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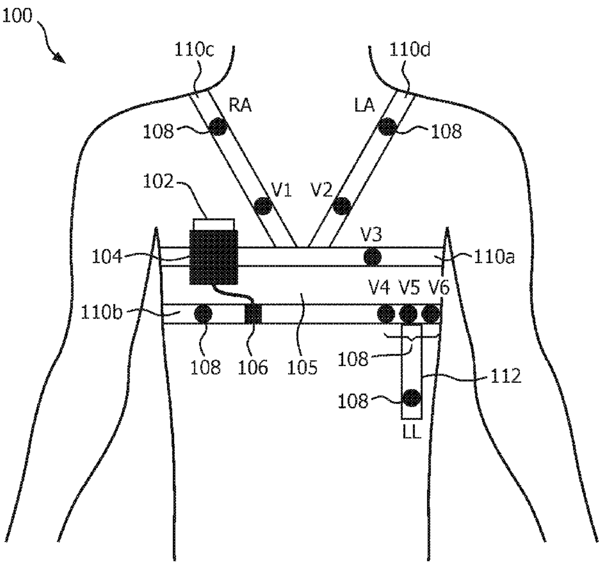

FIG. 1

(57) Abstract: A physical monitoring system for monitoring and measuring a patient's respiration is described. The system includes one or more resistiveor inductive respiration belts(110a, 10b), an electronic monitoring device (102) with a processor programmed to compute respiration and a module retainer(104)for accommodating the electronic monitoring device and securing the electronic monitoring device to the one or more resistive or inductive respiration belts. The system further includes electrocardiogram (ECG) electrodes(108) attached to or embedded in theone or more resistive or inductive respiration belts. The ECG electrodes are connected with the electronic monitoring module (102) via wires passing through the belts. The system can further include an accelerometer (204) integrated with one or more of the ECG electrodes that are attached to or embedded in theone or more resistive or inductive respiration belts.

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RESPIRATION RATE MONITORING BY MULTIPARAMETER ALGORITHM IN A DEVICE INCLUDING INTEGRATED BELT SENSOR

FIELD

The following relates generally to the medical monitoring arts. It finds particular application with a device for monitoring and calculating respiration in a user and will be described with particular reference thereto. However, the present disclosure will find applications in other areas as well.

BACKGROUND

Accurate and reliable patient monitoring in hospitals is essential to providing necessary care to patients in medical facilities. Hospitals, nursing homes, and other medical facilities typically use systems that measure respiration rate using a single sensor or algorithm or use more inaccurate methods such as manual counting of a patient's breath. It is important to calculate up to date respiration for a patient as respiration rate may be an early sign of a decline in a patient's health. Respiration rate can be measured manually (i.e. counting visually observed breaths) or using automated devices such as belts to measure chest expansion. However, these approaches tend to be inaccurate at low respiratory rate, are bulky and inconvenient to use, and may be affected by patient motion.

Another known approach is the use of an accelerometer to measure chest motion, which advantageously has a smaller form factor than a respiratory belt. However, an accelerometer-based respiratory rate monitor can also be affected by patient motion, as well as by the precise placement of the accelerometer on the chest.

These respiratory rate monitors can also interfere with other patient monitor devices that are commonly used along with a respiratory monitor, such as electrocardiograph (ECG). Wiring for these various devices can become tangled, and generally inconveniences the patient. This has led to increased use of wireless patient monitors, but these have issues of their own, such as the possibility of cross-talk between monitoring devices, and possible wireless signal interference. The lack of physical wired connections can also make it difficult to verify that the wireless patient monitor is properly connected.

SUMMARY

The present disclosure overcomes the above mentioned shortcomings of current respiration measurement and monitoring systems.

In accordance with one aspect, a physical monitoring system is described. The system includes one or more resistive or inductive respiration belts configured to be disposed around the chest to detect chest expansion and contraction during breathing. An electronic monitoring module is operatively connected with the one or more resistive or inductive respiration belts and comprises a processor programmed to compute respiration using the one or more resistive or inductive respiration belts. A module retainer receives the electronic monitoring module and secures the electronic monitoring module to the one or more resistive or inductive respiration belts.

In accordance with another aspect, a physical monitoring system is described, comprising: one or more resistive or inductive respiration belts; electrocardiogram (ECG) electrodes attached to or embedded in the one or more resistive or inductive respiration belts; an electronic monitoring module attached to the one or more resistive or inductive respiration belts and to the ECG electrodes via wires passing through the one or more resistive or inductive respiration belts, the electronic monitoring module programmed to compute respiration using at least the one or more resistive or inductive respiration belts and to compute at least heart rate using the ECG electrodes; and a module retainer configured to receive the electronic monitoring module and to secure the electronic monitoring module to the one or more resistive or inductive respiration belts.

In accordance with another aspect, a physical monitoring system is described, comprising: a wearable frame including one or more resistive or inductive respiration belts supported by shoulder straps; electrocardiogram (ECG) electrodes attached to or embedded in the wearable frame; an electronic monitoring module configured to measure respiration rate and heart rate using sensors including at least the one or more resistive or inductive respiration belts and the ECG electrodes; and a module retainer configured to receive the electronic monitoring module and to secure the electronic monitoring module to the wearable frame.

One advantage resides in improved monitoring and calculation of a patient's respiration rate based upon additional incorporated patient data.

Another advantage resides in improved and less expensive monitoring devices.

Another advantage resides in reduced patient inconvenience when being monitored by multiple monitoring devices.

Still further advantages of the present invention will be appreciated to those of ordinary skill in the art upon reading and understand the following detailed description. It is to be appreciated that none, one, two, or more of these advantages may be achieved by a particular embodiment.

BRIEF DESCRIPTION OF THE DRAWINGS

The invention may take form in various components and arrangements of components, and in various steps and arrangement of steps. The drawings are only for purposes of illustrating the preferred embodiments and are not to be construed as limiting the invention.

FIGURE 1 illustrates an embodiment of the physical monitoring device system.

FIGURE 2 illustrates an embodiment of the accelerometers and ECG electrodes used for detecting respiration in a patient.

FIGURE 3 illustrates a block diagram indicating the various inputs and outputs for calculating a patient's respiration rate.

FIGURE 4 is illustrates an embodiment of the electronic monitoring device.

DETAILED DESCRIPTION

Disclosed herein are improved patient monitoring systems for more accurate calculation and monitoring of a patient's respiration rate while in a medical facility.

The present systems can be used in a variety of institutions such as hospitals, hospital and patient care systems, clinics, nursing homes, and the like. Accordingly, "hospital" is used in the following for simplicity of discussion, "hospital" is to be understood as including all such medical institutions.

With reference to FIGURE 1, a block diagram illustrating one embodiment of a patient physical monitoring system is shown. The physical monitoring system **100** includes one or more respiration rate monitoring belts **110a, 110b,** supporting shoulder straps **110c, 110d** assisting in supporting at least the upper monitoring belt **110a**, an electronic monitoring module **102**, and a module retainer **104** attached to the upper monitoring belt **110a** that receives and holds the monitoring module **102**. The one or more respiration belts **110a**, **110b** are flexible belts similar to respiration monitoring belts commonly used during sleep studies. The respiration belts can be a resistive belt that measures a patient's respiration by stretching. In the alternative, the respiration belt can also be an inductive belt that measures a patient's respiration by increasing or decreasing the area inside the belt that is wrapped around a patient. In both cases, the belts **110a**, **110b** are disposed around the subject's chest **105** and detect the expansion and contraction of the chest. The weight of electronic monitoring module **102** in the module retainer **104** produces force on the belt **110a**; the supporting shoulder straps **110c, 110d** help counter this force.

The monitoring system **100** advantageously integrates an electrocardiograph with the respiratory monitor. To this end, the one or more belts **110a, 110b** and the supporting shoulder straps **110c, 110d** include attached or embedded electrocardiogram (ECG) electrodes **108**, with the electrode wires running through the belts **110a**, **110b** and shoulder straps **110c**, **110d** thus forming a an ECG lead wire harness that is electrically connected with the monitoring module **102**. The electronic processor of the electronic monitoring device **102** is programmed to calculate the respiration rate of the patient based on the signals received from the respiration rate measurement belts **110a**, **110**, and is also programmed to acquire ECG traces using the ECG electrodes **108**. In one embodiment, the electronic monitoring device **102** is programmed to include all or some of the following functionality. Measurement of a high resolution ECG (500sps or better sample rate, 5uV or better resolution), measurement of a high resolution body impedance, and input for resistive or inductive respiration belt or belts. The input can be an analog input or a radio link for a radio connected belt. In addition to the ECG electrodes **108** included in the system **100**, the system can also include an accelerometer **106**. The accelerometer **106** can be integrated with the ECG lead wire harness **108** so that the wired connection of the accelerometer and ECG electrode **108** is combined to form a single harness. Alternatively, the accelerometer can be built into the monitoring module **102** – since the module retainer **104** holds the monitoring module **102** firmly against the torso **105**, it is in proper position to acquire accelerometer data indicative of chest motion. While the accelerometer **106** is shown as a discrete element in FIGURE 1 (or may be integrated with the monitoring module **102**), in some embodiments the end of one, some or all ECG lead wires contain an accelerometer sitting over the ECG electrode **108** (see FIGURE 2). Multiple accelerometers allow for determination of a better model for chest wall movement during respiration as well as a better – and simultaneous - model for body position such as lying down, sitting, standing, or walking.

The module retainer **104** is a pouch or other receptacle that holds the electronic monitoring module **102** firmly to the chest wall of the patient so that the electronic monitoring module **102** moves with the chest during breathing. The module retainer **104** also attaches to the one or more respiration belts and functions to hold the electronic monitoring module **102** while simultaneously measuring the chest expansion and contraction with breathing.

The illustrative physical monitoring system **100** provides a number of synergistic benefits. In the conventional 12-lead ECG electrode pattern, leads V1-V6 run approximately horizontally along the chest while the limb leads LA, RA, LL, RL are placed on the left arm, right arm, left leg, and right leg respectively. However, the limb leads in particular are very inconvenient for the patient, and accordingly modified lead placements are known, such as the Mason-Likar lead placement (see FIGURE 2), which move the limb leads closer to the chest, e.g. in the Mason-Likar lead placement LA and RA are moved to the shoulders while LL and RL are moved upward onto the abdomen. As seen in FIGURE 1, a close approximation to this lead layout is readily achieved in the physical monitoring system **100** by attaching or embedding the electrodes **108** for leads V1-V6 in the respiratory belts **110a, 110b**, attaching or embedding the electrodes for the left and right (modified) arm leads LA, RA into the shoulder straps **110c**, **110d**, and providing downward extending flap or flaps **112** off the lower belt **110b** to provide the left and right (modified) leg leads LL, RL. Placement of these ten electrodes **108** in their proper places is automatically achieved when the wearable frame including the one or more belts **110a**, **110b** and the shoulder straps **110c**, **110d** is placed onto the patient. If one or more accelerometers are also attached to or embedded in this wearable frame (possibly integrated with the electrodes **108** as described later with reference to FIGURE 2), then these accelerometers are also precisely placed at known locations. All electrical wiring is conveniently passed through the frame elements **110a**, **110b**, **110c**, **110d** to the electronic monitoring module **102** which is held firmly to the chest wall of the patient by the module retainer **104**, and support for the weight of this module **102** when the patient is ambulatory is provided by the shoulder straps **110c**, **110d**.

With further reference to FIGURE 2, a chest diagram **200** showing the ECG electrodes V1-V6, LA, RA, LL, RL of the Mason-Likar lead placement is shown for reference. Comparison with FIGURE 1 illustrates the matchup of the lead positions with the layout achievable with the frame elements **110a**, **110b**, **110c**, **110d** of the illustrative physical monitoring system **100.** As further indicated in FIGURE 2, an accelerometer **204** may be integrated between a disposable conductive adhesive gel ECG electrode attachment part **208** that adheres to the chest **105** and a reusable “snap-on” ECG wire terminal connector **202**. The interposed accelerometer **204** may transmit accelerometer data wirelessly to the electronic monitoring module **102**, or may be integrated **206** into the ECG electrode connector **202** with the ECG wire formed as a two-wire bundle: one wire carrying the ECG signal and the other the accelerometer data. In the wired embodiment the monitoring module **102** can identify the accelerometer placement directly since its signal is carried on a wire associated with the ECG electrode whose placement is known. In the wireless embodiment a suitable location header may be included in the wireless transmission.

The ECG of FIGURE 1 advantageously provides 12-lead ECG traces using the Mason-Likar lead placement. Accordingly, the ECG can provide advanced electrocardiographic analyses made possible by having the complete 12-lead ECG signal set. In some embodiments the electronic monitoring module **102** is programmed to provide such analyses; at a minimum, however, the ECG provides heart rate data.

With reference back to FIGURE 1 and with further reference to FIGURE 3, the processor of the electronic monitoring module **102** is optionally programmed to determine a patient’s respiration rate by combining a number of methods. The electronic monitoring module **102** receives measurement inputs from the respiration belt(s) **110a**, **110b**, the accelerometer **106**, and the ECG electrodes **108**, and measures and reports a patient’s respiration rate based upon a combination these inputs. The electronic monitoring module **102** considers the following inputs: variation in the QRS axis from an ECG electrode input due to the diaphragm moving the heart; diaphragmatic muscle noise appearing in ECG electrodes; changing torso electrical impedance measured through a small high frequency alternating current applied to and voltage through the ECG electrodes; chest wall movement measured by accelerometer; and in resistive or inductive belt that changes due to the chest expanding and contracting due to breathing. In all cases, samples from the variation of the quantity measured constitute a digital signal which represents the cyclic inspiration and expiration of breathing. FIGURE 3 shows a block diagram **300** of the inputs for respiration calculation and how the various algorithms and inputs interplay. As the belt(s) **110a**, **110b** stretch or inflate, the belt(s) **110a**, **110b** sends input information to the electronic monitoring module **102** indicating voltage change information. This information is used to determine the overall stretch of the belt either due to chest expansion or to tension **308** on the interior belt due to inflation of the belt. The electronic monitoring device **102** also receives input from the on-board accelerometer(s) **106** located in the electronic monitoring module **102** or on one of the belts **110a**, **110b**. The accelerometer measures the overall movement **310** of a patient’s chest due to chest expansion or deflation as the patient breathes. The overall change in the position of the accelerometer is sent to the electronic monitoring module **102** as a coordinate of XYZ position change and is used to calculate the three-dimensional (3D) movement of the patient’s chest. Lastly, the ECG electrodes **108** located on the one or more belts **110a**, **110b** and shoulder straps **110c**, **110d** send ECG voltage information and impedance information to the electronic monitoring module **102**. This information is used to calculate the Axis Delta change **312** and the impedance change **314**. While each individual respiration rate measurement method **308, 310, 312, 314** could be used in isolation to calculate a patient’s respiration rate, in the approach of FIGURE 3 two or more of the above described methods are combined to determine the respiration rate. Any combination of two, three, or all four of the methods **308, 310, 312, 314** may be used to produce a robust respiration signal estimate **316** by fusing the measurements. The electronic monitoring device **100** calculates a patient's respiration rate in fusion operation **318** using all available respiration parameters including the complete set or a subset of ECG derived respiration, impedance based respiration, accelerometer based respiration and chest belt respiration. One potential way to combine the respiration signals into a single representative signal is by periodic principal component analysis. The largest component would be an estimate of the true signal while the other components would be noise components.

With reference to FIGURE 4, a suitable architecture of the electronic monitoring module **102** is shown. The monitoring module **102** includes memory **402** with an embedded operating system **404**. The embedded operating system **404** receives the patient measurements from the belts, the ECG electrodes, and the accelerometer. The various inputs **406, 408, 410** are stored and used by the operating system **404**. The resulting patient respiration is calculated using at least two or more of the above inputs **406, 408, 410**. The Fusion Alg, RESP module **412** retrieves the inputs from memory and calculates the resulting respiration.

The pouch or other module retainer **104** can be variously configured. In one approach, the module retainer **104** includes a conformal sleeve into which the monitoring device slides, and an electrical connector at the bottom of the sleeve into which a mating electrical connector of the monitoring module **102** engages to make simultaneous electrical connection with the ECG, respiratory belts, and accelerometers (if they have a wired connection). The electronic monitoring module **102** preferably further includes a display **414** via which the calculated respiration rate is displayed to a user.

The invention has been described with reference to the preferred embodiments. Modifications and alterations may occur to others upon reading and understanding the preceding detailed description. It is intended that the invention be constructed as including all such modifications and alterations insofar as they come within the scope of the appended claims or the equivalents thereof.

CLAIMS:

1. A physical monitoring system comprising:

one or more resistive or inductive respiration belts (110a, 110b) configured to be disposed around a chest (105) to detect chest expansion and contraction during breathing;

an electronic monitoring module (102) operatively connected with the one or more resistive or inductive respiration belts and comprising a processor programmed to compute respiration using the one or more resistive or inductive respiration belts; and

a module retainer (104) receiving the electronic monitoring module and securing the electronic monitoring module to the one or more resistive or inductive respiration belts.

2. The physical monitoring system of claim 1 further comprising:

electrocardiogram (ECG) electrodes (108) attached to or embedded in the one or more resistive or inductive respiration belts (110a, 110b) whereby the ECG electrodes assume a desired ECG electrodes layout on a subject when the one or more resistive or inductive respiration belts are disposed around the subject, the ECG electrodes connected with the electronic monitoring module (102) via wires passing through the belts.

3. The physical monitoring system of claim 2 further comprising:

shoulder straps (110c, 110d) supporting at least one of the one or more resistive or inductive respiration belts (110a, 110b); and

modified left and right arm ECG electrodes (108) attached to or embedded in the shoulder straps.

4. The physical monitoring system of claim 3 further comprising:

downward extending straps (112) extending downward from the one or more resistive or inductive respiration belts (110a, 110b); and

modified left and right leg ECG electrodes (108) attached to or embedded in the downward extending straps;

wherein the ECG electrodes attached to or embedded in the belts comprise ECG electrodes V1-V6 such that the ECG electrodes attached to or embedded in the belts (110a, 110b), shoulder straps (110c, 110d), and downward extending straps (112) form a Mason-Likar lead placement.

5. The physical monitoring system of any one of claims 2-4 further comprising:

one or more an accelerometers (204) integrated with one or more of the ECG electrodes that are attached to or embedded in the one or more resistive or inductive respiration belts (110a, 110b).

6. The physical monitoring system of any one of claims 1-5 further comprising:

an on-board accelerometer integrated with the electronic monitoring module (102).

7. The physical monitoring system of any one of claims 1-4 further comprising:

one or more accelerometers (106) attached to or embedded in the one or more resistive or inductive respiration belts (110a, 110b) and connected with the electronic monitoring module (102) via wires passing through the belts.

8. The physical monitoring system according to any one of claims 1-7, wherein the module retainer comprises a flexible pouch.

9. The physical monitoring system according to any one of claims 1-8, further comprising:

at least one of an ECG and an accelerometer integrated with the one or more resistive or inductive respiration belts (110a, 110b);

wherein the processor of the electronic monitoring device is configured to:

determine a weighted average of a plurality of signals which represent respiratory chest expansion and contraction generated from the belts and the at least one of the ECG and the accelerometer; and

calculate a respiration rate from a fusion signal generated by principal component analysis of the plurality of signals for the weighted average.

10. The physical monitoring system according to claim 9, wherein the respiratory rate measurements include at least one of: variation in the QRS axis in the ECG due to movement in the heart; diaphragmatic muscle noise on the ECG; a change in torso electrical impedance measured through ECG electrodes; chest wall movement measured by the accelerometer; and resistive or inductive belt changes due to chest expansion.

11. The system according to any one of claims 7-8, wherein the electronic monitoring module (102) includes:

a display (414) via which the calculated respiration rate is displayed to a user.

12. A physical monitoring system comprising:

one or more resistive or inductive respiration belts (110a, 110b);

electrocardiogram (ECG) electrodes (108) attached to or embedded in the one or more resistive or inductive respiration belts;

an electronic monitoring module (102) attached to the one or more resistive or inductive respiration belts and to the ECG electrodes via wires passing through the one or more resistive or inductive respiration belts, the electronic monitoring module programmed to compute respiration using at least the one or more resistive or inductive respiration belts and to compute at least heart rate using the ECG electrodes; and

a module retainer (104) configured to receive the electronic monitoring module and to secure the electronic monitoring module to the one or more resistive or inductive respiration belts.

13. The physical monitoring system of claim 12, wherein the electronic monitoring module (104) includes an on-board accelerometer and the electronic monitoring module (102) is configured to compute a respiration rate based on the accelerometer signal.

14. The physical monitoring system according to any one of claims 12-13 wherein an ECG lead includes a disposable conductive adhesive gel ECG electrode attachment part (208) and a reusable ECG wire terminal connector (202), and the physical monitoring system further comprises:

an accelerometer (204) disposed between the disposable conductive adhesive gel ECG electrode attachment part and the reusable ECG wire terminal connector.

15. The physical monitoring system according to any one of claims 13-14, wherein the electronic monitoring module (102) is configured to:

determine a weighted average of all respiration signal estimates derived from the ECG electrodes and accelerometer;

calculate an average for all received weighted averages;

use principal component analysis to create weights for the weighted averages; and

calculate respiration rate from a cyclic respiratory signal generated by the weighted averages.

16. The physical monitoring system according to any one of claims 12-15 further comprising:

shoulder straps (110c, 110d) supporting at least one of the one or more resistive or inductive respiration belts (110a, 110b); and

ECG electrodes (108) attached to or embedded in the shoulder straps;

wherein the ECG electrodes attached to or embedded in the one or more resistive or inductive respiration belts and the ECG electrodes attached to or embedded in the shoulder straps together define a modified 12-lead ECG lead placement.

17. The physical monitoring system according to claim 16 wherein the one or more resistive or inductive respiration belts (110a, 110b) include one or more downward extending flaps (112) with ECG electrodes (108) attached to or embedded in the downward extending flaps to define LL and RL electrodes of the 12-lead ECG lead placement.

18. A physical monitoring system comprising:

a wearable frame (110a, 110b, 110c, 110d) including one or more resistive or inductive respiration belts (110a, 110b) supported by shoulder straps (110c, 110d);

electrocardiogram (ECG) electrodes (108) attached to or embedded in the wearable frame;

an electronic monitoring module (102) configured to measure respiration rate and heart rate using sensors including at least the one or more resistive or inductive respiration belts and the ECG electrodes; and

a module retainer (104) configured to receive the electronic monitoring module and to secure the electronic monitoring module to the wearable frame.

19. The physical monitoring system of claim 18 further comprising:

an accelerometer (106, 204) attached to or embedded in the wearable frame.

20. The physical monitoring system of claim 18 wherein the ECG electrodes attached to or embedded in the wearable frame form a modified 12-lead ECG lead placement.

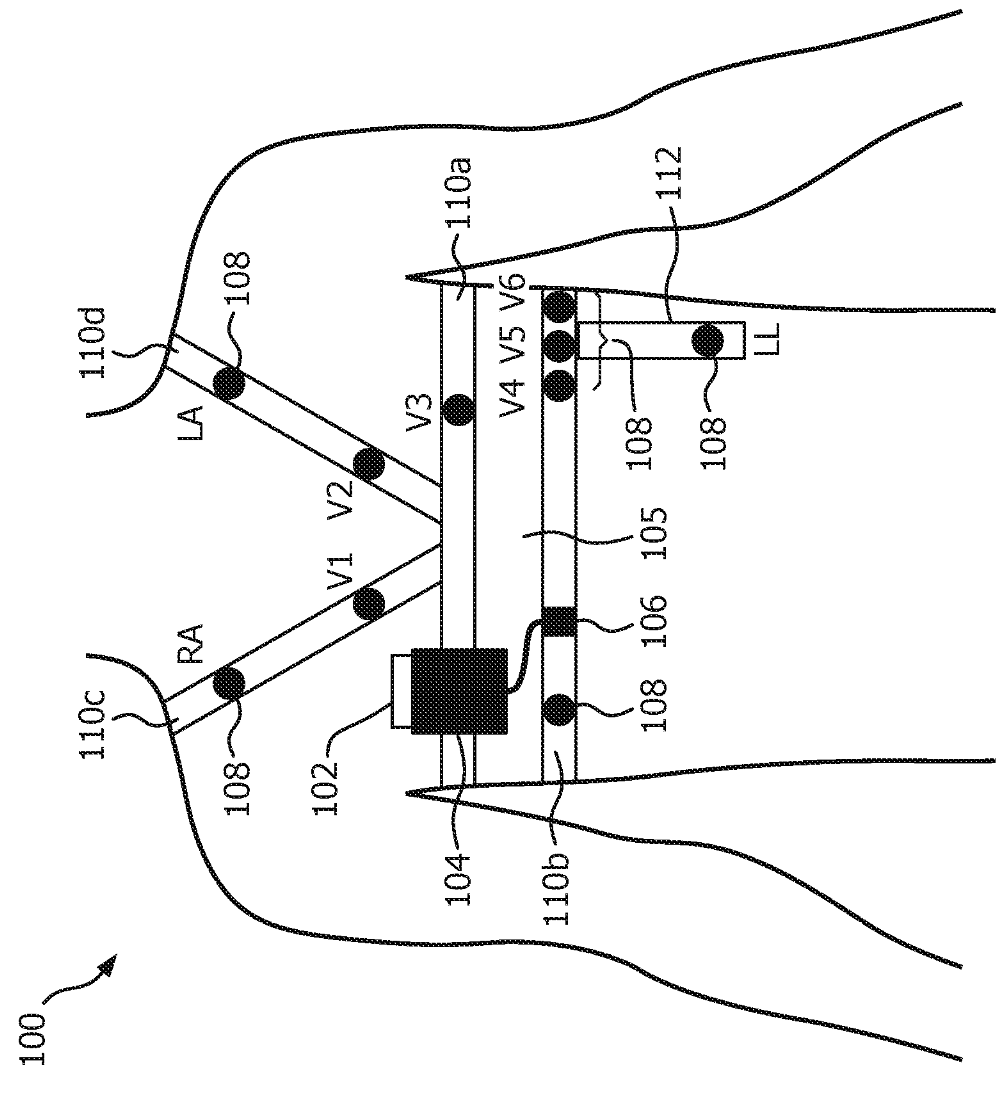
100
110c
110d
108
RA
LA
V1
V2
V3
V4 V5 V6
102
104
105
106
110a
110b
112
LL

FIG. 1

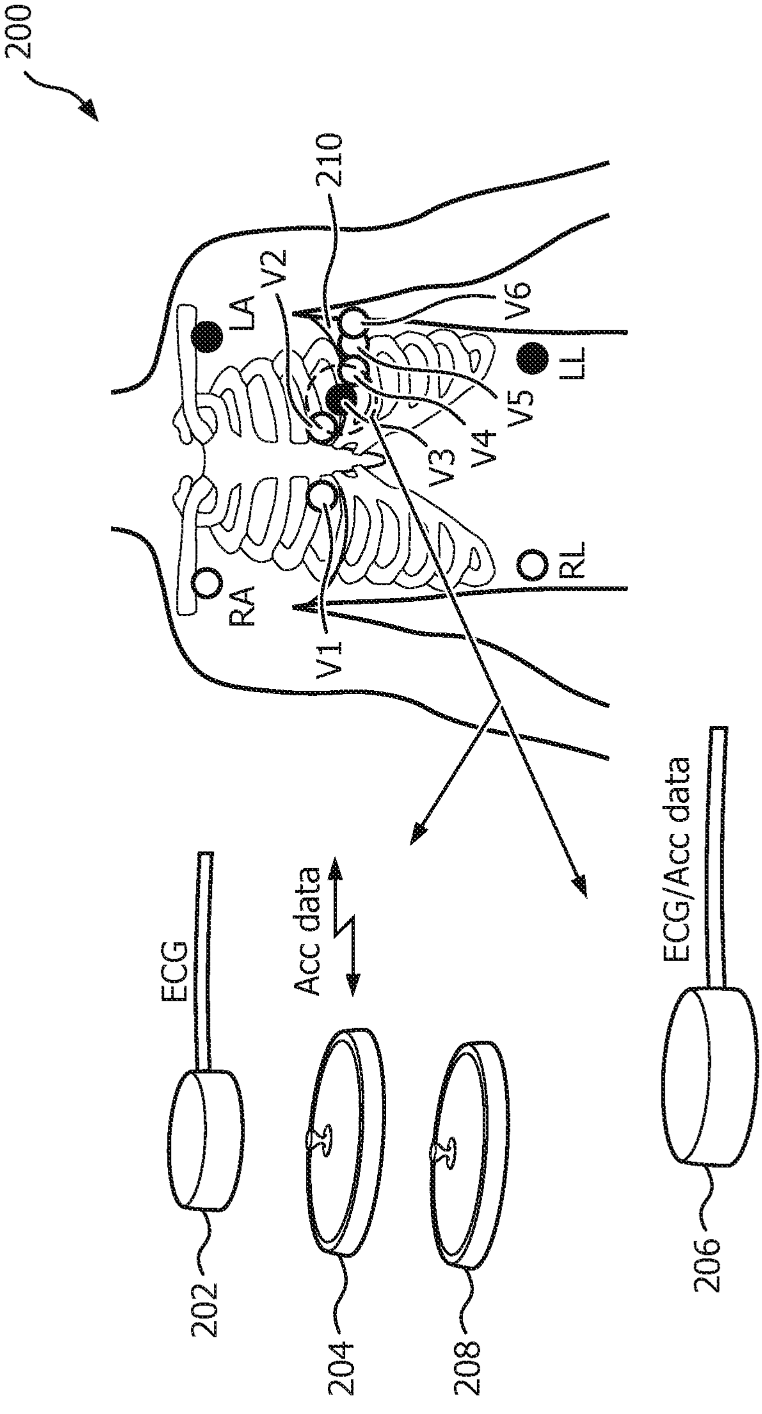
200
210
LA
RA
LL
RL
V1
V2
V3
V4
V5
V6
ECG
Acc data
ECG/Acc data
202
204
208
206

FIG. 2

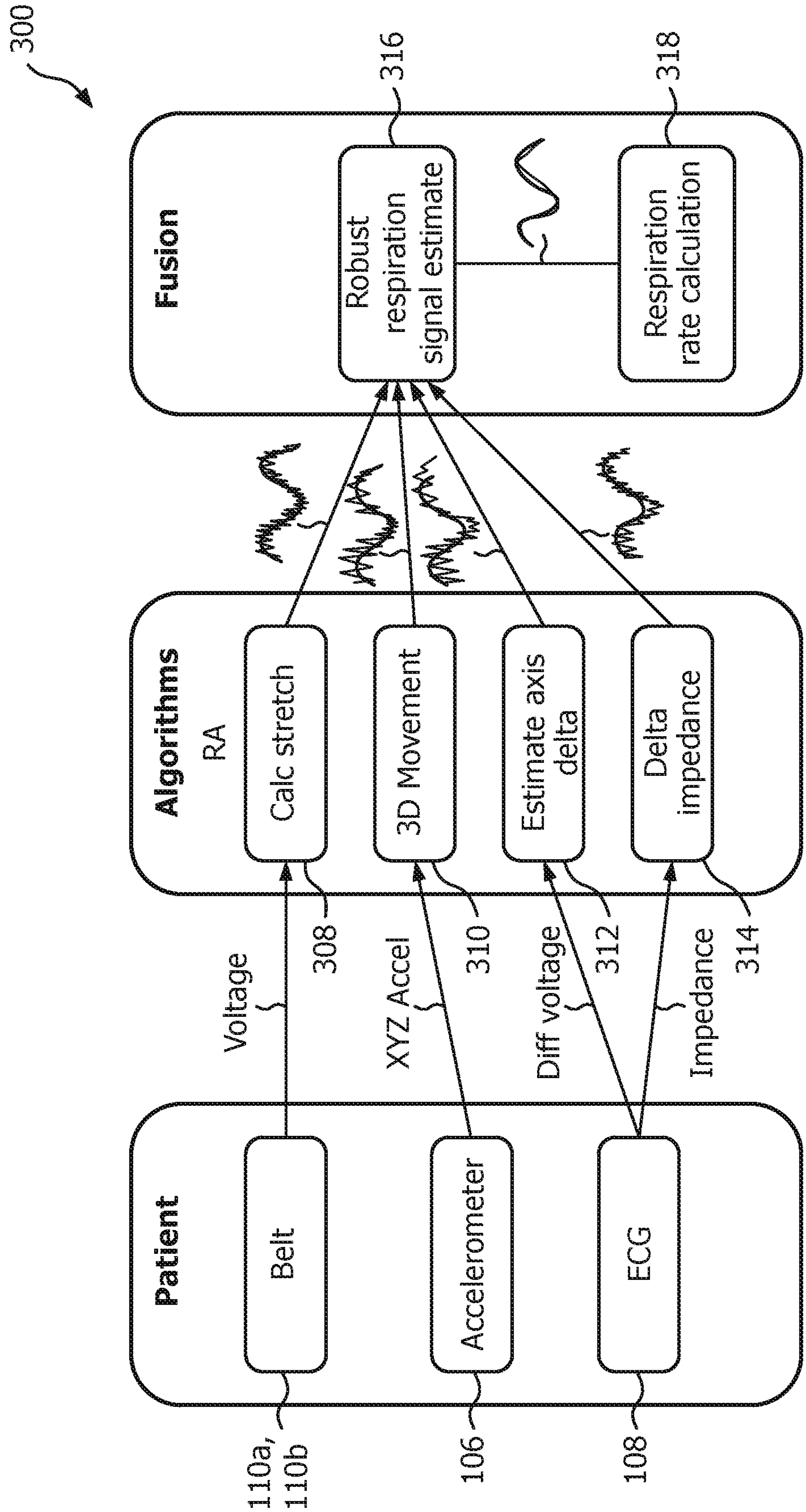
300
Patient
Belt
Accelerometer
ECG
110a, 110b
106
108
Voltage
XYZ Accel
Diff voltage
Impedance
Algorithms
RA
Calc stretch
3D Movement
Estimate axis delta
Delta impedance
308
310
312
314
Fusion
Robust respiration signal estimate
Respiration rate calculation
316
318

FIG. 3

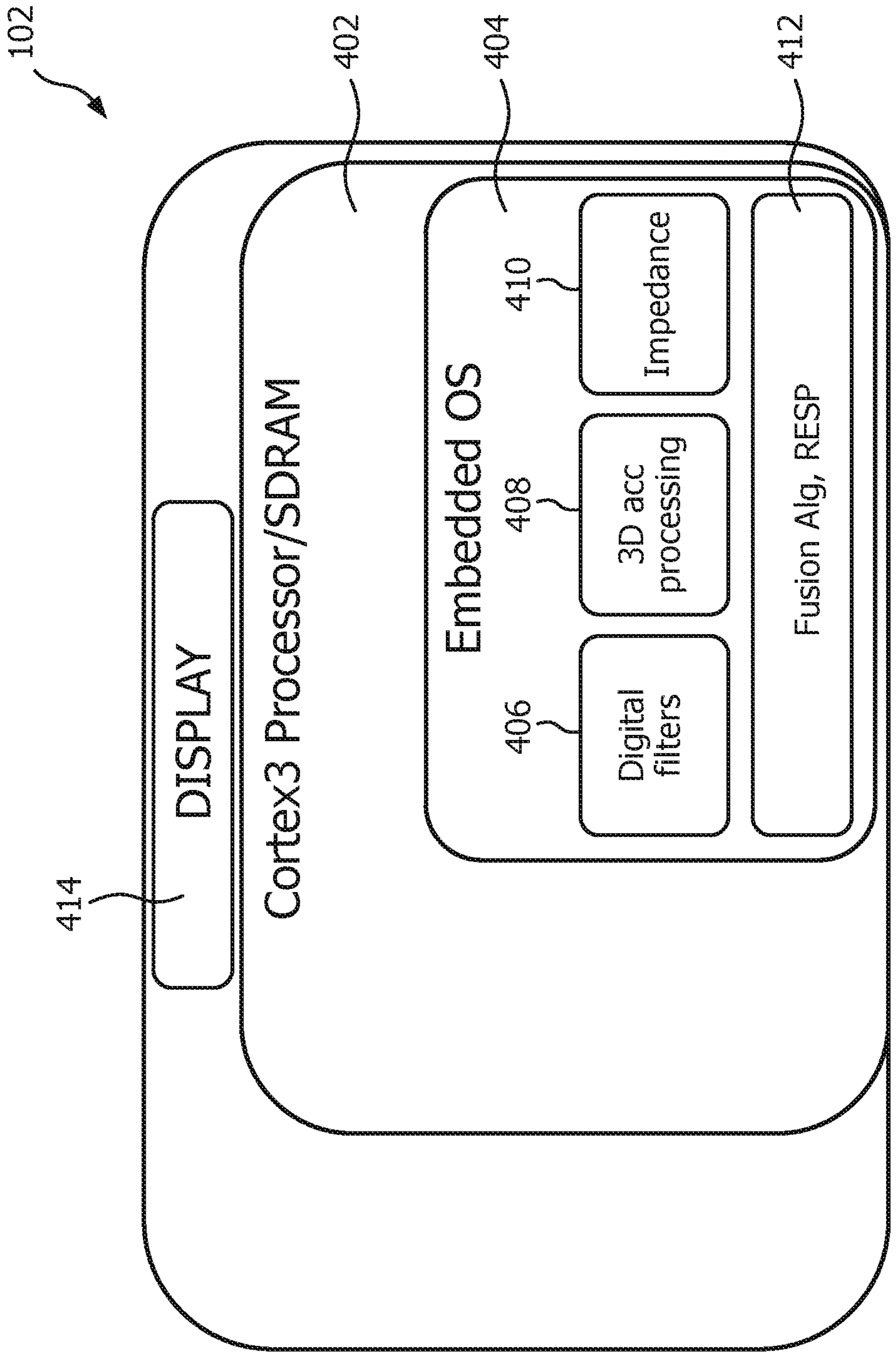
102
402
404
412
DISPLAY
414
Cortex3 Processor/SDRAM
Embedded OS
406
Digital filters
408
3D acc processing
410
Impedance
Fusion Alg, RESP

FIG. 4