



(12) **EUROPEAN PATENT APPLICATION**

(43) Date of publication:  
**29.11.2017 Bulletin 2017/48**

(21) Application number: **17170725.0**

(22) Date of filing: **11.05.2017**

(51) Int Cl.:  
**A61B 5/04 (2006.01)**      **A61B 7/00 (2006.01)**  
**A61B 5/0205 (2006.01)**      **A61B 5/024 (2006.01)**  
**A61B 7/04 (2006.01)**      **A61B 5/08 (2006.01)**  
**A61B 5/11 (2006.01)**      **A61B 5/145 (2006.01)**  
**A61B 5/1455 (2006.01)**      **A61B 5/00 (2006.01)**

(84) Designated Contracting States:  
**AL AT BE BG CH CY CZ DE DK EE ES FI FR GB GR HR HU IE IS IT LI LT LU LV MC MK MT NL NO PL PT RO RS SE SI SK SM TR**  
 Designated Extension States:  
**BA ME**  
 Designated Validation States:  
**MA MD**

(30) Priority: **23.05.2016 IT UA20163678**

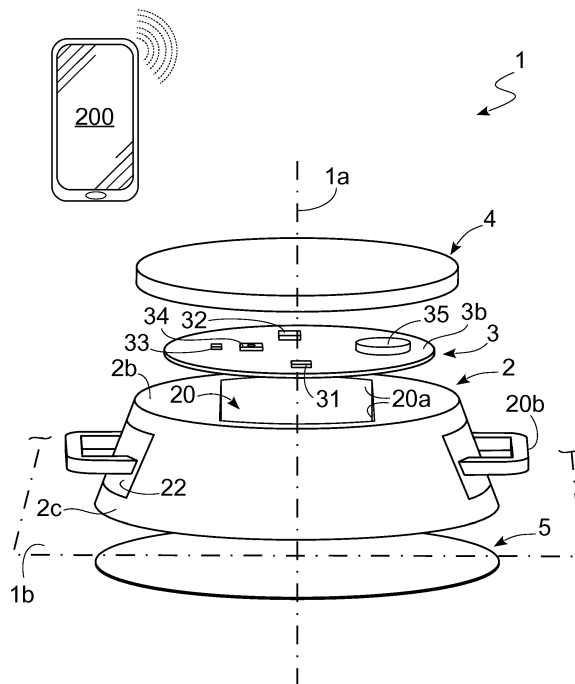
(71) Applicant: **BIOCUBIA S.r.L.**  
**20133 Milan (IT)**

(72) Inventors:  
 • **SALITO, Caterina**  
**I - 20154 Milan (IT)**  
 • **BOVIO, Dario**  
**I - 28066 Galliate (Novara) (IT)**  
 • **UVA, Barbara**  
**CH - 1004 Lausanne (CH)**  
 (74) Representative: **Lunati & Mazzoni S.r.L.**  
**Via Carlo Pisacane, 36**  
**20129 Milano (IT)**

(54) **PHYSIOLOGICAL MONITORING DEVICE**

(57) A physiological monitoring device (1) is provided comprising a cup-shaped element (2) suitable for acquiring signals from a skin surface, a control element (3) suitable for communicating with the cup-shaped element (2), wherein the cup-shaped element (2) is suitable for ac-

quiring signals comprising pressure pulsations, and wherein the control element (3) comprises at least one pressure sensor (30) suitable for detecting signals with frequencies having a minimum detectable value of at least less than 5 Hz.



**Fig. 1**

## Description

**[0001]** The present invention relates to a physiological monitoring device of the type specified in the preamble of the first claim.

**[0002]** Similar devices are described in patent applications US-A-2015/141774, US-A-2007/113654, US-B-6415033 and JP-A-2013102784.

**[0003]** In particular, the object of the invention is a device suitable for detecting physiological parameters within the context of conventional daily activities, as well as medical and sports activities.

**[0004]** At the current state-of-the-art, it is known that medical devices for physiological monitoring are characterised in that their working is principally based on contact of the device concerned with the upper dermal layer of the body.

**[0005]** Examples in this sense include instruments for detecting various characteristic physiological parameters commonly found in the context of everyday life: a thermometer is a simple instrument suitable for measuring body temperature by means of contact of the skin with a metal bulb.

**[0006]** Another example of a common object used for measuring physiological parameters is a sphygmomanometer, otherwise known as a pressure meter, suitable for determining diastolic and systolic blood pressure.

**[0007]** Besides the aforesaid devices, at the current state-of-the-art, it is possible to find other instruments for measuring and/or recording other types of physiological parameters of interest.

**[0008]** A stethophone endoscope is a commonly used instrument, which allows to listen to both high frequency and low frequency vibrations, hence its use in listening to internal organs in general.

**[0009]** Glucometers are commonly used instruments suitable for blood tests, for recording glucose in the blood.

**[0010]** Moreover, bracelets or wristwatches have been marketed, especially recently, which are mainly suitable for monitoring cardiac activity.

**[0011]** Within the context of processing physiological parameters relating to muscular activity, both in the clinical and commercial field, a number of recording techniques have been developed including, for example, mechanomyography (MMG) and electromyography (EMG).

**[0012]** These techniques are used to obtain sounds and electric activity respectively developed by muscular contractions originating from the movement of the muscle fibres.

**[0013]** In detail, the EMG is based on the frequency processing of the signals from electrodes positioned on the body or inside the body by means of needles for observing the innermost muscle fibres.

**[0014]** The known art described presents a number of important disadvantages.

**[0015]** In particular, the described devices are only able to monitor one physiological characteristic param-

eter and, in most cases require special recording procedures, just think of the sphygmomanometer, which prevent immediate use during activities that engage the whole body, such as, for example, sport.

**[0016]** In view of the above, an additional important disadvantage in the context of the current art is that the instruments currently in use are not easy to carry, with the exception of bracelets for recording heartbeats.

**[0017]** A further disadvantage of the known art relating to certain parameters lies in the invasiveness of the instruments used: just consider the glucometer, which includes the pricking of a fingertip, or the recording of internal muscle fibres using needles for the EMG.

**[0018]** A further disadvantage lies in the complexity and difficulty in obtaining acceptable forecasts for some of the apparatus currently in use, such as, for example devices for EMG.

**[0019]** The aim of the latter is to record and sample the frequencies of the signals coming from the moving muscle fibres, but they are affected by disturbances, such as, for example noise at 50 Hz coming from interference along the electrical line or signals from the antagonist muscles, which need significant filtering components for the signals.

**[0020]** In conclusion, and with particular reference to the muscular apparatus, the most serious disadvantage identified in the aforesaid art is the difficulty and lack of accuracy within the field of healthcare and particularly on individuals whose muscle fascia are compromised by pathologies such as, for example Amyotrophic Lateral Sclerosis (commonly known as ALS).

**[0021]** In this situation, the technical task at the base of the present invention is to develop a physiological monitoring device capable of substantially overcoming the stated disadvantages.

**[0022]** In the context of said technical task, an important objective of the invention is to obtain simultaneous monitoring, in real time, of a number of physiological characteristic parameters.

**[0023]** A further objective of the invention is to develop a device that guarantees high sensitivity to the physiological parameters under monitoring.

**[0024]** Another important objective of the invention is to develop a device that is easy to carry and can be used widely both in the field of sport, for monitoring physical training sessions and in the field of healthcare, for those cases that include pathologies such as muscular pathologies.

**[0025]** One last, but no less important, objective of the invention is to develop a device that is not invasive and which can be applied to the body with no limitations.

**[0026]** The technical task and specified objectives are achieved by means of the technical solution defined by the appended claim 1. Examples of preferred embodiments are described in the dependent claims.

**[0027]** The characteristics and advantages of the invention are clarified below by the detailed description of preferred embodiments of the invention, with reference

to the accompanying drawings, wherein:

**Figure 1** shows a perspective view from the top of the device; and

**Figure 2** illustrates a perspective view from the bottom of the device.

**[0028]** In this document, when measurements, values, shapes and geometrical references (such as perpendicularity and parallelism) are associated with words, such as "approximately" or other similar terms, for example "practically" or "substantially", they are to be understood as with the exception of measurement errors or inaccuracies resulting from production and/or manufacturing errors and, above all, with the exception of a slight divergence from the value, measurement, shape or geometrical reference with which it is associated. For example, if said terms are associated with a value, they preferably indicate a divergence of no more than 10% of the same value.

**[0029]** Furthermore, when terms such as "first", "second", "upper", "lower", "principal" and "secondary" are used, they do not necessarily identify an order, a relationship priority or relative position, but they may simply be used to distinguish different components more clearly.

**[0030]** With reference to the figures, the physiological monitoring device according to the invention is globally indicated with number 1.

**[0031]** In brief, the inventive principle at the base of the physiological monitoring device 1 centres on the functional combination of the art known as mechanomyography and auscultation from a stethophone endoscope that is advantageously modified.

**[0032]** Mechanomyography or MMG is a non-invasive technique, as stated in the introduction, able to acquire the sound produced by the muscular contractions originating from the movement of the muscle fibres: said sound of the muscle fibres is a signal whose frequency is comprised within a range of approximately 2-250 Hz. Said technique can be used in the clinical field, in athletics, for monitoring muscular fatigue or cybernetic as biofeedback for checking systems.

**[0033]** The stethophone endoscope is, as stated, a medical instrument, which allows the auscultation of the organs vibrating inside the body by means of sounds (pressure waves) received by the tympanum in the human ear through channelling tubes.

**[0034]** Structurally, the physiological monitoring device 1 is preferably composed of four main components: a cup-shaped element 2, defining a main axis 1a and a reference plane 1b perpendicular to the main axis 1a, a control element 3, a cover 4 and, if necessary, a diaphragm 5.

**[0035]** The cup-shaped element 2 is preferably made of a polymeric material and defines, for example, a lower base 2a belonging to the reference plane 1b, centred on the main axis 1a, and an upper base 2b with a variable geometry section, parallel to the plane 1b, smaller in

relation to the projection of the lower base 2a on the reference plane 1b.

**[0036]** The upper base 2b is preferably surmounted by the control element 3.

**[0037]** The control element 3 is for example a plate, intended as a rigid element in which two sizes significantly predominate over the third, with variable geometry, comprising a lower surface 3a parallel to the reference plane 1b and suitable for contact with the cup-shaped element 2, and an upper surface 3b opposite the preceding one.

**[0038]** Furthermore, the cup-shaped element 2 defines a lateral surface 2c, where at least two slots 20b are preferably positioned for possible connection with a little strap 100, and comprising a through hole 20 that defines an internal surface 20a.

**[0039]** The cup-shaped element 2 is substantially inspired by the aforesaid stethophone endoscope.

**[0040]** However, compared to this, the physiological monitoring device 1 presents advantageously different characteristics.

**[0041]** Recording of the physiological activities of interest takes place in the stethophone endoscope by acquisition of pressure waves, as stated previously, carried inside a tube, by the tympanum that is by a sound noise sensor.

**[0042]** Whereas, in the physiological monitoring device 1, the pressure signal is processed at the upper base 2b by a pressure sensor 30. The latter is preferably comprised inside the control element 3 and in particular, in a position centred on the main axis 1a at the lower surface 3a.

**[0043]** The pressure sensor 30 is for example of the type BOSCH® BME 280 or Honeywell® HSCSRRN001 NDAA3 and performs important functions in the context of the working of the monitoring device 1.

**[0044]** In particular, it is designed to transduce the pressure wave into an electric signal and subsequently digital and using a dedicated algorithm it enables the shifting of the low frequencies towards the high frequencies, making the otherwise inaudible pressure waves audible.

**[0045]** The pressure sensor 30 makes it possible to pick up and transmit signals at very low frequencies, lower than 5 Hz and preferably until null frequency or 0 Hz, which is usually not detectable with instruments belonging to the current state-of-the-art.

**[0046]** In other words, the pressure sensor 30, unlike microphones, is capable of detecting and transmitting signals independently of the frequency, reaching far greater sensitivities.

**[0047]** Furthermore, the pressure sensor 30 enables body humidity and temperature to be recorded and, when resting on the abdomen, it is possible to measure the respiratory rate and transduce the sounds of opening and closing of the heart valves.

**[0048]** This is possible, principally because of a bidirectional valve 31 that allows the pressure to be control-

led inside the cup-shaped element. This bidirectional valve 31 is also preferably comprised within the control element 3.

**[0049]** In particular, once closed, the valve 31 allows the device 1 to be sealed hermetically on the skin surface, closing the hole 20 again to facilitate the measurement of the respiratory rate. Whereas, when the valve 31 is open, it allows the offset to be removed, caused by over-pressure that can form inside the hole 20 after the user has applied the instrument.

**[0050]** Thanks to the pressure sensor 30, the device 1 makes it possible to acquire defined frequency bands, but with reference to the cup-shaped element 2, by varying the lower base 2a, there is a contact surface, which allows the range of recordable frequencies to be modified.

**[0051]** Moreover, two optical sensors 21 are preferably placed on the lower base 2a, for example of the type SFH 7060-OSRAM® or MAX30102 High-Sensitivity Pulse Oximeter and Heart-Rate sensor - MAXIM, symmetrically in relation to the main axis 1a.

**[0052]** These optical sensors 21 serve for pulsometry, oxymetry and glucosimetry (Yadav et al., Signal Processing and Integrated Networks (SPIN), 2014 International Conference on. IEEE, 2014) and make it possible to monitor the coupling between the skin and the device.

**[0053]** Lastly, the cup-shaped element 2 preferably comprises force sensors 22 placed, for example, on the lateral surface 2c, in particular on at least one slot 20b.

**[0054]** The force sensors 22 are suitable for detecting, for example, the respiration frequency, measuring the change in tension on the slot caused by expansion of the user's body onto which the device 1 is applied.

**[0055]** Whereas, the control element 3 is also preferably fitted with electronic elements on its surface, in particular on the upper surface 3b: a micro-controller 32, an IMU sensor 33, a connection element 34 and a battery 35.

**[0056]** In particular, the body humidity and temperature sensor 31 detects the user's temperature in the area below the cup-shaped element 2, obtaining data relating to the humidity, again on this area.

**[0057]** The micro-controller 32 is a common electronic element suitable for gathering and processing the measurement signals coming from the sensors on the control element 3.

**[0058]** The IMU 33 sensor, for example of the type BOSCH® BNO 055, comprises a gyroscope, magnetometer and accelerometer and is therefore suitable for calculating the acceleration, angular speed, angular position and ballistography.

**[0059]** The connection element 34 is, for example, a module of the type Bluetooth®, but it may also be of another type provided it guarantees the possibility to communicate with other external receiving devices 200 such as, for example, a smartphone or a PC or other.

**[0060]** Finally, the battery 35 serves to supply the whole device 1.

**[0061]** The aforesaid sensors can work independently,

performing the functions for which they are designed, or they can work together in conjunction with the other sensors.

**[0062]** For example, it is advantageously possible to combine the pressure sensor 30 with the IMU sensor 33 obtaining low frequency vibration measurements characterised by reduced uncertainty, making it possible to reinforce the mechanomyographical analysis. Or it is possible to combine the pressure sensor 30 data and optical sensor 21 data, or the IMU sensor 33 data and optical sensor 21 data to estimate blood pressure using pulse transit time (Wang et al. Int Conf Signal Process Proc. 2014 October; 2014: 115-118) or the pressure sensor 30 and force sensor 34 to estimate the respiratory rate.

**[0063]** The monitoring device 1 preferably also comprises a cover 4, for example made of a polymeric material, comprising a plate with variable geometry, of which at least one of the two surfaces is surmounted by a perimeter thickness 4c suitable for fully containing the control element 3 and suitable for being constrained, for example by gluing, to the cup-shaped element 2.

**[0064]** Finally, the physiological monitoring device 1 can comprise, if necessary, the diaphragm 5, as stated previously, on the surface of the base 2a.

**[0065]** Said diaphragm 5 can be of any shape and size and is preferably suitable for interfacing with the skin surface of the individual to be examined with damping effects on the lower frequencies and amplification effects of the higher frequencies.

**[0066]** The working of the physiological monitoring device 1, previously described in substantially structural terms, is as follows.

**[0067]** It is preferably in contact with the skin surface, located above the muscular fascia concerned, and it is constrained to the limb, for example, by applying a little strap 100.

**[0068]** The physiological parameters of interest are subsequently recorded by the device 1 and sent to a receiver, such as for example a smartphone 200, to monitor the individual's physiological state, in real time, and in particular its muscular activity.

**[0069]** The physiological monitoring device 1 according to the invention offers important advantages.

**[0070]** It is possible to monitor and control a number of physiological parameters simultaneously and synergistically using just the device 1 and without having to resort to complex operations to achieve said objectives.

**[0071]** The device 1 is also characterised by its outstanding sensitivity and transportability, as well as by its extensive versatility, which makes it simple and handy to use and transport.

**[0072]** In detail, the pressure sensor 30, which is characterised, as stated, by its surprisingly reduced bottom scale, advantageously guarantees greater sensitivity as it is able to record signals of considerably reduced intensity and low frequency close to those defined by the movement of the muscle fibres.

**[0073]** It makes it possible to assess signals, for example within  $\pm 1.8$  mmHg and advantageously within frequencies ranging from 0 Hz to a few thousand, which are considerably reduced compared to the prior art and in particular to instruments like microphones, which use frequency response with a significantly higher scale (20 Hz-20 KHz).

**[0074]** In view of the above, the device 1 has a wide-ranging functionality that allows it to be used in fields such as sport and, equally important, health.

**[0075]** With particular reference to muscular fascia, the adoption of the mechanomyographical technique, together with the acquisition by a cup-shaped element 2, preferably a stethophone endoscope, with pressure sensors 30, enables the device 1 to be used and with considerable results, in terms of monitoring physiological activity, also in individuals affected by Amyotrophic Lateral Sclerosis, that is, having some compromised muscular fascia.

**[0076]** Finally, a further advantage lies in the fact that as the device 1 works in contact with the skin surface, it is not necessary to use invasive instruments.

**[0077]** In conclusion, the physiological monitoring device 1 according to the invention synergistically manages to combine elements aimed at improving the functionality and precision of the instrument.

**[0078]** Each sensor contributes favourably to increasing the accuracy of the data acquired from the other sensors and the same cup-shaped element 2 facilitates the acquisition of the pressure sensor 30 via the cavity or hole 20 inside it.

**[0079]** Moreover, the device 1 makes it possible to achieve accurate analyses for example on users affected by muscular dysfunctions without any logistic limitation, the device 1 being extremely compact and easily adapted to any position and configuration.

**[0080]** All of these advantageous characteristics are, however, obtained from elements that are easy to find and consequently the physiological monitoring device 1 does not present any complications on a technological and financial level.

**[0081]** The invention is subject to variations that lie within the scope of the inventive concept defined by the claims.

**[0082]** For example, the cup-shaped element 2 can be round or oval or any other shape respecting and preserving the functionalities and previously expressed advantages.

**[0083]** In said context, all of the details can be replaced by equivalent components and materials and they can be any shape or size.

## Claims

1. A physiological monitoring device (1) comprising:

- a cup-shaped element (2) suitable for acquiring

signals from a skin surface,

- a control element (3) suitable for communicating with said cup-shaped element (2),

- and **characterised in that**

- said cup-shaped element (2) is suitable for acquiring signals comprising pressure pulsations,

- and **in that**

- said control element (3) comprises a pressure sensor (30) suitable for detecting said signals independently of the frequency and with frequencies having a minimum detectable value that is at least lower than 5 Hz.

2. The physiological monitoring device (1) according to the previous claim, wherein said pressure sensor (30) is suitable for detecting said signals with frequencies having a null minimum value.

3. The physiological monitoring device (1) according to at least one previous claim, wherein said pressure sensor (30) comprises a bottom-scale of about  $\pm 1.8$  mmHg.

4. The physiological monitoring device (1) according to claim 1, wherein said cup-shaped element (2) comprises a stethophone endoscope.

5. The physiological monitoring device (1) according to one or more of the previous claims, wherein said cup-shaped element (2) comprises at least one optical sensor (21) and a force sensor (22).

6. The physiological monitoring device (1) according to one or more of the previous claims, wherein said pressure sensor (30) comprises the measurement of body temperature and humidity.

7. The physiological monitoring device (1) according to one or more of the previous claims, wherein said control element (3) comprises at least:

- a bidirectional valve (31),

- a micro-controller (32),

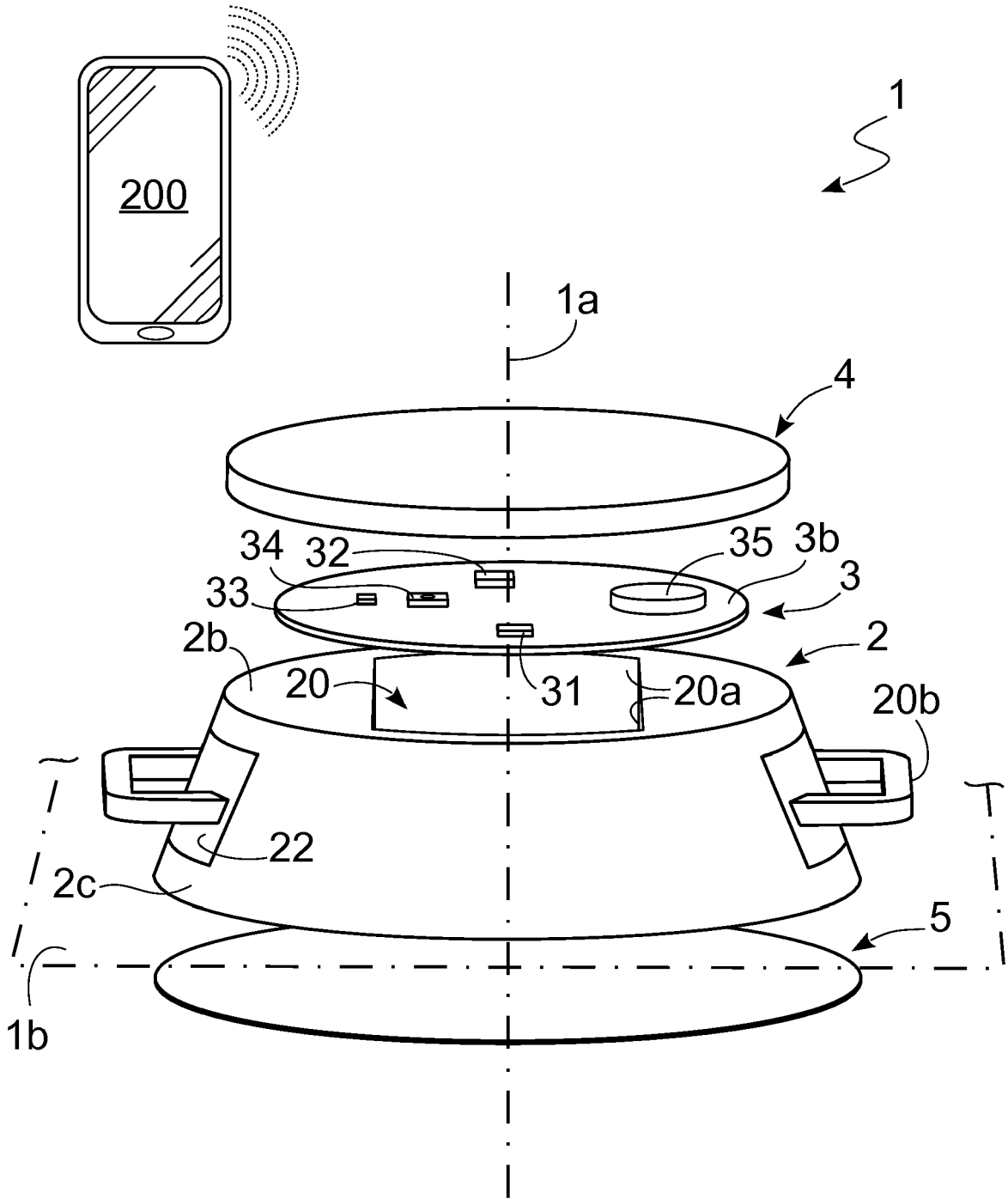
- an IMU sensor (33),

- a connection element (34), and

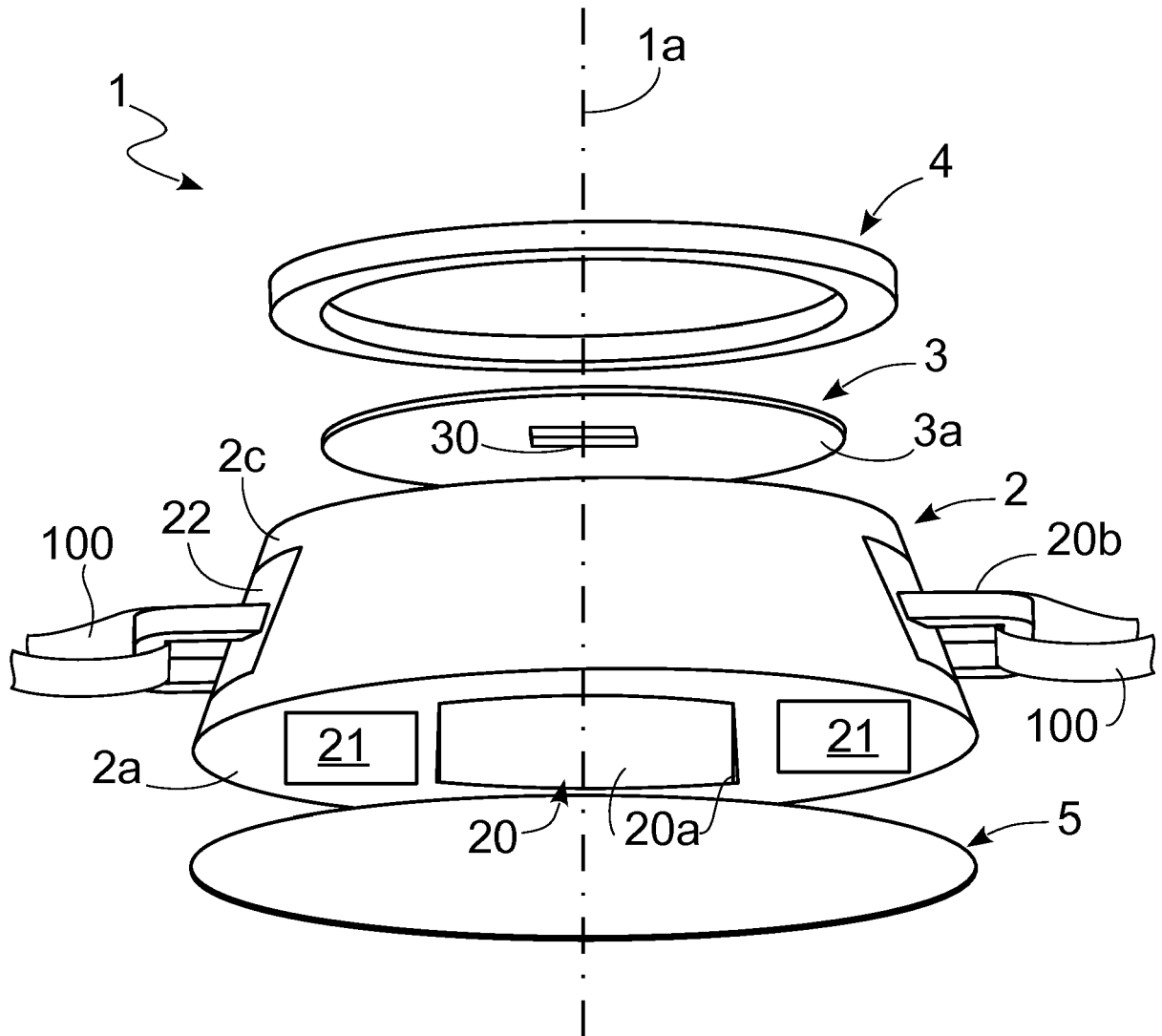
- a battery (35).

8. The physiological monitoring device (1) according to one or more of the previous claims, wherein said connection element (34) consists of a module chosen from a Bluetooth, Wi-Fi and wireless module suitable for communication with external elements.

9. The physiological monitoring device (1) according to claim 1, wherein said cup-shaped element (2) is connected to at least one diaphragm (5).



*Fig. 1*



**Fig. 2**



EUROPEAN SEARCH REPORT

Application Number  
EP 17 17 0725

5

10

15

20

25

30

35

40

45

50

55

DOCUMENTS CONSIDERED TO BE RELEVANT			
Category	Citation of document with indication, where appropriate, of relevant passages	Relevant to claim	CLASSIFICATION OF THE APPLICATION (IPC)
X	US 2015/141774 A1 (OGAWA HIROSHI [JP] ET AL) 21 May 2015 (2015-05-21) * abstract; figures 1-10, 18, 26-32 * * paragraphs [0078], [0079], [0083] - [0085], [0202] - [0218], [0223] - [0233], [0239] - [0246], [0250] - [0262] * * paragraphs [0272] - [0306], [0313] - [0318], [0348], [0351], [0375] - [0376], [0380], [0395] - [0403] * * paragraphs [0422] - [0425], [0471] - [0486], [0517] - [0518] * -----	1-9	INV. A61B5/04 A61B7/00 A61B5/0205 A61B5/024 A61B7/04  ADD. A61B5/08 A61B5/11 A61B5/145 A61B5/1455 A61B5/00
X	US 2007/113654 A1 (CARIM HATIM M [US] ET AL) 24 May 2007 (2007-05-24) * abstract; figures 1-11 * * paragraphs [0006] - [0024], [0041] - [0055], [0062] - [0071], [0082] - [0091] * -----	1-9	
X A	US 6 415 033 B1 (HALLECK MICHAEL E [US] ET AL) 2 July 2002 (2002-07-02) * abstract; figures 1-24 * * column 1, lines 25-45 * * column 4, line 7 - column 5, line 45 * * column 7, line 40 - column 10, line 55 * * column 12, line 60 - column 13, line 50 * -----	1,2,4,8,9 3,5-7	TECHNICAL FIELDS SEARCHED (IPC) A61B
X A	JP 2013 102784 A (UNIV SHINSHU; ICHIKAWA CO LTD) 30 May 2013 (2013-05-30) * figures 1-22 * * paragraphs [0009] - [0020], [0029] - [0039] * ----- -/--	1-4,9 5-8	
3 The present search report has been drawn up for all claims			
Place of search The Hague		Date of completion of the search 2 October 2017	Examiner Carta, Riccardo
CATEGORY OF CITED DOCUMENTS X : particularly relevant if taken alone Y : particularly relevant if combined with another document of the same category A : technological background O : non-written disclosure P : intermediate document		T : theory or principle underlying the invention E : earlier patent document, but published on, or after the filing date D : document cited in the application L : document cited for other reasons ----- & : member of the same patent family, corresponding document	

EPO FORM 1503 03.82 (P04C01)



EUROPEAN SEARCH REPORT

Application Number  
EP 17 17 0725

5

10

15

20

25

30

35

40

45

50

55

DOCUMENTS CONSIDERED TO BE RELEVANT			
Category	Citation of document with indication, where appropriate, of relevant passages	Relevant to claim	CLASSIFICATION OF THE APPLICATION (IPC)
A	Bosch Sensortec: "BME280: Final data sheet BME280 Combined humidity and pressure sensor", 26 October 2015 (2015-10-26), XP055340087, Retrieved from the Internet: URL:https://ae-bst.resource.bosch.com/media_tech/media/datasheets/BST-BME280_DS001-11.pdf [retrieved on 2017-01-30] * pages 7-11 *	1-9	
A	----- CN 105 592 781 A (INTEL CORP) 18 May 2016 (2016-05-18) * abstract; figures 1-4 * * paragraphs [0001], [0015], [0017], [0019], [0023] - [0025], [0029], [0035] - [0052], [0067], [0073] - [0078], [0099], [0108] - [0109] * * paragraphs [0123] - [0129], [0145], [0149], [0165] * & US 2016/324487 A1 (GUO MAO [CN] ET AL) 10 November 2016 (2016-11-10) * the whole document * -----	1-9	
The present search report has been drawn up for all claims			TECHNICAL FIELDS SEARCHED (IPC)
Place of search The Hague		Date of completion of the search 2 October 2017	Examiner Carta, Riccardo
CATEGORY OF CITED DOCUMENTS X : particularly relevant if taken alone Y : particularly relevant if combined with another document of the same category A : technological background O : non-written disclosure P : intermediate document		T : theory or principle underlying the invention E : earlier patent document, but published on, or after the filing date D : document cited in the application L : document cited for other reasons ..... & : member of the same patent family, corresponding document	

EPO FORM 1503 03.82 (P04C01)

ANNEX TO THE EUROPEAN SEARCH REPORT  
ON EUROPEAN PATENT APPLICATION NO.

EP 17 17 0725

5 This annex lists the patent family members relating to the patent documents cited in the above-mentioned European search report.  
The members are as contained in the European Patent Office EDP file on  
The European Patent Office is in no way liable for these particulars which are merely given for the purpose of information.

02-10-2017

Patent document cited in search report	Publication date	Patent family member(s)	Publication date
US 2015141774 A1	21-05-2015	CN 104507384 A	08-04-2015
		EP 2881035 A1	10-06-2015
		US 2015141774 A1	21-05-2015
		WO 2014021335 A1	06-02-2014
-----			
US 2007113654 A1	24-05-2007	AU 2006316603 A1	31-05-2007
		BR PI0620546 A2	16-11-2011
		CA 2630730 A1	31-05-2007
		CN 101321489 A	10-12-2008
		EP 1951112 A1	06-08-2008
		JP 5345852 B2	20-11-2013
		JP 2009517129 A	30-04-2009
		KR 20080071587 A	04-08-2008
		TW 200733940 A	16-09-2007
		US 2007113654 A1	24-05-2007
		US 2011301503 A1	08-12-2011
WO 2007061735 A1	31-05-2007		
-----			
US 6415033 B1	02-07-2002	AU 5296101 A	08-10-2001
		CA 2403774 A1	04-10-2001
		EP 1272109 A1	08-01-2003
		JP 2003527922 A	24-09-2003
		MX PA02009290 A	08-09-2005
		TW 539548 B	01-07-2003
		US 6415033 B1	02-07-2002
		US 2003072458 A1	17-04-2003
WO 0172228 A1	04-10-2001		
-----			
JP 2013102784 A	30-05-2013	JP 5766585 B2	19-08-2015
		JP 2013102784 A	30-05-2013
-----			
CN 105592781 A	18-05-2016	CN 105592781 A	18-05-2016
		EP 3138087 A1	08-03-2017
		JP 2017505207 A	16-02-2017
		KR 20160082939 A	11-07-2016
		TW 201622639 A	01-07-2016
		US 2016324487 A1	10-11-2016
WO 2016082144 A1	02-06-2016		
-----			

EPO FORM P0459

For more details about this annex : see Official Journal of the European Patent Office, No. 12/82

**REFERENCES CITED IN THE DESCRIPTION**

*This list of references cited by the applicant is for the reader's convenience only. It does not form part of the European patent document. Even though great care has been taken in compiling the references, errors or omissions cannot be excluded and the EPO disclaims all liability in this regard.*

**Patent documents cited in the description**

- US 2015141774 A [0002]
- US 2007113654 A [0002]
- US 6415033 B [0002]
- JP 2013102784 A [0002]

**Non-patent literature cited in the description**

- **YADAV et al.** Signal Processing and Integrated Networks (SPIN). *2014 International Conference on IEEE*, 2014 [0052]
- **WANG et al.** *Int Conf Signal Process Proc.*, October 2014, 115-118 [0062]

专利名称(译)	生理监测装置		
公开(公告)号	<a href="#">EP3248541A1</a>	公开(公告)日	2017-11-29
申请号	EP2017170725	申请日	2017-05-11
[标]发明人	SALITO CATERINA BOVIO DARIO UVA BARBARA		
发明人	SALITO, CATERINA BOVIO, DARIO UVA, BARBARA		
IPC分类号	A61B5/04 A61B7/00 A61B5/0205 A61B5/024 A61B7/04 A61B5/08 A61B5/11 A61B5/145 A61B5/1455 A61B5/00		
CPC分类号	A61B5/04002 A61B5/0205 A61B5/02416 A61B5/02438 A61B5/04005 A61B5/0816 A61B5/1102 A61B5/1107 A61B5/14532 A61B5/14551 A61B5/681 A61B5/6823 A61B5/6824 A61B5/6831 A61B5/6834 A61B7/003 A61B7/006 A61B7/04 A61B2560/0406 A61B2560/0412 A61B2562/0204 A61B2562/0219 A61B2562/0223 A61B2562/0233 A61B2562/0238 A61B2562/0247 A61B2562/0271 A61B2562/029 A61B2562/06 A61B2562/16		
优先权	UA2016A003678 2016-05-23 IT		
其他公开文献	EP3248541A8		
外部链接	<a href="#">Espacenet</a>		

摘要(译)

提供一种生理监测装置 (1)，包括适于从皮肤表面获取信号的杯形元件 (2)，适于与杯形元件 (2) 连通的控制元件 (3)，其中杯形元件 - 成形元件 (2) 适合于获取包括压力脉动的信号，并且其中控制元件 (3) 包括至少一个压力传感器 (30)，其适于检测具有至少小于5Hz的最小可检测值的频率的信号。

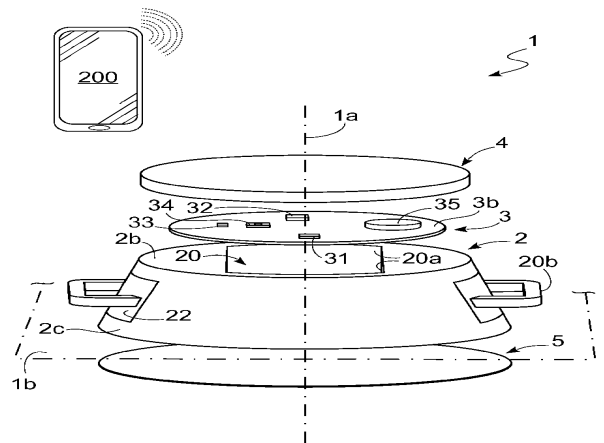


Fig. 1