P1752 Working Group Meeting

Sponsored by IEEE Engineering in Medicine & Biology (EMB) Standards Committee

24 April 2018
Teleconference
Attendance

This document shows attendance from previous calls [https://tinyurl.com/yc3oxg6q](https://tinyurl.com/yc3oxg6q) (link in the chat window of join.me). **If you attended the call, please verify that your name is listed**

- If not, email simona@openmhealth.org

**Put your name and affiliation in the chat window for attendance today.**

- If your name is not listed, or if you are joining only via phone, please email simona@openmhealth.org with “P1752 WG call” as subject

Attendance is important for determining voting rights, so please remember to “check in”

Voting rights are granted according to the P&P after attending two consecutive calls and by explicit request to the Secretary
IEEE Patent Policy
Participants have a duty to inform the IEEE

- Participants shall inform the IEEE (or cause the IEEE to be informed) of the identity of each holder of any potential Essential Patent Claims of which they are personally aware if the claims are owned or controlled by the participant or the entity the participant is from, employed by, or otherwise represents.

- Participants should inform the IEEE (or cause the IEEE to be informed) of the identity of any other holders of potential Essential Patent Claims.

Early identification of holders of potential Essential Patent Claims is encouraged.
Ways to inform IEEE

• Cause an LOA to be submitted to the IEEE-SA (patcom@ieee.org); or

• Provide the chair of this group with the identity of the holder(s) of any and all such claims as soon as possible; or

• Speak up now and respond to this Call for Potentially Essential Patents

If anyone in this meeting is personally aware of the holder of any patent claims that are potentially essential to implementation of the proposed standard(s) under consideration by this group and that are not already the subject of an Accepted Letter of Assurance, please respond at this time by providing relevant information to the WG Chair

Slide #2
Other guidelines for IEEE WG meetings

- All IEEE-SA standards meetings shall be conducted in compliance with all applicable laws, including antitrust and competition laws.
  - Don’t discuss the interpretation, validity, or essentiality of patents/patent claims.
  - Don’t discuss specific license rates, terms, or conditions.
    - Relative costs of different technical approaches that include relative costs of patent licensing terms may be discussed in standards development meetings.
    - Technical considerations remain the primary focus
  - Don’t discuss or engage in the fixing of product prices, allocation of customers, or division of sales markets.
  - Don’t discuss the status or substance of ongoing or threatened litigation.
  - Don’t be silent if inappropriate topics are discussed ... do formally object.

Patent-related information

The patent policy and the procedures used to execute that policy are documented in the:

- **IEEE-SA Standards Board Bylaws**  

- **IEEE-SA Standards Board Operations Manual**  

Material about the patent policy is available at  
[http://standards.ieee.org/about/sasb/patcom/materials.html](http://standards.ieee.org/about/sasb/patcom/materials.html)

If you have questions, contact the IEEE-SA Standards Board Patent Committee Administrator at patcom@ieee.org
Determination of Quorum
Approval of Agenda

1. Attendance
2. Call for Patents
3. Approval of agenda and prior minutes (if quorum present)
4. Introduction of Sleep Schema subgroup
5. Discussion of Cardiovascular Schema subgroup scope and duties
Approval of Prior Minutes
(March 27 and April 10)
Introduction:
Sleep Schema Subgroup
Scope and Duties (Approved)

Scope

• The P1752 Sleep Schema Subgroup will review and propose Open mHealth schemas related to sleep. The scope includes but is not restricted to the following aspects of sleep: sleep macrostructure (e.g., sleep duration, sleep stages), sleep microstructure (e.g., arousals), subjective sleep (e.g., sleep refreshment), and other sleep-related phenomena (e.g., apnea). The focus of this Subgroup’s work is on modeling data pertaining to sleep, and not on current or future individual devices or apps that measure various aspects of sleep.

Duties

• By reviewing the clinical aspects of sleep and existing relevant devices and apps, the Subgroup shall deliver a list of common attributes as well as a list of clinically important attributes in the domain of sleep as scoped above. The Subgroup shall propose modified and new schemas relating to sleep, including examples as informed by use cases and the list of common and clinically important attributes. Finally, the Subgroup shall deliver a review of mappings and/or relationships to non-Open mHealth sleep schemas.
Sleep Subgroup: Status and Next Steps

• Chair: Charlotte Chen (Philips Healthcare)
• Sleep Schema Folder created on the iMeet space;
• Review/Update on the attendance sheet under subfolder “Attendance”;
• Preparing for overview of the clinical important attributes (solicit for contributions);
• Planned 1\textsuperscript{st} Meeting: 11:30-12:30 EST, May 1\textsuperscript{st}, 2018;
• Agenda for the 1\textsuperscript{st} meeting will be sent out today;
Discussion: Cardiovascular Schema Subgroup
Cardiorespiratory Schema Subgroup: Scope and Duties (DRAFT)

Scope

• P1752 Cardiorespiratory Schema Subgroup will review and propose Open mHealth schemas related to cardiac and respiratory and functions. The scope includes cardiac, respiratory and activity measures, including but not restricted to the following: blood pressure, heart rate, heart rate variability, respiratory rate, O2 saturation, step count, physical activity duration and kcal expenditure. The focus of this Subgroup’s work is on modeling data pertaining to cardiorespiratory measures, and not on current or future individual devices or apps that measure them.

Duties

• By reviewing the clinical aspects of cardiorespiratory health and existing relevant devices and apps, the Subgroup shall deliver a list of clinically important measures in the cardiorespiratory domain, as scoped above. The Subgroup shall propose modified and new schemas relating to such measures, including examples as informed by use cases and the list of common and clinically important attributes. Finally, the Subgroup shall deliver a review of mappings and/or relationships to non-Open mHealth schemas.
CV Schema Subgroup Poll Results

Please rank the CV health topics in order of importance to include in subgroup scope

<table>
<thead>
<tr>
<th>CV Health Topic</th>
<th>Most Important</th>
<th>Somewhat Important</th>
<th>Less important</th>
<th>Least important</th>
</tr>
</thead>
<tbody>
<tr>
<td>HR, HRV, RSA</td>
<td>25</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Subjective (chest pain, etc.)</td>
<td>14</td>
<td>10</td>
<td>4</td>
<td>0</td>
</tr>
<tr>
<td>ECG trace measures</td>
<td>11</td>
<td>7</td>
<td>3</td>
<td>0</td>
</tr>
<tr>
<td>Lifestyle (smoking, etc.)</td>
<td>5</td>
<td>3</td>
<td>2</td>
<td>1</td>
</tr>
</tbody>
</table>
CV Schema Subgroup Poll Results

Please indicate whether any set listed below should be in scope for the subgroup or not

- Physical activity
- Stress
- Food
- Vascular health

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical activity</td>
<td>20</td>
<td>10</td>
</tr>
<tr>
<td>Stress</td>
<td>25</td>
<td>15</td>
</tr>
<tr>
<td>Food</td>
<td>10</td>
<td>20</td>
</tr>
<tr>
<td>Vascular health</td>
<td>30</td>
<td>10</td>
</tr>
</tbody>
</table>
Cardiorespiratory Measures

- In Open mHealth
  - Cardiac: BP (SBP, DBP), HR, RR (interbeat) interval
  - Respiratory: O2 sat, respiratory rate, ventilation cycle time, inspiratory time, expiratory time, minute volume
  - Physical activity: step count, minutes of moderate activity, activity name, physical activity (time doing activity X, kcal burned etc)
  - Body: weight
  - Subjective: palpitations, DOE, chest pain, dizziness, etc. (we have generic modeling for surveys)

- Not currently in Open mHealth
  - HRV, Pulse transit time, e-stethoscope, V02 max
  - Mobility, strength/weight lifting, GSR, erg, geotrace
  - Respiratory Sinus Arrhythmia (draft)
Cardiorespiratory Schema Subgroup: Scope and Duties (For discussion and approval)

Scope

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Duties

• By reviewing the clinical aspects of cardiorespiratory health and existing relevant devices and apps, the Subgroup shall deliver a list of clinically important measures in the cardiorespiratory domain, as scoped above. The Subgroup shall propose modified and new schemas relating to such measures, including examples as informed by use cases and the list of common and clinically important attributes. Finally, the Subgroup shall deliver a review of mappings and/or relationships to non-Open mHealth schemas.
Summary of Action Items
Future Meetings

- Continue with every other Tuesday at 8 AM Pacific / 11 AM Eastern
- Upcoming meetings
  - May 8
  - May 22
Adjournment