f) Prototype testing

The prototype will be tested on human being to ensure whether it passed the objectives set at the start of the project.

g) Wrap-Up

Preparation of paperwork for the project is conducted here.

3.3 Tools

- a) Sensor
 - i. Temperature sensor
 - ii. Pulse oximeter

- b) Board
 - i. Arduino Uno
 - ii. Input Output Shield
 - iii. ZigBee Shield

- c) ZigBee Communication
 - i. Xbee ZigBee Module
 - ii. Xbee Explorer

- d) Jumper wire
- e) USB to mini USB wire
- f) Power Supply cable
- g) Power bank

3.4 Applications

Application	Usage
X-CTU	-program developed Digi International Inc. That is used to configure the Xbee Series 2 transmitter
Arduino 1.0.3	-Java based IDE developed by Arduino team that uses C/C++ language to make writing code and uploading to the Arduino easier
Processing 1.5.1	-Java based open source programming language created by the Processing team for people who want to create images, animations, and interactions.

Table 2: Applications and usage

CHAPTER 4

RESULT AND DISCUSSION

4.1 Design of Prototype

In the study, the author has chosen a couple of basis to start off in constructing the prototype for the WBAN system. In essence, the items that are chosen correspond to the system that the author wanted to produce. Figure 6 shows the system that is being developed:

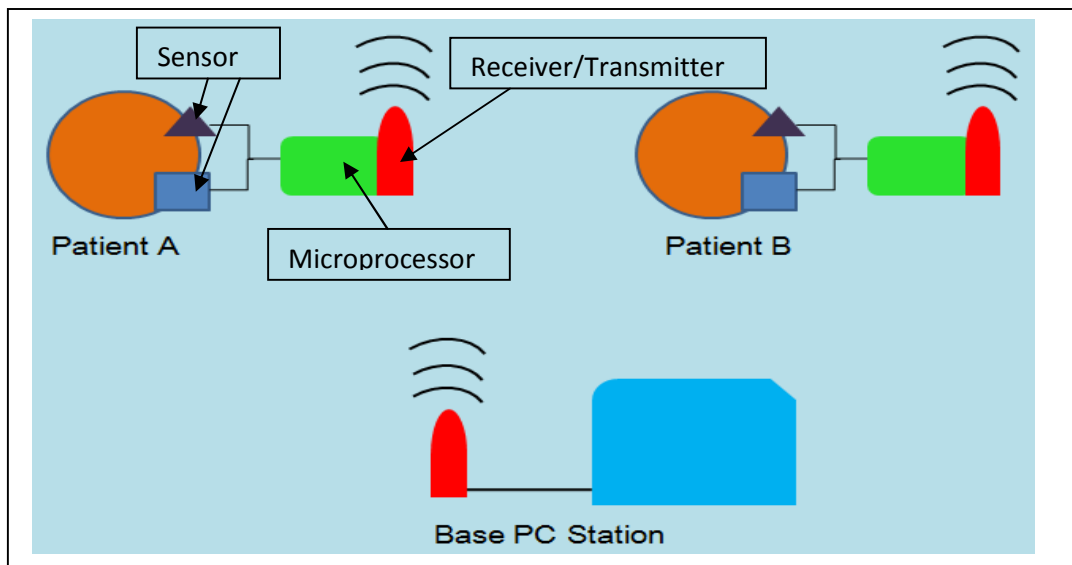


Figure 7: Wireless Health Monitoring system

The system that is being developed will be using ZigBee as the protocol for the wireless network. Basically, the system is divided into:

4.1.1 Sensors

As the system job is to measure pulse rate and temperature of the patient, the peripheral will be equipped with two sensors. For the pulse rate, the author is using the Pulse Sensor Amped which uses the principle of photoplethysmograph. The sensor is basically measuring the difference in the amount of light that penetrates the body when there is blood flow. Meanwhile, the author is using LM35, a Precision Centigrade Temperature Sensor that is produced by Texas Instrument to measure the measurement. The sensor will detect the change in temperature and produces voltage parallel to the change in temperature.



Figure 8: Pulse Sensor Amped

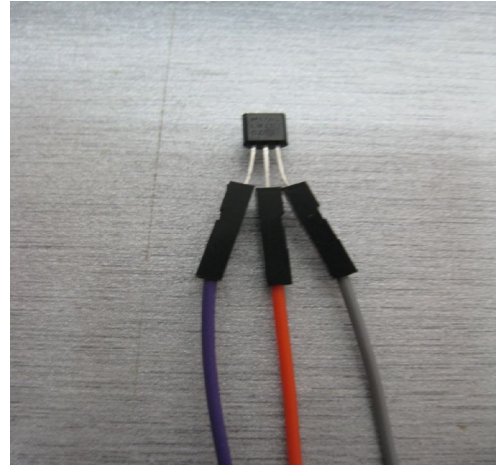


Figure 9: LM35 Centigrade Temperature Sensor

4.1.2 *Microprocessor*

Microprocessor is used to control the process of collecting the information from the sensor and preparing them to be transmitted via the transmitter. In the project, the author decided to use Arduino Uno R3 as the platform for the prototype. Arduino Uno R3 uses the microprocessor ATmega328 by ATMEL.

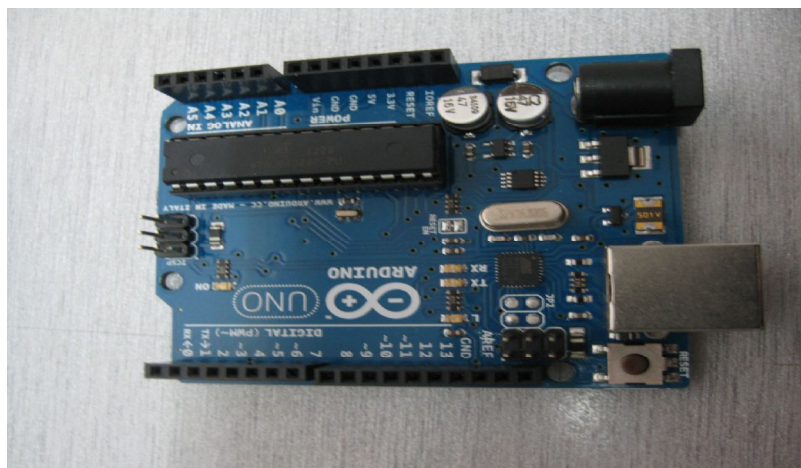


Figure 10: Arduino Uno R3

4.1.3 Transmitter and Receiver

For the study, the author has chosen to use ZigBee as the preferred protocol for the wireless transmission. The peripheral that is used to use the ZigBee protocol is Xbee Wire Antenna-Series 2 by Digi International. Xbee wire antenna is able to create ZigBee mesh framework and uses ZigBee as the protocol. Xbee can be programmed via XCTU using the SKXBEE board by Cytron.



Figure 11: Xbee Series 2



Figure 12: SKXBEE board

4.1.4 Power source

The Arduino can be powered USB cable. However since the device need to be mobile and wearable on the patient, the author decided to use POWER Battery bank to power up the prototype. The power bank output is 5V of power of up to 1A of current. Since the power bank can be recharge back, this reduces the cost to replace the battery in case of drainage as compared to the usage of 9V battery.



Figure 13: POWER Battery Bank with USB and mini USB output

4.1.5 Application

Two applications are used in the development of the prototype. The first is the Arduino 1.0.3 from the Arduino team which is the software that is used to write the code and upload in to the Arduino Uno R3 board. The Arduino 1.0.3 is also provided with serial window that is used later to check the signal coming from the temperature sensor. The next software used is the Processing 1.5.1 which is an open source programming language created by the Processing team. The software is used to process and expressed the data gain from the pulse sensor into meaningful information in form of graphic. The coding that is used is provided with the Pulse Sensor Amped.

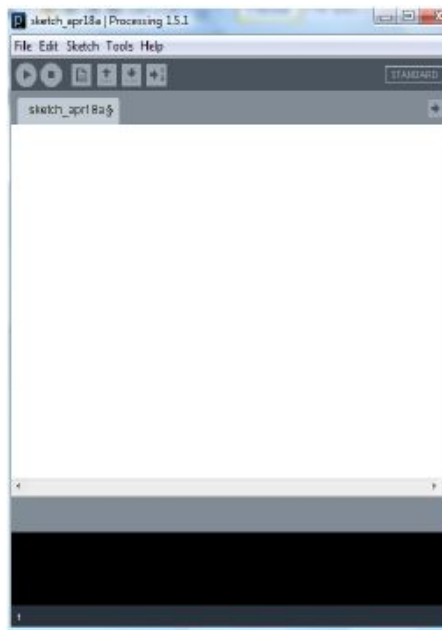


Figure 14: Processing 1.5.1 interface

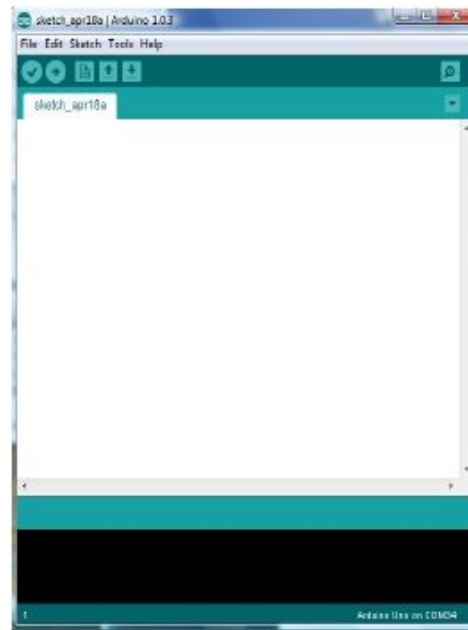


Figure 15: Arduino 1.0.3 interface

The first prototype that is made by the author is seen on Figure 16. The first prototype is just a simple assembly that the author made to test the sensors.

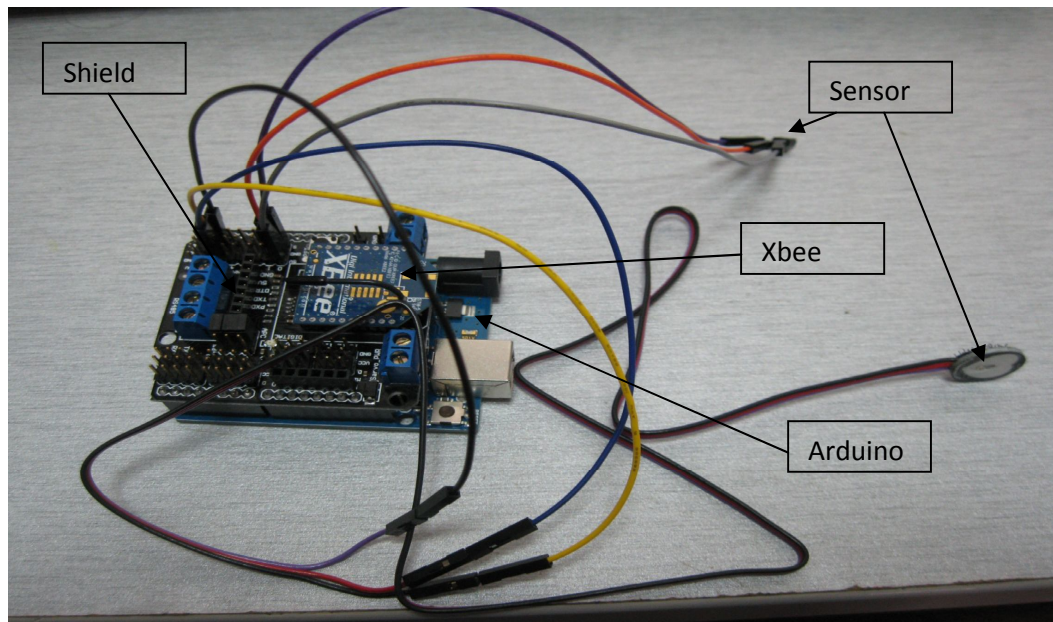


Figure 16: First prototype (without power source)

From the initial prototype, the author has done several tests to pinpoint the location of the sensors and to find the best way to place the whole system. Finally, the author decided to place the prototype onto a glove and incorporated the sensors in the inside of the glove. The final result can be observed from Figure 17.

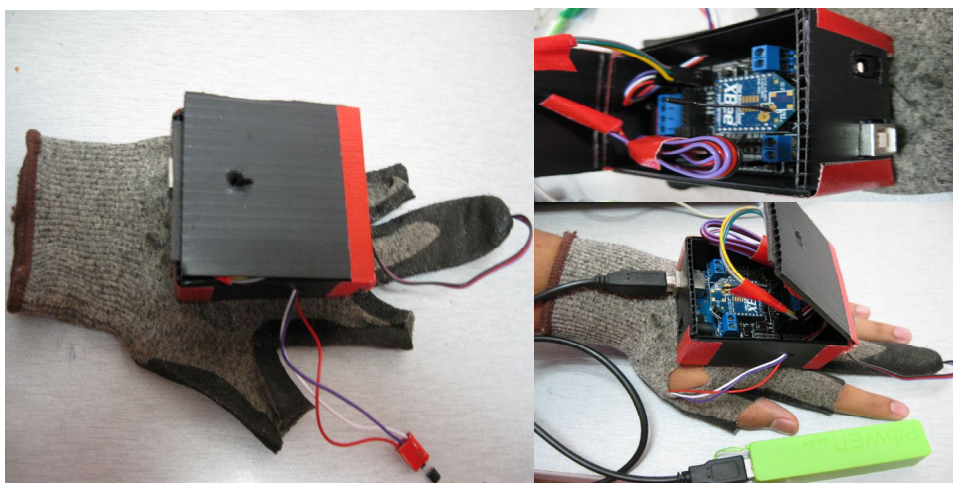


Figure 17: Final Prototype

4.2 Result

After assembling the prototype, the author had done several tests that are aimed at testing the capability of the device to satisfy the objectives that had been set. From the tests, tuning is made on the physical hardware of the prototype and coding of the Arduino as to improve the precision and accuracy of the sensors. Among the tests that are already done and their results are:

4.2.1 Initial Testing

As the prototype had just been made, the author had tested on himself the device minus the wireless part. The aim of this initial test is just to determine whether the heart beat sensor is working and taking measurements. In this test, the author is using the Processing software with the coding provided by the manufacturer of heart beat sensor. In this test, the sensor is placed at the index finger. Figure 18 shows the result for the pulse sensor:

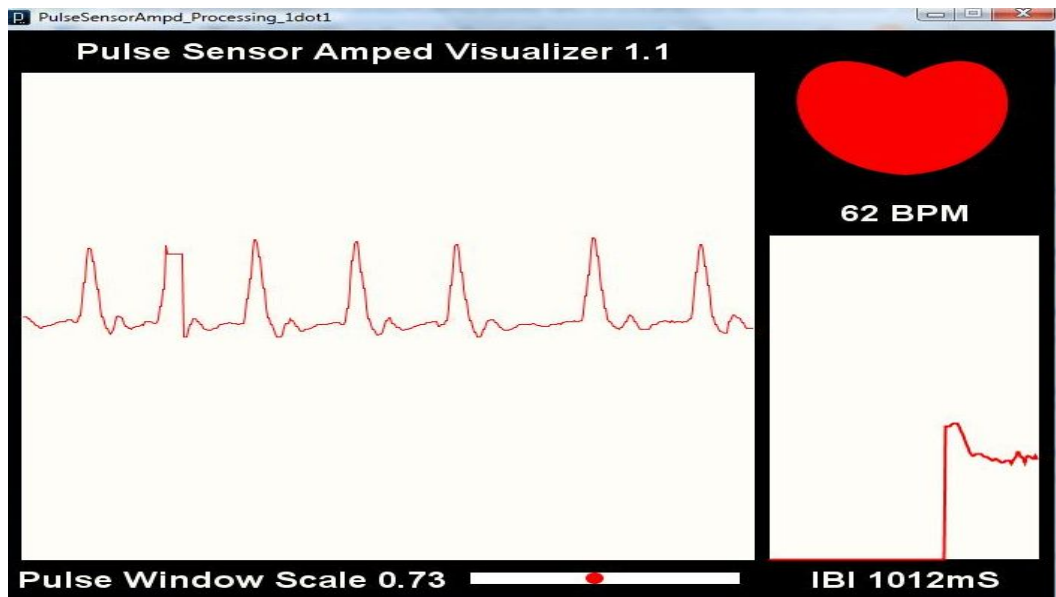


Figure 18: Result from pulse sensor

Using the pulse sensor, the author is able to detect his heartbeat at constant rate of 62 beats per minute (BPM). This shows that the heart beat sensor is working as per the manufacturer's claim. Hence it is concluded that the heart beat sensor is in good condition and ready to be used in the prototype. However, one of the problems that the author noticed is that the pulse sensor is sensitive to disturbance caused by moving of the body parts where the sensor is placed. Irregular movement will cause

the measurement to not be constant hence not producing good results. Since the initial test is only aimed at testing the working of the heart beat sensor, no adjustment is made. The problem is rectified during other tests.

Next, the author tested the temperature sensor, LM35 that is received. Since there is no coding provided by the manufacturer, the data received from the sensor is observed from the serial monitor. The sensor is placed freely to capture the temperature of the body. Figure 19 shows the result of the temperature sensor:

```
Temperature: 36.26C 97.27F
Temperature: 35.77C 96.39F
Temperature: 36.26C 97.27F
Temperature: 35.77C 96.39F
Temperature: 35.77C 96.39F
Temperature: 35.77C 96.39F
Temperature: 35.77C 96.39F
Temperature: 35.77C 96.39F
Temperature: 35.28C 95.50F
Temperature: 35.77C 96.39F
Temperature: 35.77C 96.39F
Temperature: 35.77C 96.39F
Temperature: 35.28C 95.50F
Temperature: 35.28C 95.50F
Temperature: 34.79C 94.62F
Temperature: 34.30C 93.74F
Temperature: 34.30C 93.74F
Temperature: 34.30C 93.74F
Temperature: 33.81C 92.86F
```

Figure 19: Result from temperature sensor

Using the temperature sensor, the author is able to detect the temperature of the body at constant temperature of 36.26°C. This gives assurance that the temperature sensor is in good condition and working to its specification. Besides that, the author also placed the temperature sensor on different part of the body. However, the temperature sensor will give different temperature for different body parts. This may be due to different part of body having different composition of blood capillaries that is bringing heat around the body. This observation is used in planning of further test on the sensor. Other than that, usage of temperature sensor is quite routine and not so much problem arises.

4.2.2 Test on Heart Rate Sensor- Pulse Sensor Amped

One of the main objectives of the project is to produce a prototype that is able to monitor heart rate and temperature of the body with precision and accuracy. Hence, among the characteristics of the reading that the author wanted is for it to be constant, with only gradual increase and decrease without apparent inconsistencies in reading. Thus in achieving this, the author had done series of test, starting with the heart rate sensor.

While playing with the heart beat sensor, one of the observation that the author had made is that different placement of the sensor produces different set of consistencies. Hence to find the best place to place the heart rate sensor, the author had taken the reading of heart rate from 5 fingers on the left arm. Left arm is chosen as it is closer to the heart as compared to the right, hence producing clearer result. Measurements are taken using the heart beat sensor for 60 seconds from the left hand for the index, middle, ring and little fingers. The aim of this test is to find the placement that produces the least amount of variation between readings taken. Figure 20 is the graph of pulse rate against reading number of every finger:

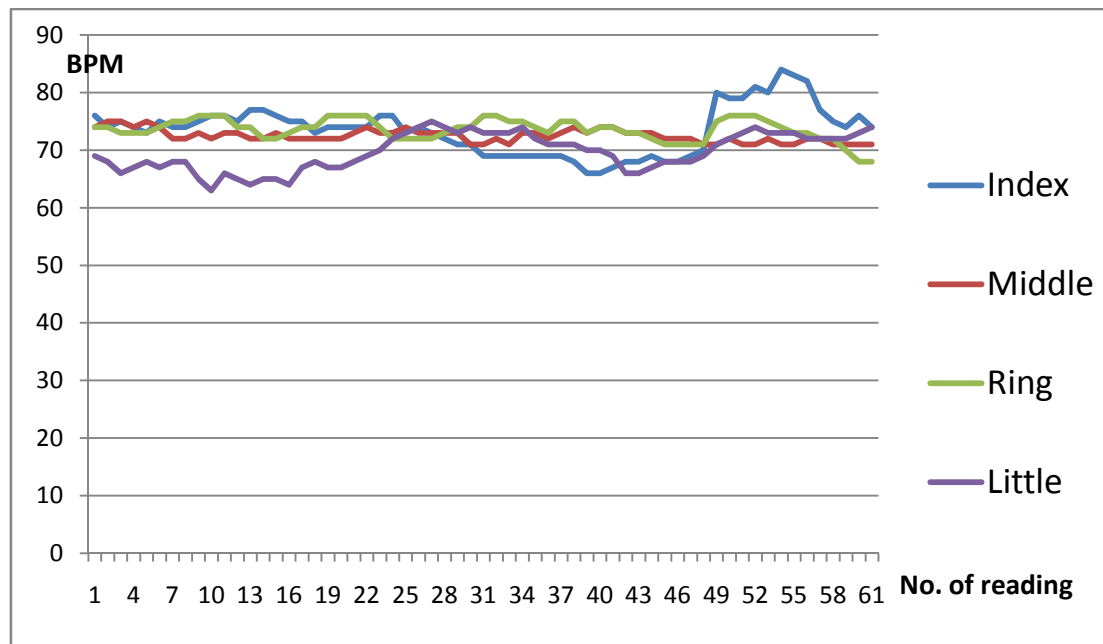


Figure 20: Graph of pulse rate against number of reading according to finger

From the table, the author observed that reading from the middle finger produces the least variation between other placements. The reading from the middle finger is also exempted from reading overshoots that is apparent from the reading taken from index finger. In graph form, it is apparent that reading from the middle finger produces a smooth line as compared to other fingers. Another candidate that produces a smooth line is the index finger, however nearing to the end of data reading, a high jump can be detected from the graph. To clarify the observation, the author did a standard deviation calculation to find out whether the readings are close to each other or not. Table 3 shows the result of the analysis.

Table 3: Standard deviation between fingers

	Index	Middle	Ring	Little
STDEV	4.26	1.12	1.90	3.21

From the analysis, it is apparent that middle finger has the lowest standard deviation, signalling a set of data that is precise. The reason may be due to the area of contact of middle finger with sensor which is the biggest among the fingers. This helped in maintaining a constant read from the sensor in event of the hand moving. The large area helps the sensor to pick up the contraction of the blood vessel better compare to smaller are. Thus, middle finger is chosen as the placement for the Pulse Sensor Amped.

Next, the author decided to test the accuracy of the heart beat sensor. The aim of the test is whether the heart beat sensor is producing good BPM reading from the body. To achieve this, the author decided to compare mean the reading from the prototype with Omron Heart Rate Monitor. Reading from the prototype will be assumed as the experimental value and the reading from the heart beat detector product will be the real value. From both of the reading, the amount of percentage error will be calculated using the formulae:

$$\% \text{ Error} = \left| \frac{\text{Theoretical Value} - \text{Experimental Value}}{\text{Theoretical Value}} \right| \times 100$$

Theoretical Value = Actual ... Known ... True Value

Figure 21: Percentage error formulae

The test is for 60 seconds with interval of 1 second per reading. At the same time, reading of pulse rate is taken from Omron Heart Rate Monitor. Both of the reading is then tabulated and compared. Figure 22 shows the result of the test while Table 4 shows the statistical analysis of the result. Meanwhile, Figure 23 shows the calculation of percentage error from the mean value.

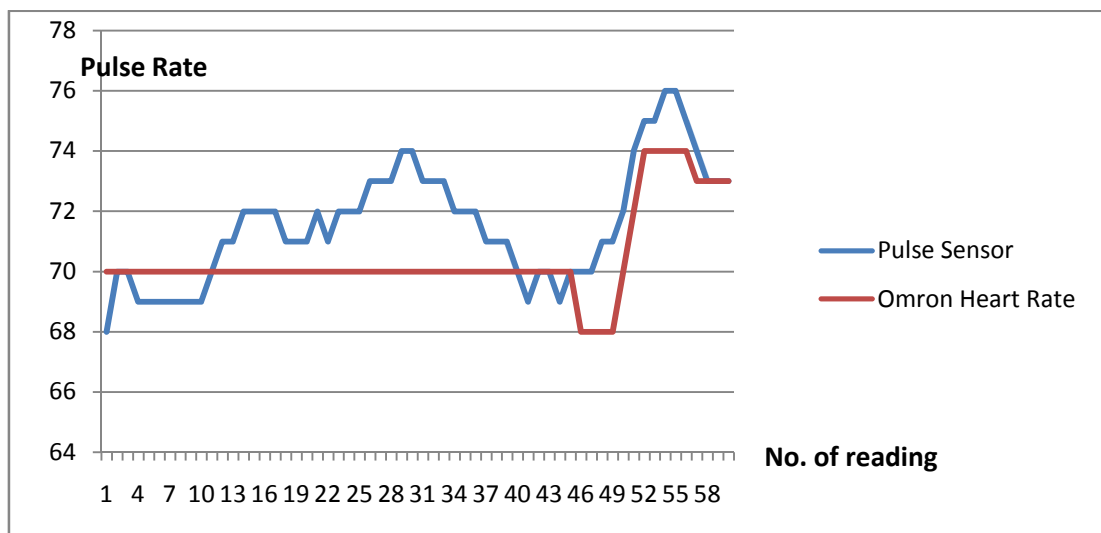


Figure 22: Graph of Pulse Rate against number of reading

Table 4: Statistical analysis between pulse sensor and Omron Heart Rate Monitor

	Pulse Sensor	Omron Heart Rate
Median	71.5	70
Mean	71.57	70.43
STDEV	1.92	1.45

$$\begin{aligned}
 \text{Percentage error} &= \frac{[\text{experimental} - \text{real}]}{\text{real}} \times 100\% \\
 \text{Percentage error} &= \frac{[71.57 - 70.43]}{70.43} \times 100\% \\
 \text{Percentage error} &= 1.61\%
 \end{aligned}$$

Figure 23: Calculation of percentage error of mean value

From the table and the graph, the author observed that the Pulse Sensor Amped fares fairly well as compared to the Omron Heart Rate Monitor. From the statistical analysis, the standard deviation of Pulse Sensor Amped is at 1.92 which is almost close to the 1.45 obtained by the Omron Heart Rate Monitor. This signifies that the data set produced from the sensor does not differ much and is precise. Besides that, taking the data from the Omron Heart Rate Monitor as the real value, the author calculated that the percentage error of the mean value is quite low at 1.61%. This shows that the value detected by Pulse Sensor Amped does not stray far away from the real value. This shows that the data set produce by the Pulse Sensor Amped is accurate as compared to Omron Heart Rate Monitor.

Overall, the author is satisfied with the performance of Pulse Sensor Amped. In comparison to an established heart rate monitor, the data set from the Pulse Sensor Amped is accurate and precise.

4.2.3 Test on the Temperature Sensor – LM35 Centigrade Temperature Sensor

Next, the author also did several tests on the LM35 temperature sensor. Since the temperature sensor is basically as simple voltage divider sensor, it is less hassle to code as compared to the heart beat sensor. However, the temperature sensor still need to be tested on the precision and accuracy so that result produced is good and most importantly will not give foul results that may jeopardizes the health of patient that will be using this prototype later.

First, the author had tested the whether the temperature sensor is able to detect two different ranges of temperature. This is to determine whether the temperature sensor is able to take large range of reading. To test this, the author has simply conducted a simple experiment by dipping the sensor into a glass of boiling water and placing the sensor onto an ice. Since water have a fixed boiling point of 100°C and freezing point of 0°C, it is easy to determine whether the sensor is able to detect between two extremities. Table 5 shows the result of the experiment:

Table 5: Temperature sensor reading when placed at two materials

Material	Sensor Reading/°C	Condition
Ice	0	PASS
Boiling water	100	PASS

From the experiment, it is found out that LM35 temperature sensor is capable to take different ranges of reading. It is able to take accurately the reading of ice and boiling water. From the experiment, the author also observed that the sensor reading change drastically when it is moved from ice to boiling water. The fast response time makes the sensor suitable to be used to detect changes in human body temperature. Thus, the author concluded that the temperature sensor is suitable for usage.

Next, as the heart beat sensor, the author also wanted to place the sensor where it gives the most precise reading. Hence, the author devised a test whereby temperature measurement is taken from different part of the arm. As the author wanted to make a mobile prototype that can be placed on the arm, the placement of the sensor is restricted to the areas around the arm. The area that is chosen is the area between thumb and index finger, back of hand, and palm. For the temperature reading, the coding is set so that readings are taken every 5 seconds as compared to every 1 second in the heart beat sensor test. Same as the heart beat sensor test for precision, the time taken is 60 seconds. The temperature reading receive are tabulated in Table 6 and the standard deviation of data is shown in Table 8. Meanwhile, the graph of temperature against number of reading is shown in Figure 24.

Table 6: Temperature sensor reading when placed at different area of arm

Thumb and index/°C	Palm/°C	Backhand/°C
33	34	34
33	34	34
33	34	33
33	34	33
33	34	33
33	34	33
33	33	34
33	34	34
33	34	34
33	34	34
33	34	33
33	34	34

Table 7: Standard Deviation for different parts of hand

	Thumb and Index	Palm	Backhand
STDEV	0.00	0.29	0.51

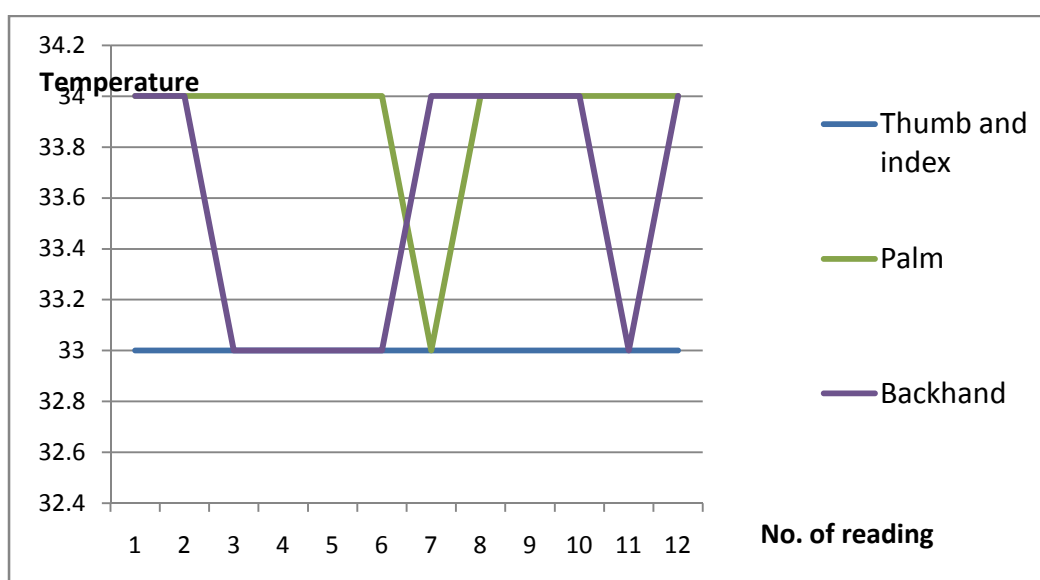


Figure 24: Graph of temperature for different area of arm against number of reading

From the graph, the author observed that different placement will produce different range of temperature. This is due to that as blood travels from the heart, it loses heat to the surrounding body part. That is why the armpit produces a higher range of temperature as compared to backhand which is father from the heart. Next, among the areas, palm and between the thumb and index finger have the least value of standard deviation which is at 0.29 and 0 respectively. Thus, the reading at these two places is more precise as compare to others. However, for the area between thumb and index finger, it is a hassle for the user to keep on squeezing the sensor at this area. Thus, this makes palm the better candidate for the placement of the temperature sensor. Besides, the placement of the sensor at the palm area also corresponds to the design plan of the author to devise a prototype that can be equipped at hand.

Third, the author also needs to test the accuracy of the reading that is produced by the temperature sensor. As a standard, Mastech Industrial Infrared Thermometer is used to obtain the actual result. To determine accuracy, percentage error calculation is performed. The mean value obtained from the data set of LM35 is assumed as the experimental result while the reading from the thermometer as the actual result. From the decision of previous test, the temperature sensor and thermometer is placed at the palm. The reading is taken for every 5 seconds in a period of 60 seconds. Figure 25 shows the result obtained from the experiment while Table 8 shows the statistical analysis done from the data set. Figure 26 then will show the percentage error calculation.

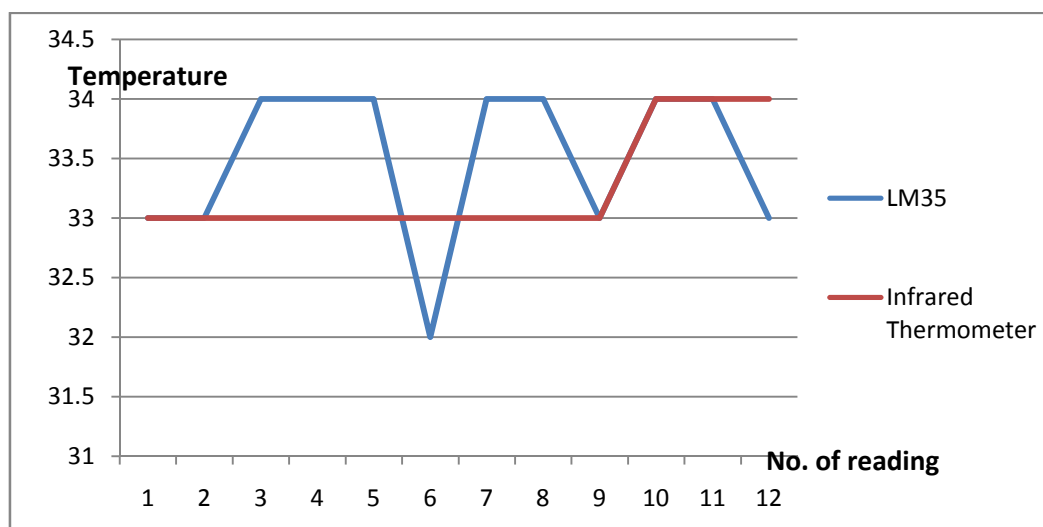


Figure 25: Graph of Temperature against number of reading

Table 8: Statistical analysis between LM35 and Mastech Infrared Thermometer

	LM35	Infrared Thermometer
Mean	33.50	33.25
Median	34.00	33.00
STDEV	0.67	0.45

$$\begin{aligned}
 \text{Percentage error} &= \frac{[\text{experimental} - \text{real}]}{\text{real}} \times 100\% \\
 \text{Percentage error} &= \frac{[33.50 - 33.25]}{33.25} \times 100\% \\
 \text{Percentage error} &= 0.75\%
 \end{aligned}$$

Figure 26: Percentage Error calculation

From the graph, the author observed there are not that much difference between readings obtained by the LM35 and Mastech Infrared Thermometer. From the statistical analysis, the standard deviation of LM35 is at 0.67 which is almost close to the 0.45 obtained by the Mastech Infrared Thermometer. This signifies that the data set produced from the sensor does not differ much and is precise. Besides that, taking the data from the Omron Heart Rate Monitor as the real value, the author calculated that the percentage error of the mean value is quite low at 0.75%. This shows that the value detected by LM35 does not stray far away from the real value. This shows that the data set produce by the LM35 is accurate as compared to Mastech Infrared Thermometer.

4.2.4 Testing of full prototype with the usage of Xbee transmitter

During the testing for the LM35 temperature sensor and Pulse Sensor Amped heart beat sensor precision and accuracy test, both of the equipment is tested separately and without the usage of the Xbee transmitter. Thus, the next step is to test whether the complete prototype is up to the task to achieve the objective that is set.

The first test is done by using the strap that is provided by the heart beat sensor manufacturer. The temperature sensor is taped onto the palm of the hand to avoid the sensor from losing contact with the palm. The Zigbee system is set at baud rate of 9600 as the baud rate for the Arduino. The coding on the Arduino is by the mix of the heart beat sensor code and also the temperature sensor code. The reading is taken for 60 seconds with the temperature sensor updating the data every 5 seconds while the heart rate every 1 second. Figure 27 shows the graph of pulse rate against number of recording.

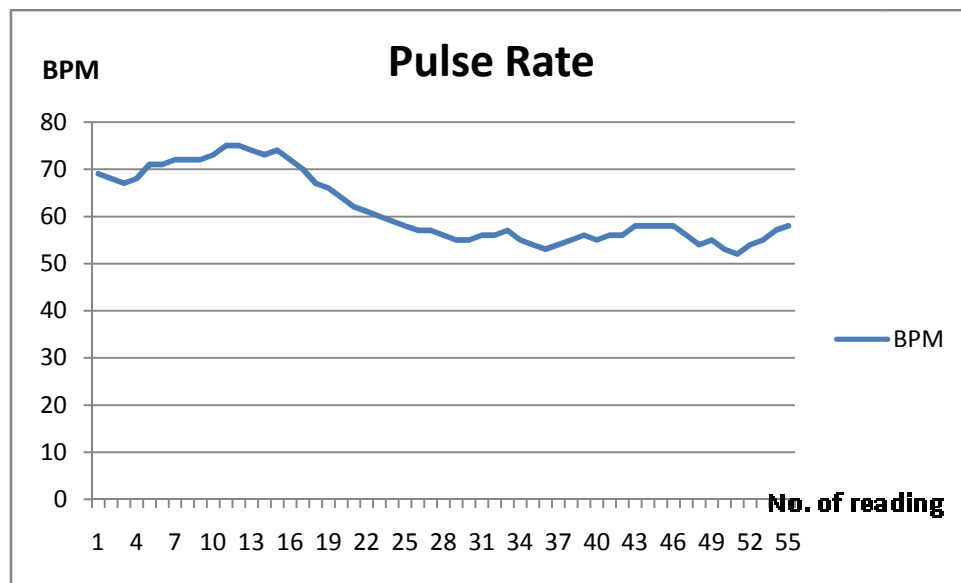


Figure 27: Graph of Pulse Rate against number of reading

Since this is the first test by using the Xbee transmitter, it is apparent that the coding is not suitable to be used just as it is. One of the main data, which is the data from the temperature sensor has not even appear on the serial terminal. This is due to the coding of the temperature sensor part that stopped as the delay function is activated. This is one of the main hurdles that the author has to overcome at the start of the project. Next, it is to be observed that for 60 seconds, 60 recording of the BPM will appear on the serial screen. However, only 55 of them appear. For the same reason, this may be due to the coding and the delay function that is used in the Arduino. The first test is considered a failure since no data from temperature sensor is recorded. But, the test provides the author valuable detail that need to be fine tune from the coding.

Next, the author had altered the source code for the second test. Among the initiatives that the author had done is to include TimerMaster library into the coding. This library will enable the author to determine when a function will be called to proceed. In test 2, instead of using the delay function, the author had programmed the Arduino to keep on updating the data from the heart beat sensor while the timer will call upon the function for the temperature sensor to activate at every 5 seconds. Another change that is done on the coding is to change the temperature sensor pin from pin 1 which is directly besides the pin for heart beat sensor which is at 0 to pin 3. This is to prevent and reduce any disturbance between the two sensors.

In terms of hardware, for the second test, the author had placed the heart beat sensor and temperature sensor into a glove. The glove acts as a buffer that prevents any outside disturbances from interrupting the sensor. It is also vital in maintaining the position of the sensor on the target area. Figure 28 shows the graph of BPM while Figure 27 shows the graph of temperature against number of recording and Table 7 is the statistical analysis from the set of data.

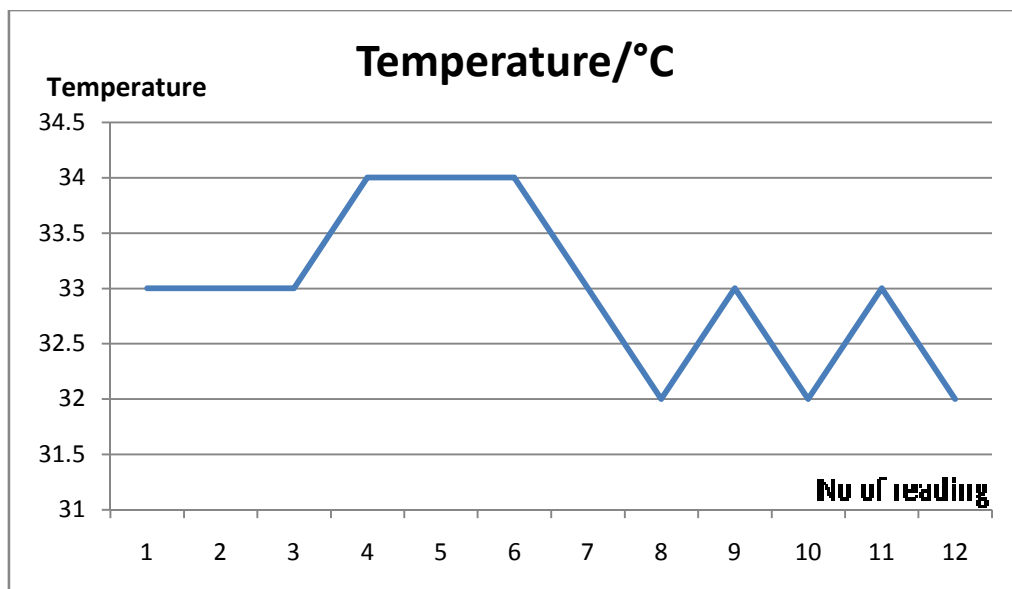


Figure 28: Graph of Temperature against number of reading

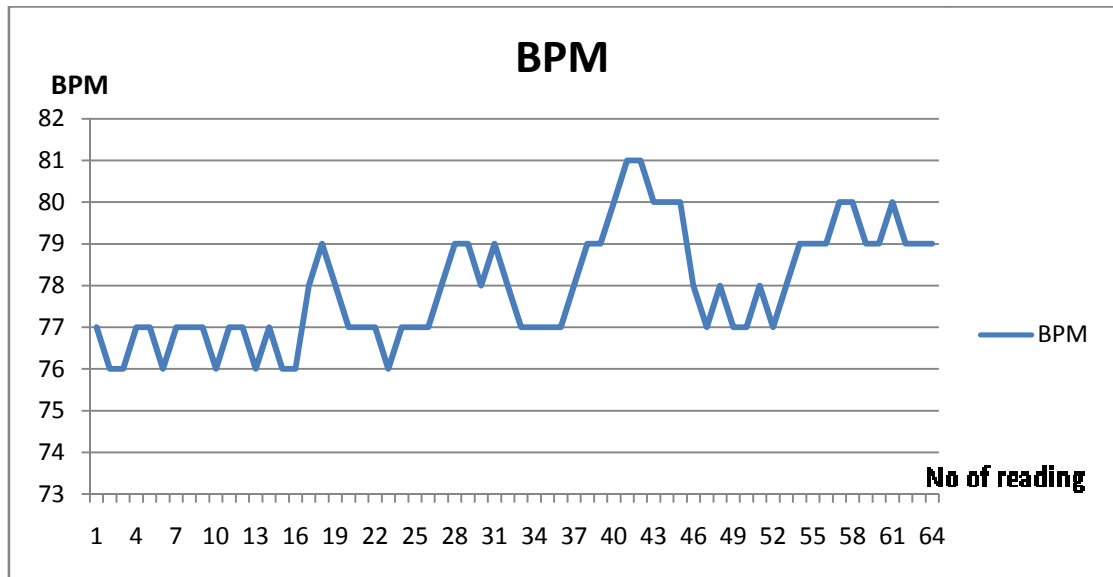


Figure 29: Graph of BPM against number of reading

	Pulse Rate	Temperature
Mean	77.92	33.00
Median	78.00	33.00
STDEV	1.35	0.74

Table 9: Statistical analysis between Pulse Sensor and Temperature

Firstly, by altering the coding, the author is now able to get the desired temperature and also heart beat reading from the sensor. Usage of TimerMaster library prove useful as it helps the coding to be more systematic in the workings. The inclusion of the sensor into the glove also prove a success as the graph that is produced, both for the temperature and heart beat reading is much better than test 1. For both of the pulse rate and temperature, the standard deviation that is achieved respectively is 1.35 and 0.74. This shows improvement as the standard deviation decreases from the result during the test for precision that is 1.92 for pulse sensor and 0.74 for temperature sensor. With the inclusion of the glove, the result produce is much more precise.

However, from the graph, there is still the problem of not accurate timing for the reading as for now for 60 seconds, 63 reading is recorded. Besides that, although the standard deviation is reduced, the reading is still not stable as observed

from the graph. This may be due to movement of hands that give false beat as the photo sensor detects the changes in volume of tissue. But, the result that is received still satisfies the author as the prototype now is able to get quite accurate and precise result as apparent from the test.

4.2.5 Interface Testing

Besides establishing a wireless system that is able to transmit the data from the sensor to the host PC, the study objective is also to develop an interface that is able to display the data received and provide alarm when the data that is received is not in the acceptable range of data. To achieve this, the author had use the programme Processing V1.5.1 to develop the needed interface. The programme that is produced is tasked to: a) read data that is transmitted to the serial port, b) differentiate between temperature data and pulse rate data, c) display the data for temperature and pulse rate, d) checks for data that is not in range, and d) provide alarm when data is not in range. The flow chart of the interface developed can be observed in the appendix.

The interface is design to be able to display the information that is transferred wirelessly and also to warn the user on abnormal reading that is detected on the patient's temperature and pulse rate. For the pulse rate, the range is fixed at 60bpm for the low range and 100bpm for the high range. 60-100bpm is considered as the normal pulse rate for a human and a value outside of this range is considered abnormal. Meanwhile for temperature, the a average human body temperature is 37°C and the range is fixed at 33°C to 39°C. For a human, 40°C is already considered high and indicates fever is developing inside the patient's body. Thus, a body temperature outside of this range is considered abnormal.

Figure 30 shows the interface that is developed. The interface is divided into four sections, which are: a) display for pulse rate (red box), b) display for temperature (yellow box), c) display for alarm (blue box) and d) the patient's name (white).

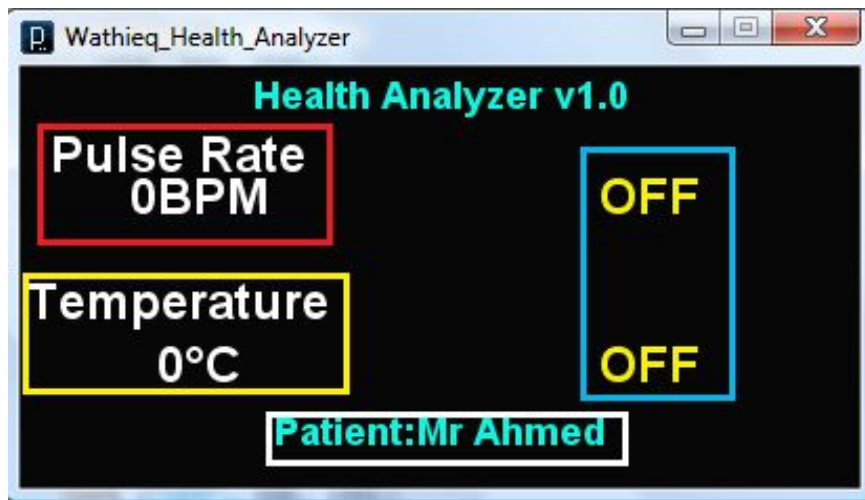


Figure 30: Interface for Healthcare Monitoring System

Next, tests are done on the interface to ensure that the interface is able to do the job that is assigned. The first test that is done is to ensure that the data that is display is correct according to the category. For this test, the data that is displayed on the interface is compared with the data that is on the serial port. The data from the serial port is read using the programme CoolTerm which act as a serial monitor to the port. The port that is used is Port 35 which is connected to the ZigBee receiver via USB.

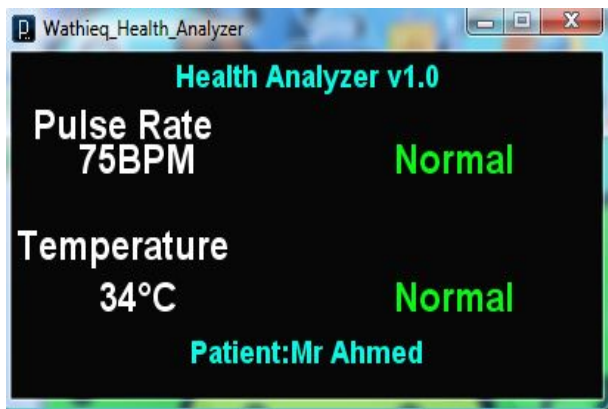


Figure 31: Reading on interface

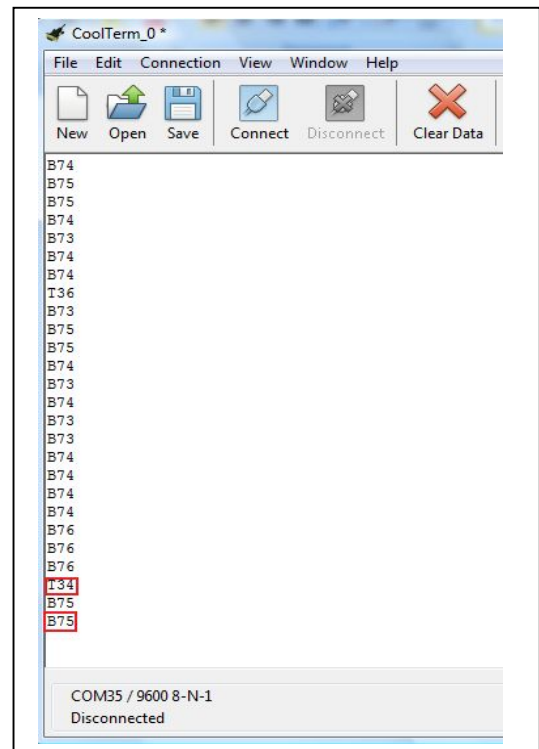


Figure 32: Reading on serial port

From Figure 31, it can be observed that the interface is doing its job. The interface is displaying the data that is sent by the transmitter to the receiver. Figure 32 shows the reading that is on the serial port and by comparison we can see that the interface is showing the exact value on the serial port. Besides that, the interface is also able to distinguish between data for pulse rate and temperature of the patient. This is achieved by assigning specific initial on the start of the data to differentiate the two data.

Next, the author also decided to test on the alarm system that is incorporated. To iterate, the alarm will be triggered when the value that is received is not in the range of accepted values. The alarm that is triggered will be shown as text “Alarm High” or “Alarm Low” accompanied by warning sounds specific to each alarm. For the test, the author set the accepted pulse range at 75-80bpm and temperature at 33-35bpm. The range that is set on this test is only for experimental purposes only and does not reflect the true range that is set.

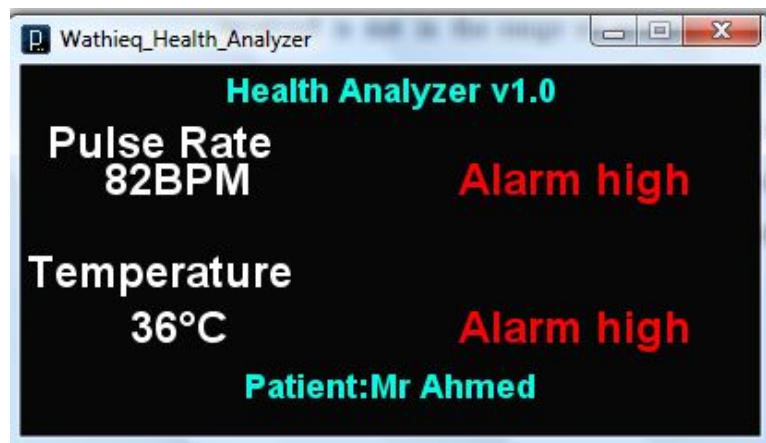


Figure 33: Alarm High

Figure 33 shows the result of the test on the interface. As the pulse rate hits 85bpm, Alarm High will be displayed on the alarm column. This is due to the range that is set only up to 80bpm and a value higher than that will trigger Alarm High. For the temperature, the upper value is set until 35°C and as the data received is 36°C, Alarm High will appear. However, the author is unable to produce the desired warning sound that is incorporated into the programme. This may be due to unknown file location that is not specified on the programme of the audio file.

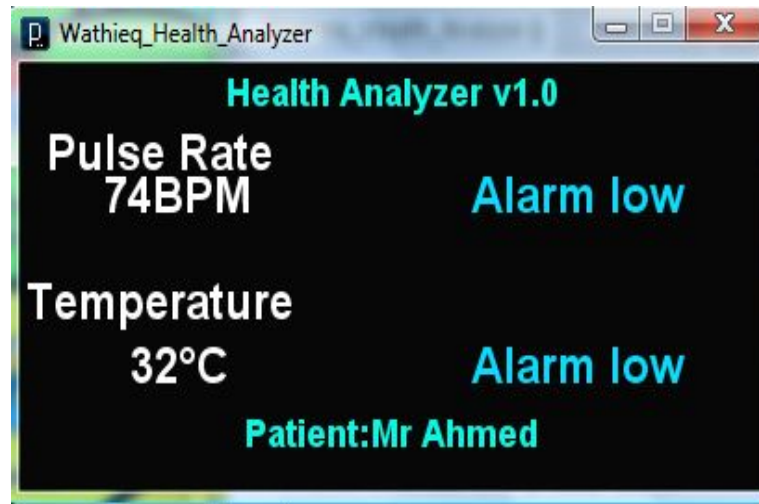


Figure 34: Alarm Low

Meanwhile, Figure 34 shows the alarm low being activated. Just like for Alarm High, Alarm Low is triggered when the data received is not in the range set and at the lower range. Still the same problem persists whereby the audio file that is supposed to play did not play. Same as the “Alarm High”, the cause is maybe due to unknown file location that is not specified on the programme of the audio file.

Overall, the tests that are done to the prototype are aimed to ensure that the prototype is able to fulfil the objectives that are set to it during at the start of the study. As of now, the prototype is now able to wirelessly detect and transmit pulse rate and temperature of a human body with accepted accuracy and precision. Besides that, the author is also able to design the interface system that functions to display the data, detect abnormal reading and give alarm in case of abnormal reading. As a conclusion, the author considered that the prototype pass the test that are done to it and able to satisfy the objectives.

CHAPTER 5

CONCLUSION AND RECOMMENDATION

5.1 Conclusion

A new system of healthcare monitoring system need to be introduced to overcome the limitation of current system that cannot give real time update on the patient's condition. The healthcare monitoring system that is designed must be able to update the patient's vital sign in real time without the constraint of distance and have the ability to give warning in case of abnormal changes in the vital signs. The study that is done aimed at producing a prototype with these abilities.

With grace from God, Alhamdulillah, the author is able to finish the project. A prototype that is able to detect and wirelessly transmit pulse rate and temperature of a human body to a host PC has been built. Besides that, the author had also designed an interface that can display the transmitted data while preparing to give out alarm in case of abnormal readings. As an added bonus, the prototype that is developed had been tested extensively and produced results that show that the prototype is able to give accurate and precise data. Overall, the prototype that is developed is able to satisfy the objectives that the author had set at the start of the study.

However, the prototype that is developed is not without fault. First of all, the pulse sensor that is used is still too sensitive that large movement from the arm will cause the reading to jump. This is due to the sensor detecting a large amount of blood that rushes to the tissues and regarded that as pulses. Secondly, the author does feel that the prototype developed is uncomfortable to be used for a long time. The weight of the prototype is apparent and the glove inhibits the movement of user. Finally, the current wireless system the author used is only a single hop interaction between the XBee transmitter and receiver. To fully utilize the ZigBee technology, the system that is built should be able to support multiple hops and multiple input interaction. These are among the issues that the author feels need to be addressed before the system is able to replace the current healthcare monitoring system.

In conclusion, the prototype developed is a success. The healthcare monitoring system is able to gather data and transmit them to a host pc wirelessly at real time without the constraint of distance. However, the author feels that the system still does not qualify to replace the conventional healthcare monitoring system as there are several issues that need to be solved before the system can be deployed. Still, the author hopes that the prototype will be able to pave the way for a wireless healthcare monitoring system to be incorporated in the health institution and ultimately saves lives of human.

5.1 Recommendations

For future works, the author would like to recommend on upgrades that can be done to the prototype, which are:

- a) to reduce the effect of movement to the reading of the sensors, particularly the pulse rate sensor
- b) to include more sensors that can detect other human vital signs such as blood glucose level, blood pressure monitor, CO₂ level in blood and respiration rate sensor
- c) to introduce the multi hop and multi input capabilities into the system
- d) to reduce the weight of the prototype and make it more comfortable for long term usage.

The upgrades are necessary so that the system can be more suitable to replace the current healthcare monitoring system.

Meanwhile, for the interface, the author proposes these functions are introduced to the system:

- a) ability to record and trend data that is received
- b) ability to change the range of normal reading
- c) ability for the PC to give instruction to the prototype

This will ensure that the user is empowered and the interface to play a more active role in the system

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APPENDICES

APPENDIX A

FYP 1 GANTT CHART

NO	DETAIL	WEEK	1	2	3	4	5	6	7	8	9	10	11	12	13	14
1	Project Initialization															
2	Literature Review and Research (Health monitoring system, Human Vital Sign, WBAN and ZigBee)															
3	Submission of Extended Proposal							X								
4	Prototype Design Process															
5	Preparation for Oral Proposal Defence															
6	Oral Proposal Defence Presentation															
7	Preparation of Interim Report															
8	Submission of Interim Draft Report														X	
9	Submission of Interim Final Report															X

APPENDIX B

FYP 2 GANTT CHART

NO	DETAIL	WEEK	1	2	3	4	5	6	7	8	9	10	11	12	13	14
1	Model Development		■	■	■	■	■									
2	Model Testing and Improvement				■	■	■	■	■	■	■	■				
3	Preparation of Progress Report							■	■	■						
4	Submission of Progress Report									X						
5	ELECTREX												X			
6	Preparation of Final Report and Technical Paper									■	■	■	■	■	■	
7	Submission of Draft Final Report														X	
8	Submission of Technical Paper														X	
9	Final Presentation															X
10	Submission of Final Report															X

APPENDIX C

CODING FOR PROTOTYPE

a) Main Coding

```
#include <Event.h>

#include <Timer.h>

// VARIABLES

int tempPin = 3;

float tempC;

int pulsePin = 0;           // Pulse Sensor purple wire connected to analog pin 0

int blinkPin = 13;         // pin to blink led at each beat

int fadePin = 5;           // pin to do fancy classy fading blink at each beat

int fadeRate = 0;         // used to fade LED on with PWM on fadePin

Timer t;

// these variables are volatile because they are used during the interrupt service routine!

volatile int BPM;          // used to hold the pulse rate

volatile int Signal;       // holds the incoming raw data

volatile int IBI = 600;    // holds the time between beats, the Inter-Beat Interval

volatile boolean Pulse = false; // true when pulse wave is high, false when it's low

volatile boolean QS = false; // becomes true when Arduino finds a beat.

void setup(){

  t.every (15000, temp);

  pinMode(blinkPin,OUTPUT); // pin that will blink to your heartbeat!

  pinMode(fadePin,OUTPUT); // pin that will fade to your heartbeat!

  Serial.begin(9600);      // we agree to talk fast!

  interruptSetup();        // sets up to read Pulse Sensor signal every 2mS

  // UN-COMMENT THE NEXT LINE IF YOU ARE POWERING The Pulse Sensor AT LOW VOLTAGE,
```

```

// AND APPLY THAT VOLTAGE TO THE A-REF PIN

//analogReference(EXTERNAL);

}

void loop(){

  t.update();

  //sendDataToProcessing('S', Signal); // send Processing the raw Pulse Sensor data

  if (QS == true){ // Quantified Self flag is true when arduino finds a heartbeat

    fadeRate = 255; // Set 'fadeRate' Variable to 255 to fade LED with pulse

    sendDataToProcessing('B',BPM); // send heart rate with a 'B' prefix

    //sendDataToProcessing('Q',IBI); // send time between beats with a 'Q' prefix

    QS = false; // reset the Quantified Self flag for next time

  }

  ledFadeToBeat();

  delay(1000); // take a break

}

void ledFadeToBeat(){

  fadeRate -= 15; // set LED fade value

  fadeRate = constrain(fadeRate,0,255); // keep LED fade value from going into negative numbers!

  analogWrite(fadePin,fadeRate); // fade LED

}

void sendDataToProcessing(char symbol, int data ){

  Serial.print(symbol); // symbol prefix tells Processing what type of data is coming

  Serial.println(data); // the data to send culminating in a carriage return

```

```
}
```

```
void temp(){  
    tempC = analogRead(tempPin);    //read the value from the sensor  
    tempC = (5.0 * tempC * 100.0)/1024.0;  
    Serial.print ("T");  
    Serial.println((byte)tempC);  
}
```

b) Interrupt

```
volatile int rate[10];            // used to hold last ten IBI values  
volatile unsigned long sampleCounter = 0;    // used to determine pulse timing  
volatile unsigned long lastBeatTime = 0;    // used to find the inter beat interval  
volatile int P = 512;            // used to find peak in pulse wave  
volatile int T = 512;            // used to find trough in pulse wave  
volatile int thresh = 512;        // used to find instant moment of heart beat  
volatile int amp = 100;           // used to hold amplitude of pulse waveform  
volatile boolean firstBeat = true;    // used to seed rate array so we startup with reasonable BPM  
volatile boolean secondBeat = true;   // used to seed rate array so we startup with reasonable BPM  
  
void interruptSetup(){  
    // Initializes Timer2 to throw an interrupt every 2mS.  
    TCCR2A = 0x02;    // DISABLE PWM ON DIGITAL PINS 3 AND 11, AND GO INTO CTC MODE  
    TCCR2B = 0x06;    // DON'T FORCE COMPARE, 256 PRESCALER  
    OCR2A = 0x7C;    // SET THE TOP OF THE COUNT TO 124 FOR 500Hz SAMPLE RATE  
    TIMSK2 = 0x02;    // ENABLE INTERRUPT ON MATCH BETWEEN TIMER2 AND OCR2A  
    sei();            // MAKE SURE GLOBAL INTERRUPTS ARE ENABLED  
}
```

```

// THIS IS THE TIMER 2 INTERRUPT SERVICE ROUTINE.

// Timer 2 makes sure that we take a reading every 2 milliseconds

ISR(TIMER2_COMPA_vect){          // triggered when Timer2 counts to 124

  cli();                        // disable interrupts while we do this

  Signal = analogRead(pulsePin); // read the Pulse Sensor

  sampleCounter += 2;           // keep track of the time in mS with this variable

  int N = sampleCounter - lastBeatTime; // monitor the time since the last beat to avoid noise

// find the peak and trough of the pulse wave

  if(Signal < thresh && N > (IBI/5)*3){ // avoid dichrotic noise by waiting 3/5 of last IBI

    if (Signal < T){            // T is the trough

      T = Signal;              // keep track of lowest point in pulse wave

    }

  }

  if(Signal > thresh && Signal > P){ // thresh condition helps avoid noise

    P = Signal;                // P is the peak

  }

  // keep track of highest point in pulse wave

// NOW IT'S TIME TO LOOK FOR THE HEART BEAT

// signal surges up in value every time there is a pulse

if (N > 250){                   // avoid high frequency noise

  if ( (Signal > thresh) && (Pulse == false) && (N > (IBI/5)*3) ){

    Pulse = true;              // set the Pulse flag when we think there is a pulse

    digitalWrite(blinkPin,HIGH); // turn on pin 13 LED

    IBI = sampleCounter - lastBeatTime; // measure time between beats in mS

    lastBeatTime = sampleCounter; // keep track of time for next pulse

    if(firstBeat){             // if it's the first time we found a beat, if firstBeat == TRUE

```

```

    firstBeat = false;          // clear firstBeat flag

    return;                    // IBI value is unreliable so discard it
}

if(secondBeat){               // if this is the second beat, if secondBeat == TRUE

    secondBeat = false;       // clear secondBeat flag

    for(int i=0; i<=9; i++){   // seed the running total to get a realistic BPM at startup
        rate[i] = IBI;
    }
}

// keep a running total of the last 10 IBI values

word runningTotal = 0;        // clear the runningTotal variable

for(int i=0; i<=8; i++){      // shift data in the rate array
    rate[i] = rate[i+1];      // and drop the oldest IBI value
    runningTotal += rate[i];  // add up the 9 oldest IBI values
}

rate[9] = IBI;                // add the latest IBI to the rate array
runningTotal += rate[9];      // add the latest IBI to runningTotal
runningTotal /= 10;          // average the last 10 IBI values
BPM = 60000/runningTotal;     // how many beats can fit into a minute? that's BPM!
QS = true;                    // set Quantified Self flag
// QS FLAG IS NOT CLEARED INSIDE THIS ISR
}
}

if (Signal < thresh && Pulse == true){ // when the values are going down, the beat is over
    digitalWrite(blinkPin,LOW);       // turn off pin 13 LED
    Pulse = false;                     // reset the Pulse flag so we can do it again
}
}

```

```

amp = P - T;           // get amplitude of the pulse wave
thresh = amp/2 + T;   // set thresh at 50% of the amplitude
P = thresh;          // reset these for next time
T = thresh;
}

if (N > 2500){        // if 2.5 seconds go by without a beat
    thresh = 512;     // set thresh default
    P = 512;         // set P default
    T = 512;         // set T default
    lastBeatTime = sampleCounter; // bring the lastBeatTime up to date
    firstBeat = true; // set these to avoid noise
    secondBeat = true; // when we get the heartbeat back
}

sei();                // enable interrupts when youre done!
} // end isr

```

APPENDIX D

CODING FOR INTERFACE

a) Main Coding

```
import ddf.minim.*;

import ddf.minim.signals.*;

import ddf.minim.analysis.*;

import ddf.minim.effects.*;

import processing.serial.*;

PFont font;

Serial port;

Minim minim;

AudioPlayer song;

AudioPlayer sound;

AudioPlayer alarm;

int BPM;    // HOLDS HEART RATE VALUE FROM ARDUINO

int T;

void setup() {

  size(400, 200); // Stage size

  frameRate(100);

  font = loadFont("Arial-BoldMT-24.vlw");

  textFont(font);

  textAlign(CENTER);

  rectMode(CENTER);

  ellipseMode(CENTER);
```

```

// GO FIND THE ARDUINO

//println(Serial.list()); // print a list of available serial ports

//choose the number between the [] that is connected to the Arduino

//port = new Serial(this, Serial.list()[0], 9600); // make sure Arduino is talking serial at this baud rate

//port.clear(); // flush buffer

//port.bufferUntil('\n'); // set buffer full flag on receipt of carriage return

minim = new Minim(this);

song = minim.loadFile("alone.mp3");
sound = minim.loadFile("lucky.mp3");
alarm = minim.loadFile("alarm.mp3");

}

void draw() {
  background(8, 7, 8);
  noStroke();
  // DRAW OUT THE PULSE WINDOW AND BPM WINDOW RECTANGLES
  textSize(24);
  fill (255, 255, 255);
  text("Pulse Rate",75,50);
  text(BPM+"BPM" , 85,70);
  text("Temperature",75,120);
  text(T + "°C", 85,150);

  if (T>35){

```



```

fill (252, 2, 6);

text ("Alarm high", 300, 150);

}

if (T==0){

fill (250, 242, 5);

text ("OFF", 300, 150);

//sound.play();

}

if ((T<20)&&(T>1)){

fill (8, 220, 255);

text ("Alarm low", 300, 150);

}

if ((T>20)&&(T<35)){

fill (8, 250, 21);

text ("Normal", 300, 150);

}

if (BPM>80){

fill (252, 2, 6);

text ("Alarm high", 300, 70);

}

if (BPM==0){

fill (250, 242, 5);

text ("OFF", 300, 70);

}

if ((BPM<60)&&(BPM>1)){

fill (8, 220, 255);

text ("Alarm low", 300, 70);

}

if ((BPM>60)&&(BPM<80)){

```

```

    fill (8, 250, 21);

    text ("Normal", 300, 70);

}

textSize(18);

fill (8, 250, 228);

text("Health Analyzer v1.0", 200, 20);

text("Patient:Mr Ahmed", 200, 180);

}

```

b) Serial Event

```

void serialEvent(Serial port){

    String inData = port.readStringUntil('\n');

    inData = trim(inData);          // cut off white space (carriage return)

    if (inData.charAt(0) == 'B'){    // leading 'B' for BPM data
        inData = inData.substring(1); // cut off the leading 'B'
        BPM = int(inData);
    }

    if (inData.charAt(0) == 'T'){    // leading 'Q' means IBI data
        inData = inData.substring(1); // cut off the leading 'Q'
        T = int(inData);             // convert the string to usable int
    }

}
}

```

APPENDIX E

FLOWCHART FOR INTERFACE

