



(19) **United States**
(12) **Patent Application Publication**
Brown et al.

(10) **Pub. No.: US 2016/0015352 A1**
(43) **Pub. Date: Jan. 21, 2016**

(54) **WIRELESS PHYSIOLOGICAL DATA ACQUISITION SYSTEM**

A61B 5/0402 (2006.01)
A61B 5/0205 (2006.01)
A61B 5/055 (2006.01)
A61B 6/03 (2006.01)

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(52) **U.S. Cl.**
CPC *A61B 6/541* (2013.01); *A61B 5/055* (2013.01); *A61B 6/032* (2013.01); *A61B 5/0402* (2013.01); *A61B 5/0205* (2013.01); *A61B 5/0002* (2013.01); *A61B 5/024* (2013.01)

(21) Appl. No.: **14/801,406**

(57) **ABSTRACT**

(22) Filed: **Jul. 16, 2015**

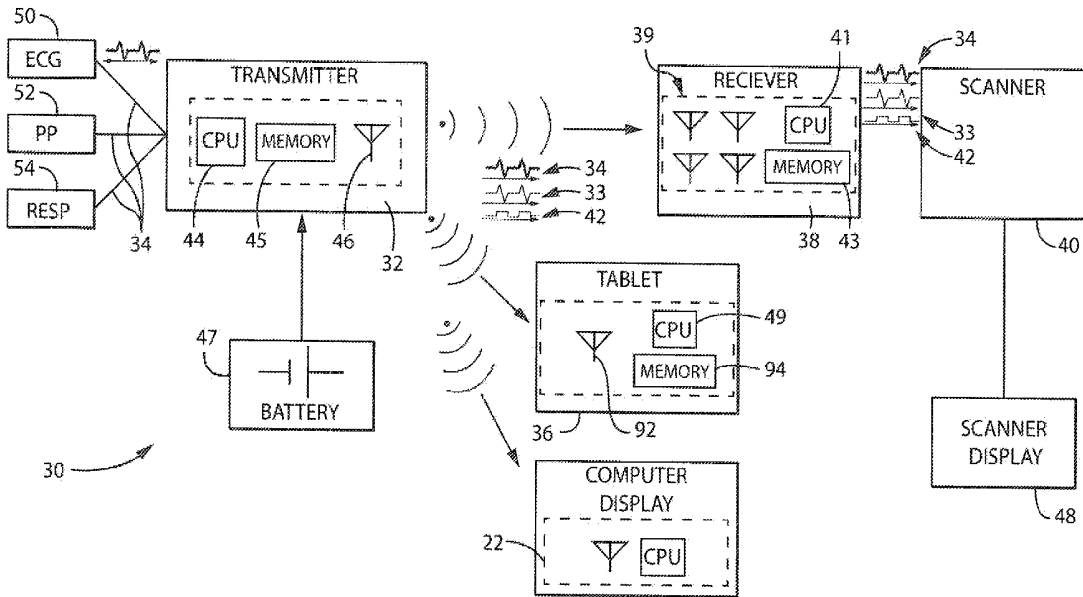
Related U.S. Application Data

A physiologic transmitter manages multiple communications between physiologic data acquisition devices attached to the patient and a receiver attached to an MRI or CT scanner. The transmitter's processor is able to generate waveform data and trigger data based upon the acquired physiologic data and transmit the data to a physiologic receiver attached to the host scanner. The receiver then is able to deliver a trigger signal to the host scanner for imaging the patient during a selected time frame based upon cardiac and/or respiratory cycles of the patient.

(60) Provisional application No. 62/025,171, filed on Jul. 16, 2014.

Publication Classification

(51) **Int. Cl.**
A61B 6/00 (2006.01)
A61B 5/00 (2006.01)



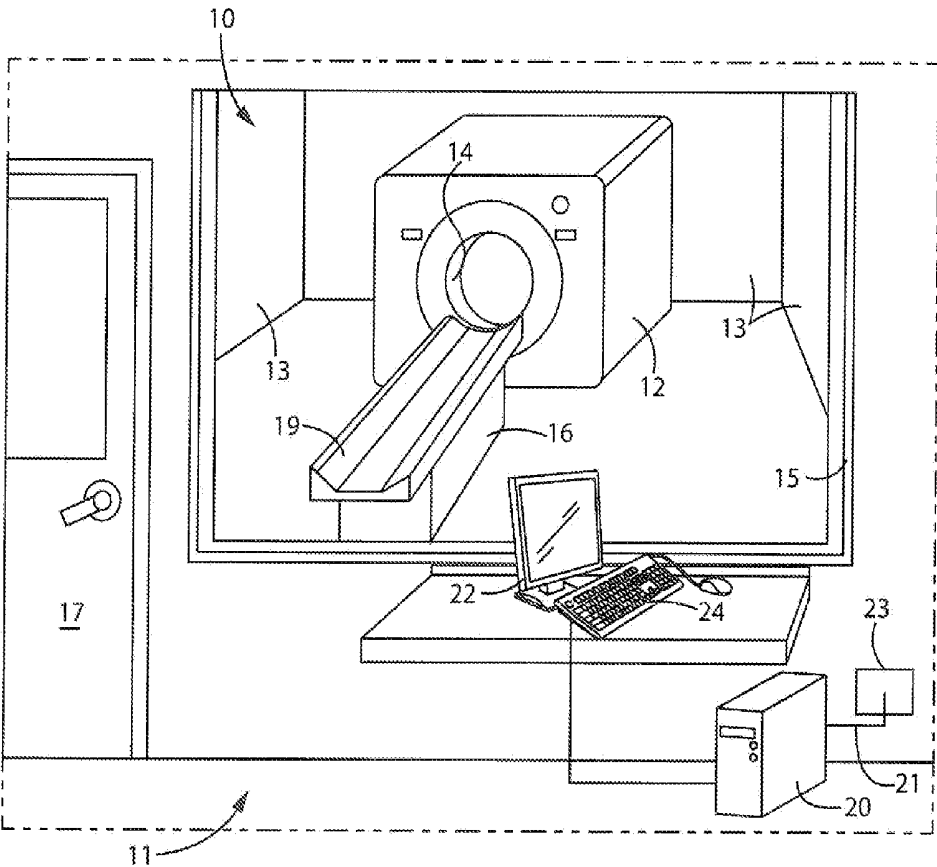


FIG. 1
PRIOR ART

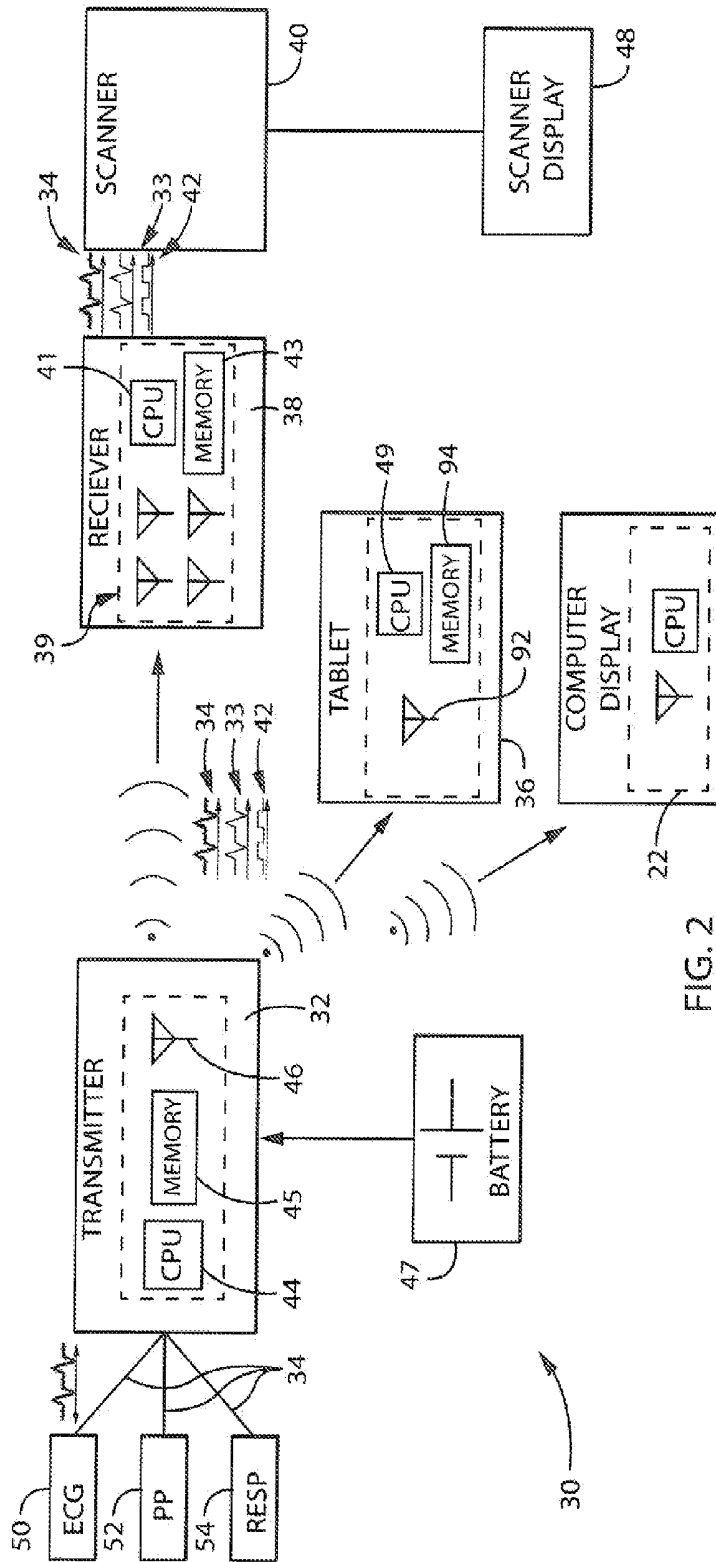


FIG. 2

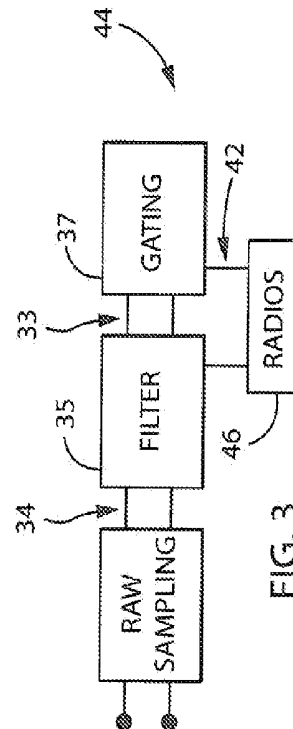


FIG. 3

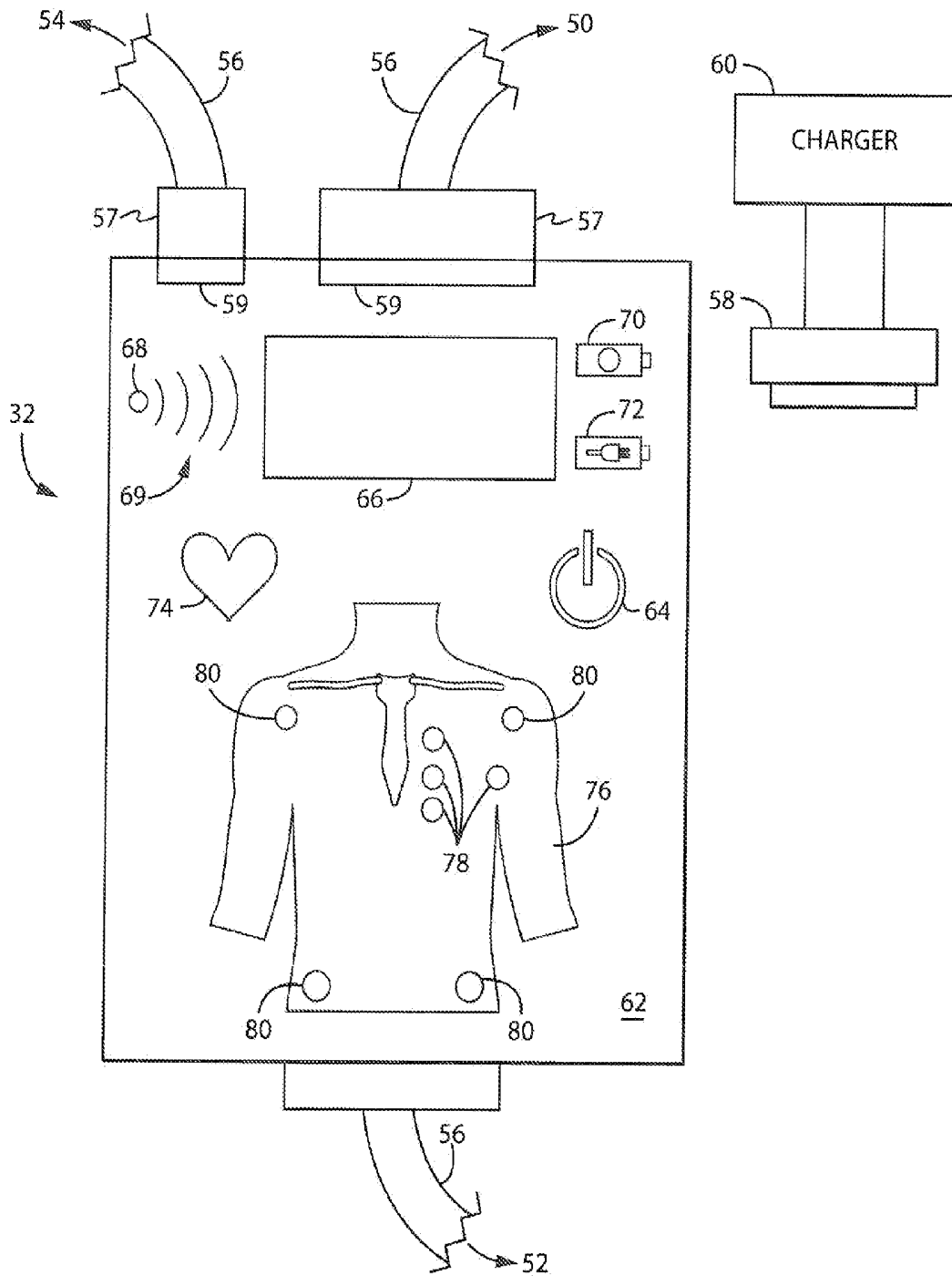


FIG. 4

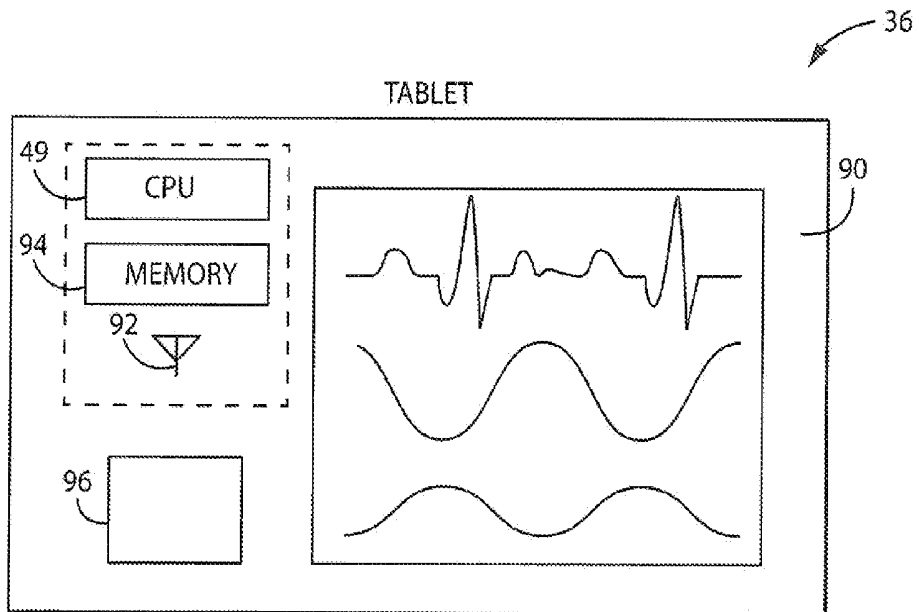


FIG. 5

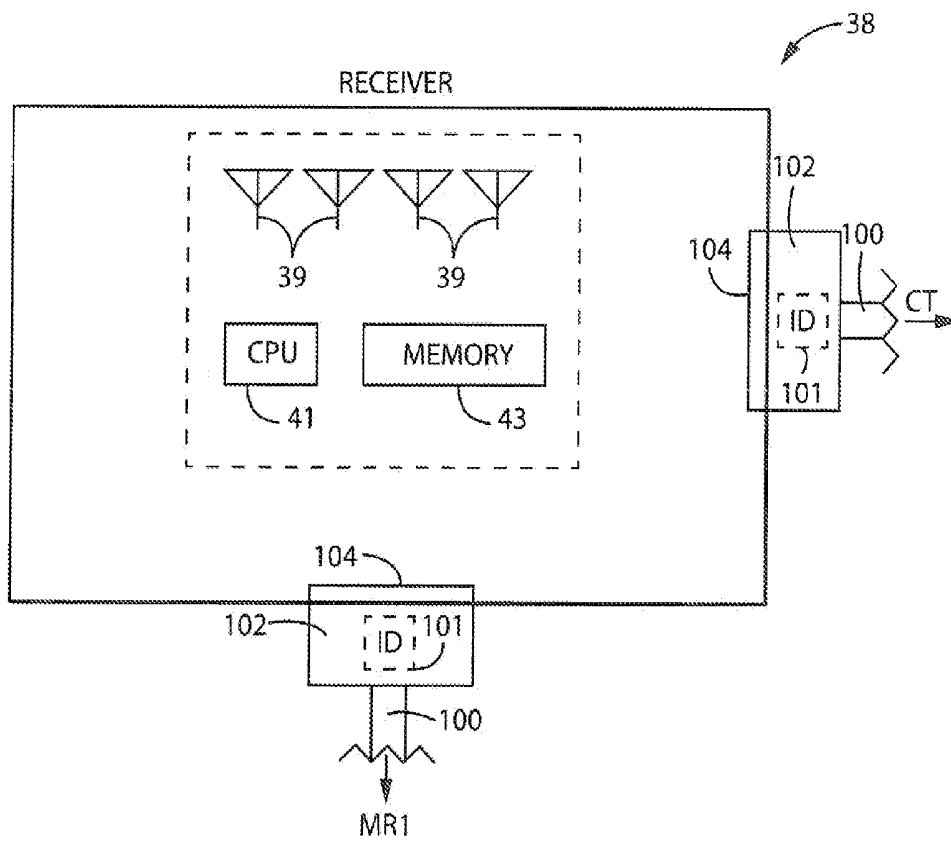


FIG. 6

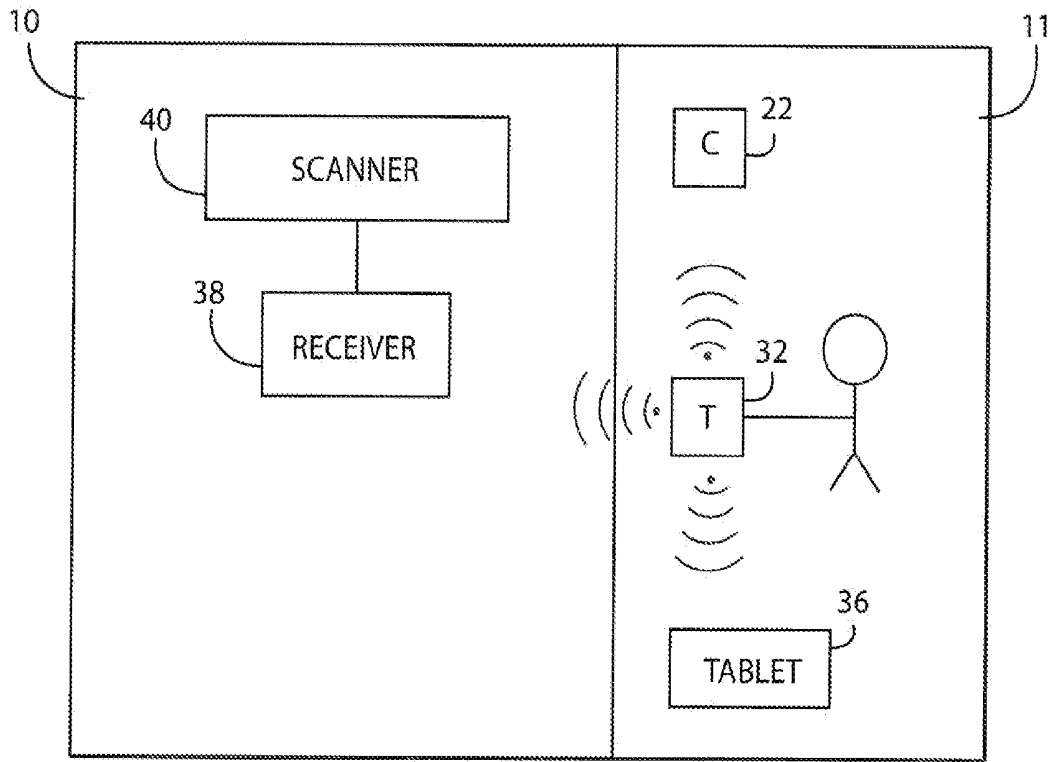


FIG. 7

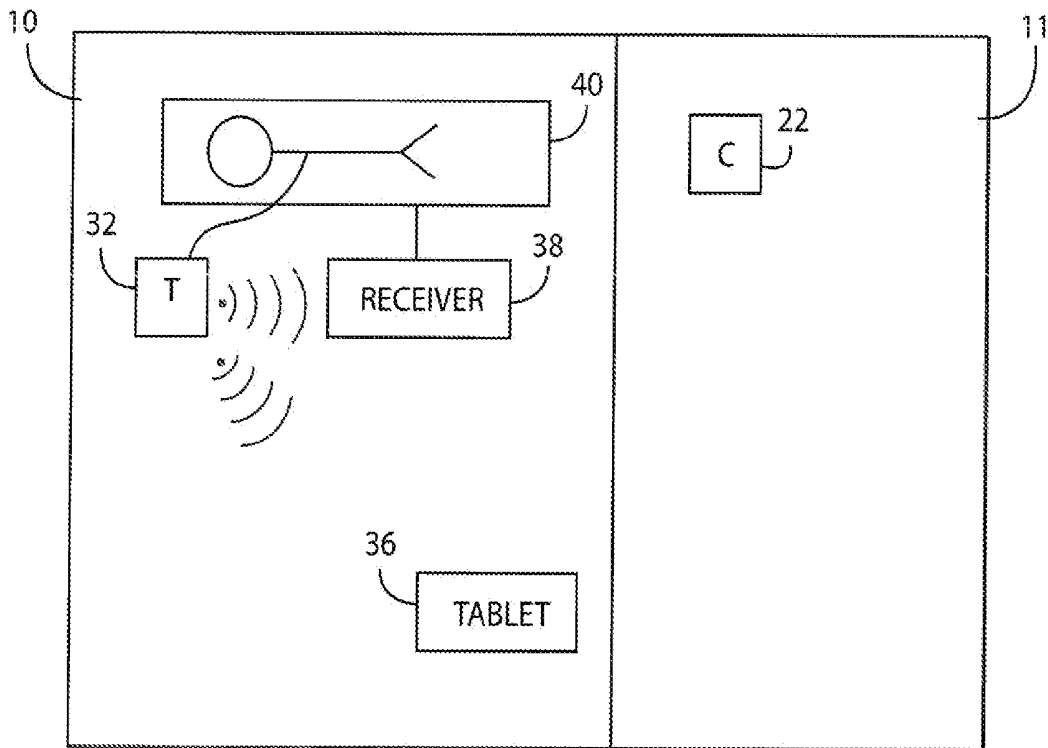


FIG. 8

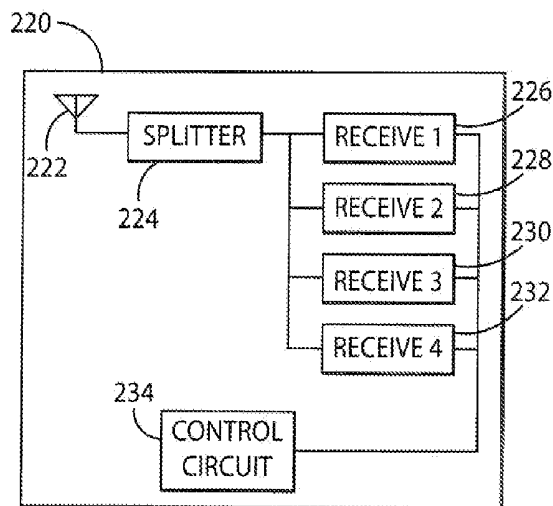
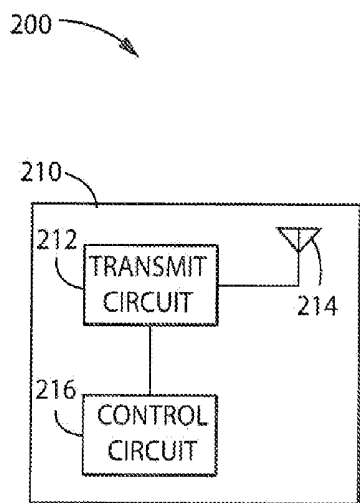


FIG. 9

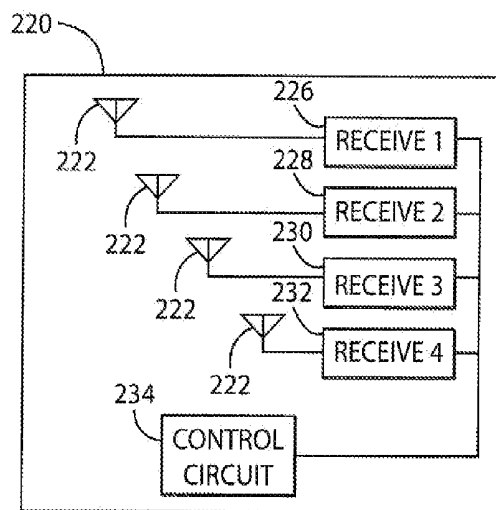
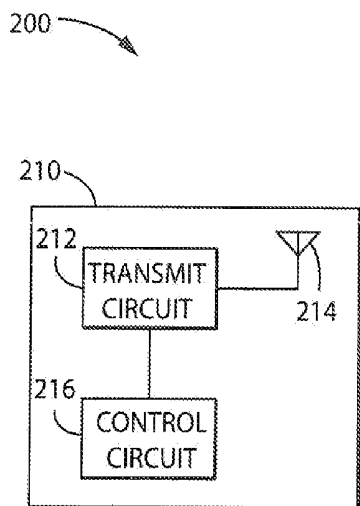


FIG. 10

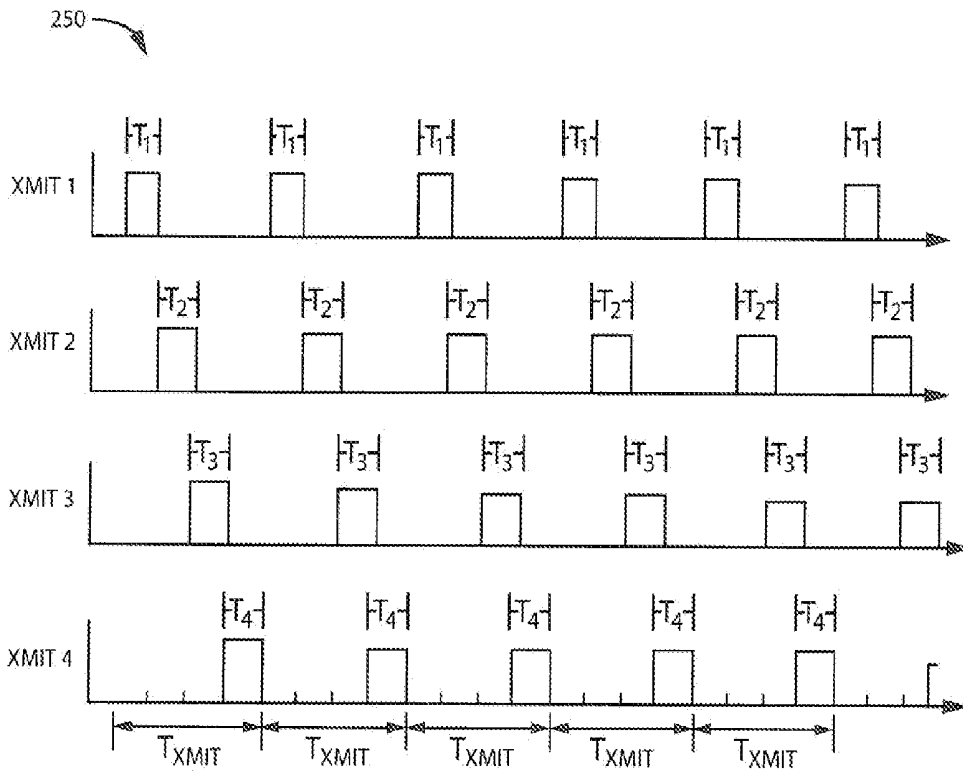


FIG. 11

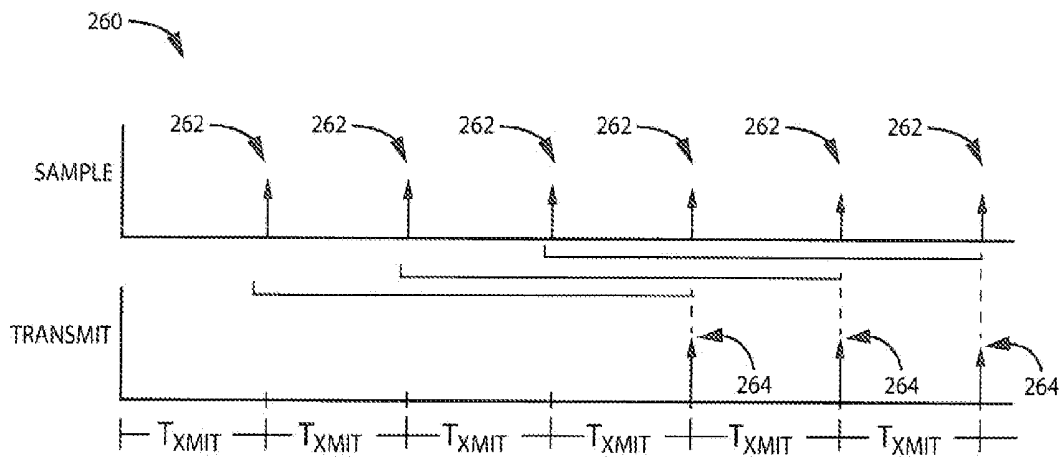


FIG. 12

WIRELESS PHYSIOLOGICAL DATA ACQUISITION SYSTEM

CROSS-REFERENCE TO RELATED APPLICATIONS

[0001] This application claims priority to U.S. provisional application Ser. No. 62/025,171, filed Jul. 16, 2014, the entire contents of which is incorporated herein by reference.

BACKGROUND OF THE INVENTION

[0002] The subject matter disclosed herein relates to a system for magnetic resonance imaging (MRI) and computed tomography (CT) compatible wireless physiological gated imaging. More specifically, a system for obtaining physiological data of a patient, generating trigger signals for the MRI or CT scanner, and wirelessly communicating the physiological data and/or trigger signals in the MRI or CT environment is disclosed.

[0003] As is known to those skilled in the art, a magnetic resonance imaging (MRI) system alternately generates a strong magnetic field and then detects the faint nuclear magnetic resonance (NMR) signals given off by nuclei in the presence of the magnetic field. The NMR signals are received by antennas, also known as coils, and transmitted to the MRI scanner for reconstruction into an MRI image. In order to provide a clear image, it is desirable to minimize interference associated not only with external artifacts, such as electromagnetic interference, but also with motion artifacts, such as voluntary or physiologic motion.

[0004] As is also known to those skilled in the art, a computed tomography (CT) system takes a series of x-ray views of the desired object and reconstructs them to create cross-sectional images of the object. Many times, the tomographic slices may be combined to create 3-D images. A CT system relies upon x-ray particles being sent through the body and then detecting the amount of absorption or scattering of those particles to construct a representative image of the object based upon the density or other physical properties of the object or structure. Similar to an MRI scanner, a number of different artifacts may produce unwanted interference during a CT scan, such as motion artifact related to voluntary or physiologic motion.

[0005] Specifically, with respect to motion artifacts, MRI and CT imaging is complicated by the periodic motion of a patient, such as respiratory or cardiac motion. Cardiac motion includes, for example, motion of the heart and blood flow through blood vessels. In order to compensate for cardiac motion, segmented acquisition processes will divide the cardiac cycle into segments and acquire images over several heartbeats, at comparable points in the cardiac cycle. Thus, it is desirable to synchronize imaging with the periodic motion of the heart so that imaging can be acquired at specific desirable points within the cardiac cycle. Not only does this method help to reduce motion artifacts but it may also be used to acquire images at specific cardiac phases of the cardiac cycle as desired.

[0006] One method of image synchronization is performed by trigger monitoring. Trigger monitoring may be accomplished by acquiring a patient's electrocardiogram (ECG). ECG is most commonly recorded by attaching electrodes to the surface of the skin, whereby the electrodes pick up electrical impulses generated by the polarization and depolarization of cardiac tissue and translates them into a waveform.

The waveform is used to detect the patient's QRS complex in real-time and "triggering" image acquisition based upon the detection of a reference point in the physiological signal, such as an R-wave location. A trigger delay may be implemented to delay image acquisition keyed off from the reference point to a later phase, such as diastole of the heart.

[0007] An alternative to detecting an ECG signal for trigger monitoring based on, e.g., the R-wave, is the approximation of a patient's cardiac phase by performing peripheral pulse oximetry using, e.g., photoplethmography. Using this method, a patient's peripheral pulse is used to approximate diastole and systole. For example, images acquired immediately after the peak in the peripheral pulse wave are assigned to diastole. However, due to the delays in pressure wave propagation, use of peripheral pulse are typically not as accurate as using ECG signals for synchronizing a cardiac signal.

[0008] MRI and CT imaging is also complicated by respiratory motion which may also be a significant factor in causing motion artifacts. While breath-holding and signal averaging have been commonly practiced techniques, they are not always practical or effective for minimizing interference. Therefore, a similar synchronization process may be used to synchronize imaging with a patient's breathing by acquiring respiratory signals from the patient and using the patient's breathing waveform to trigger image acquisition during the patient's quiet phase. For example, the operator may trigger image acquisition during the inspiration slope, the expiration slope, or both. Moreover, a breathing waveform may be used to inform the operator of a patient's state during scanning, such as whether they are conscious.

[0009] The three physiological parameters described above: (1) ECG; (2) peripheral pulse (PP), and (3) respiratory (RESP) signals have been commonly used individually or in combination, to perform trigger monitoring. Currently existing cardiac triggering monitoring systems generally receive the physiological input data from ECG, PP and RESP methods and send trigger signals to the scanner for eliciting image acquisition during particular image acquisition windows. However, the existing methods use wired connections between the host scanner and the physiological sensors. Also, existing systems are generally inflexible with respect to interchanging the hardware for MRI and CT because of the separate cords and data formats specific to each type of application.

[0010] Thus, it would be desirable to provide an improved physiological data acquisition system to obtain and transmit physiologic waveform data wirelessly and to generate and deliver trigger signals to the host scanner. Also, it is desirable that the system be interchangeable between MRI and CT applications and be able to detect with which application it is being used.

BRIEF DESCRIPTION OF THE INVENTION

[0011] The subject matter disclosed herein describes an MRI and CT compatible physiological data acquisition system. According to one embodiment of the invention, the physiological data acquisition system includes an acquisition module configured to receive signals from physiologic sensors attached to the patient and a transmitter configured to wirelessly communicate with a receiver module. The acquisition module includes a processor operable to generate waveform data and trigger data based upon the acquired physiologic data and transmit the data to the receiver module. The receiver module is configurable to be attached to the

either an MRI or a CT scanner. The receiver module then is able to deliver a trigger signal to the host scanner for imaging the patient during a selected time frame based upon the patient's cardiac cycle, peripheral pulse, respiratory cycle, or any combination thereof.

[0012] The physiological data acquisition system is configurable to transmit and/or receive data between physiological sensors, a physiologic transmitter, a physiologic receiver, a portable tablet or another computer, and a MRI scanner or CT scanner.

[0013] It is an objective of the present invention to provide a wireless physiological monitoring system that sends physiologic waveform and trigger data to diagnostic imaging scanners.

[0014] It is also an objective of the present invention to use a single physiologic transmitter for both MRI and CT triggering applications. Since many clinical sites run multiple scanners, a single transmitter can be used in conjunction with multiple physiologic receivers.

[0015] It is a further objective of the present invention to provide a wireless communication system which allows for low latency, low jitter, and high reliability in the transmission of a trigger signal.

[0016] According to one embodiment of the invention, a trigger monitor system includes a transmitter and a receiver. The transmitter includes at least one input operable to receive a data signal corresponding to a physiological parameter from a patient and a processor operable to receive the data signal from each input. The physiological parameter inputs may be selected from electrocardiography (ECG) data, peripheral pulse data, and respiratory cycle data. The processor is also operable to generate a filtered data signal from each data signal and/or a trigger signal as a function of the data signals or the filtered data signals. The transmitter also includes a transmit circuit operable to transmit the data signals, the filtered data signals, and/or the trigger signal. The receiver includes a receive circuit operable to receive the transmitted signal from the transmitter and a processor in communication with the receive circuit to receive the transmitted signal. When the transmitted signal is the trigger signal, the processor is in communication with a host scanner to transmit the trigger signal to the host scanner to initiate image acquisition of the patient.

[0017] According to another aspect of the invention, the trigger monitor system may include an external computer or a portable tablet operable to receive each of the signals from the transmitter and to show the received signal on a display. The host scanner may be either a magnetic resonance imaging (MRI) scanner or a computed tomography (CT) scanner, and the receiver may be operable to detect the type of host scanner to which it is connected.

[0018] According to yet another aspect of the invention, the transmitter or receiver may be configured to process the physiological parameter data signal. The processor of either the transmitter or the receiver may be operable to process the data signal to produce at least one of a pulse rate, a respiratory rate, a heart rate, a PPG waveform, and an ECG waveform. Optionally, the transmitted signal may be either the data signal or the filtered data signal and the processor in the receiver is operable to generate the trigger signal as a function of the transmitted signal.

[0019] According to still another aspect of the invention, the transmitter provides an indicator when the physiological parameter input is not communicating properly. The trans-

mitter may also include a first set of indicators providing a graphical representation of the placement of leads on a torso of the patient during an MRI scan and/or a second set of indicators providing a graphical representation of the placement of leads on the torso of the patient during a CT scan. Each of the first and second set of visual indicators indicates whether the lead is properly connected to the patient.

[0020] According to yet another aspect of the invention, the transmitter further comprises a rechargeable battery and a power source input. The power source can only be attached to the power source input when an ECG data input is disabled.

[0021] According to still another aspect of the invention, the transmit circuit is operable to transmit the data signal, the filtered data signal, or the trigger signal in a data packet. The transmit circuit transmits the data packet using at least two frequencies, and the receiver receives the data packet at each frequency. The processor in the receiver extracts the transmitted signal from each data packet. The transmitter may store at least two values of the data signal, filtered data signal, or trigger signal to be transmitted in a memory device on a first-in-first-out basis and include the stored values in the data packet.

[0022] According to another embodiment of the invention, a monitor system for use with either a magnetic resonance imaging (MRI) scanner or a computed tomography (CT) scanner is disclosed. The monitor system includes a transmitter and receiver, where the transmitter includes at least one input operable to receive a data signal corresponding to a physiological parameter from a patient, a processor operable to receive the data signal from each input, and a transmit circuit operable to transmit each data signal. The receiver is in communication with the transmitter and in communication with the MRI or CT scanner, and the receiver includes a receive circuit operable to receive the data signal from the transmitter, and a processor in communication with the receive circuit to receive the data signal and operable to detect whether the receiver is connected to the MRI scanner or the CT scanner.

[0023] According to another aspect of the invention, a lead is placed on the patient to detect the physiological parameter and to generate the data signal corresponding to the physiological parameter, and the processor in the transmitter is operable to detect whether the lead is properly connected to the patient. The transmitter may include a first set of indicators providing a graphical representation of the placement of leads on a torso of the patient during an MRI scan and may further include a second set of indicators providing a graphical representation of the placement of leads on the torso of the patient during a CT scan. Each of the first and second set of visual indicators may indicate whether the lead is properly connected to the patient.

[0024] According to still another aspect of the invention, the processor of either the transmitter or the receiver is operable to generate a filtered data signal from each data signal and/or a trigger signal, where the trigger signal is a function of either the data signals or the filtered data signals. The processor of the receiver is in communication with the MRI or CT scanner to transmit the trigger signal to the MRI or CT scanner to initiate image acquisition of the patient.

[0025] According to still another embodiment of the invention, a method of initiating image acquisition on a host scanner from a physiological data acquisition system is disclosed. At least one sensor is connected to a patient, and a data signal is received from the sensor at a transmitter, where the signal

corresponds to a physiological parameter of the patient. Either a filtered data signal or a trigger signal is generated from the data signal in a processor of the transmitter. The transmitter transmits at least one of the data signal, the filtered signal, and the trigger signal from the transmitter as a transmitted signal. A receiver in communication with the transmitter receives the transmitted signal. When the transmitted signal is a trigger signal, the receiver transmits the trigger signal from the receiver to a host scanner to initiate image acquisition on the host scanner.

[0026] According to still another aspect of the invention, the transmitter includes a set of indicators providing a graphical representation of multiple locations at which a lead for each sensor is to be placed on a torso of the patient during an imaging scan. The step of connecting the at least one sensor to the patient includes placing each sensor on the torso of the patient in one of the locations, and verifying that each indicator from the set of indicators shows that the sensor is placed correctly and operating normally. The host scanner may be either an MRI scanner or a CT scanner. The transmitter may include a first set of indicators providing a graphical representation of the locations at which a lead for each sensor is to be placed on a torso of the patient during an MRI scan and a second set of indicators providing a graphical representation of a plurality of locations at which a lead for each sensor is to be placed on a torso of the patient during a CT scan. The physiological data acquisition system may automatically identify whether it is connected to an MRI scanner or a CT scanner. The first set of indicators is used to place each sensor when the physiological data acquisition system is connected to the MRI scanner, and the second set of indicators is used to place each sensor when the physiological data acquisition system is connected to the CT scanner.

[0027] These and other objects, advantages, and features of the invention will become apparent to those skilled in the art from the detailed description and the accompanying drawings. It should be understood, however, that the detailed description and accompanying drawings, while indicating preferred embodiments of the present invention, are given by way of illustration and not of limitation. Many changes and modifications may be made within the scope of the present invention without departing from the spirit thereof, and the invention includes all such modifications.

BRIEF DESCRIPTION OF THE DRAWING(S)

[0028] Various exemplary embodiments of the subject matter disclosed herein are illustrated in the accompanying drawings in which like reference numerals represent like parts throughout, and in which:

[0029] FIG. 1 is an exemplary embodiment of an existing MRI scan room;

[0030] FIG. 2 is a block diagram representation of one embodiment of a trigger monitor system according to the present invention;

[0031] FIG. 3 is a block diagram representation of the transmitter of FIG. 2;

[0032] FIG. 4 is a schematic representation of the transmitter interface of FIG. 2;

[0033] FIG. 5 is a schematic representation of the tablet interface of FIG. 2;

[0034] FIG. 6 is a schematic representation of the receiver interface of FIG. 2;

[0035] FIG. 7 is an exemplary embodiment of the MRI scan room of FIG. 1, incorporating the trigger monitor system

according to one embodiment of the present invention, and showing the patient exterior to the scan room;

[0036] FIG. 8 is an exemplary embodiment of the MRI scan room of FIG. 1, incorporating the trigger monitor system according to one embodiment of the present invention, and showing the patient in the interior of the scan room;

[0037] FIG. 9 is a block diagram representation of a wireless communication system providing communications between a transmitter and a receiver according to one embodiment of the present invention;

[0038] FIG. 10 is a block diagram representation of a wireless communication system providing communications between a transmitter and a receiver according to another embodiment of the present invention;

[0039] FIG. 11 is a graphical representation of an exemplary transmission schedule for the communication system; and

[0040] FIG. 12 is a graphical representation of exemplary data sampling and transmission for the communication system.

[0041] In describing the preferred embodiments of the invention which are illustrated in the drawings, specific terminology will be resorted to for the sake of clarity. However, it is not intended that the invention be limited to the specific terms so selected and it is understood that each specific term includes all technical equivalents which operate in a similar manner to accomplish a similar purpose. For example, the word "connected," "attached," or terms similar thereto are often used. They are not limited to direct connection but include connection through other elements and/or wireless connection where such connection is recognized as being equivalent by those skilled in the art.

DETAILED DESCRIPTION OF THE PREFERRED EMBODIMENTS

[0042] The various features and advantageous details of the subject matter disclosed herein are explained more fully with reference to the non-limiting embodiments described in detail in the following description.

Trigger Monitor System

[0043] According to one embodiment of the present invention, a trigger monitor system, which interfaces with MRI and CT scanners, for use on patients requiring image acquisition synchronization is disclosed. The trigger monitor system may be implemented in a MRI environment as shown in FIG. 1. Alternatively, the present invention may be implemented in a CT environment as understood in the art. The CT environment is similar to the MRI environment with a CT scanner replacing the MRI scanner. Similar problems of interference and motion artifact exist in both environments. The present invention allows the same trigger monitoring system to be used in either environment, regardless of the type of host scanner being used.

[0044] Referring to FIG. 1, an exemplary shielded room 10 containing an MRI scanner 12 is illustrated. The scan room 10 includes walls 13, or panels, which typically incorporate RF shielding within the wall 13. A window 15 permits an operator to observe activity within the scan room 10 from an adjacent control room 11, typically connected via a door 17. The door 17 may similarly incorporate RF shielding within the solid portion of the door. The window 15 between the scan room 10 and the control room 11 and, if present, a window in

the door 17 are covered in a conductive material such as a fine wire mesh or a thin metallic foil made, for example, from copper or gold to provide RF shielding on the window. The shielding is configured to prevent external RF signals that are in a spectrum that may interfere with the MRI scanner 12 from entering the scan room 10 and causing said interference.

[0045] A controller 20 for the MRI scanner 12 is typically located in the adjacent control room 11. An operator interface including, for example, a monitor 22 or other display unit and an input device such as a keyboard 24 are connected to the controller 20. The controller 20 may be connected to the MRI scanner 12 by cabling extending, for example, under the floor of the scan room 10 or in a shielded conduit to the MRI scanner 12. A penetration panel 23 in the wall may also provide connections to cables 21 running from the controller 20 into the scan room 10. The penetration panel 23 may include connectors for cabling to other medical equipment present in the scan room 10. Corresponding connectors on the other side of the penetration panel 23 within the scan room 10 permit appropriately shielded cables to be connected and run to the scanner 12 or to other medical equipment. A table 16 supports the patient being scanned and typically includes a sliding platform 19 allowing the patient to be moved into and out of the bore 14 of the MRI scanner 12.

[0046] Referring next to FIG. 2, one embodiment of a trigger monitor system 30 is shown as a block diagram. The trigger monitor system 30 is compatible with MRI and CT scanners and can communicate wirelessly with a MRI or CT scanner to deliver a trigger signal 42. The trigger monitor system 30 contemplates a physiological acquisition device or physiologic transmitter 32, which receives physiological signals 34 from a number of sensors placed on a patient's body. It is contemplated that the physiologic transmitter 32 may convert the raw physiologic signals directly to a RF signal for transmission or first perform processing of the physiologic signal 34 to generate a filtered waveform 33 representing the measured signal. It is further contemplated that the physiologic transmitter 32 may perform further processing on either the raw data 34 or the filtered waveform 33 to generate a trigger signal 42 for the host scanner 40. The physiologic transmitter 32 may then wirelessly transmit the raw physiologic signal 34, the filtered waveform 33, the trigger signal 42, or a combination thereof to an external computer display, e.g., a computer monitor 22 located in the scan room 10 or in the control room 11, or a portable device such as a tablet 36, so that an operator may view the waveform data during operation.

[0047] The physiologic receiver 38 receives the data from the physiologic transmitter 32 and sends the data to the host scanner 40. A display 48 connected to the scanner 40 may provide a visual indication of the raw physiologic signal 34, the filtered waveform 33, the trigger signal 42, or a combination thereof. It is contemplated that the receiver 38 may transmit just raw physiologic signals 34 to the scanner 40 and the scanner 40 may perform further processing on the data. Optionally, the scanner 40 may be configured to receive the filtered waveform 33 and/or the trigger signal 42 and to perform further processing or to capture image data responsive to any of the data transmitted from the receiver 38. Thus, the scanner 40 may either process the raw physiologic signal 34 or the filtered waveform 33 data to generate a gating signal or utilize the gating signal 42 from the transmitter 32 for image triggering. The host scanner 40, which may be either an MRI or CT scanner, may also display the trigger signal 42 on the

scanner display 48 to provide a visual indication to the operator of when imaging occurs. If the physiologic transmitter 32 generates and sends a trigger signal to the physiologic receiver 38, the physiologic receiver 38 may pass the trigger signal directly to the host scanner 40.

[0048] According to another embodiment of the invention, the physiologic receiver 38 may be configured to perform processing on the raw data 34 or the filtered waveform 33 received from the physiologic transmitter 32 to generate a trigger signal 42. The physiologic receiver 38 may perform further processing to format the trigger signal 42 and/or encapsulate the trigger signal in a message packet suitable for transmission to the host scanner 40 to which the physiologic receiver 38 is connected. The trigger monitor system 30 described herein allows the host scanner 40 to synchronize image acquisition responsive to the trigger signal, which may be required to eliminate motion artifacts and/or to obtain images at specific intervals within the cardiac or respiratory cycles.

[0049] According to the illustrated embodiment of the invention, the physiologic transmitter 32 of the trigger monitoring system 30 performs the function of interpreting physiological signals 34 that it receives and turning it into waveform data. The physiologic transmitter 32 acquires physiological signals 34 from the patient as commonly known in the art. The transmitter processor or CPU 44 may receive raw data for certain body vital sign parameters, e.g., electrocardiogram (ECG) 50, peripheral pulse (PP) 52, and respiratory rate (RESP) 54. For each parameter, physiologic sensors or physiological acquisition devices unique to each parameter are used. Each of the physiologic sensors or devices will be described in greater detail below. The physiologic sensors, e.g., electrodes, are attached to the patient's body at various detection locations. Connectable leads or electrical connectors couple the physiologic sensors to the physiologic transmitter 32 via ports located on the physiological transmitter module.

[0050] According to one aspect of the present invention, ECG data 50 is collected from the patient. In collecting ECG data 50 from a patient, a number of surface electrodes are placed on the patient's chest at particular locations. For example, for MRI applications, a first electrode is placed at a first intercostal space, just left of the sternum. A second electrode is positioned at the level of the xyphoid, just left of the sternum. A third electrode is positioned on the patient's left side, horizontally aligned with the second electrode, and a fourth electrode is placed close to the left armpit. For CT applications, the electrodes may be configured in a box configuration around the torso. Each electrode is proximate to a limb of the patient where, for example, a first electrode is positioned at the right shoulder proximate the right arm, a second electrode is positioned at the left shoulder proximate the left arm, a third electrode is positioned at the left hip proximate the left leg, and a fourth electrode is positioned at the right hip proximate the right leg. The electrodes are connected to leads, often facilitated by conducting alligator clips, which deliver electrical activity information to the physiologic transmitter 32.

[0051] Due to differences in imaging physics, the electrode placement used for ECG may differ between MRI and CT, as described above. Different types of electrodes and/or leads may also be required for different types of scanners. The physiologic transmitter 32 according to the illustrated embodiment is able to detect the difference between the elec-

trodes/leads attached to it and differentiates between MRI and CT. Depending on the particular scanner **40** that is being used, MRI or CT, the physiologic transmitter **32** can select the correct format and type of data to interpret and transmit. The physiologic transmitter **32** can also instruct the operator to place the ECG leads on the appropriate thoracic locations specific to MRI or CT, as visualized on the physiologic transmitter interface **62** and further described below.

[0052] According to another aspect of the present invention, peripheral pulse data **52** is collected from the patient. To collect peripheral pulse data **52**, photoplethysmography may be used whereby pulses in the blood radiating to the periphery of the patient after each heartbeat can be detected. Pulses may be detected by using a photoplethysmograph connected to the patient's finger. The photoplethysmograph passes light at a desired wavelength, such as infrared (IR) or in the red spectrum, through the patient's finger to a photodetector. The light absorbance changes during a cardiac cycle and, therefore, the amount of light reflected and/or absorbed is measured, allowing determination of the absorbances due to the pulsing arterial blood. Photoplethysmography can also be connected on the patient's forehead in a similar matter but measuring the reflection of the light. Peripheral pulses **52** can alternatively be acquired by placing sensors at a patient's neck, wrist, foot, etc.

[0053] According to yet another aspect of the present invention, respiratory rate data **54** is collected from the patient. When collecting a patient's respiratory rhythm **54**, a respiratory bellow or sensor pillow may be placed on a patient's chest or stomach region for recording their respiratory cycle. The sensor pillow is secured to the patient such that expansion and contraction of the chest or abdominal region during a respiratory cycle causes compression and decompression of the sensor pillow. The sensor pillow generates a signal corresponding to the compression and decompression and transmits the signal to the physiologic transmitter **32**. The breathing cycle may be monitored to minimize breathing interference or allow the operator to assess the patient's level of consciousness during a scan. Optionally, the respiratory cycle may be monitored via the ECG electrodes by monitoring impedance changes across the chest between ECG electrodes. During the respiratory cycle, the rising and falling motion of the chest results in a varying impedance between electrodes.

[0054] In MRI and CT applications, the physiologic transmitter **32** can support three physiological parameters simultaneously, two physiological parameters simultaneously, or any one physiological parameter individually. It is understood that MRI and CT may require different sets of parameters; however, some or all of the parameters may be used for each scan application. For example, MRI scanning may utilize all three parameters, while CT scanning typically only utilizes the ECG data. It is understood that more than three physiological parameters may also be utilized while still remaining within the scope of the invention described herein. Each physiologic sensor may be connected and transmit a physiologic signal **34** to the physiologic transmitter **32** via a wired or wireless connection.

[0055] Referring now to FIG. **3**, the physiologic transmitter **32** includes a processor or CPU **44** that is able to receive and interpret the physiologic parameter signals **34** received from the sensors, as described above. A series of instructions, or a program, is stored on a memory device **45** on the physiologic transmitter **32**. The memory device **45** may be a single device

or multiple devices and may include persistent memory, non-persistent memory, or a combination thereof. Optionally, a portion or all of the memory device **45** may be integrated on a single device with the processor **44**. The processor **44** will execute the stored application to take the raw sampled physiological signals **34** and use a filtering process **35** to eliminate interference found in the signals **34** to create a waveform image. For example, filtering is used to remove noise existing in the waveform image. The filter used may be selected according to each specific waveform, i.e., ECG, PP, or RESP waveforms. The processor **44** will create a filtered waveform, e.g., a cardiac waveform, a peripheral pulse waveform, or a respiratory waveform, which is transmitted to a receiver or he further processed for gating analysis.

[0056] The processor **44** will further execute a stored application to perform trigger or gating analysis **37** on the filtered waveform. This analysis produces a gating signal **42** used to coordinate timing between data acquisition from the MRI or CT scanner **40** and receiving and recording the data for generation of an MRI or CT image. According to one embodiment of the invention, the gating signal is generated by the processor **44** as a function of the physiological data received to coordinate imaging, for example, with the heart beat or respiration of the patient. Gating may be performed using R-wave detection followed by gating methods, such as amplitude or vector gating. In the process of performing gating analysis **37** the processor **44** may compute peak levels for each parameter. The processor **44** will also create heart rate data to be provided to the operator.

[0057] The processor **44** sends the waveform, peak information, and heart rate data to the radio **46** of the physiologic transmitter **32** for wireless transmission. The physiologic transmitter radio **46** then transmits this information wirelessly to a physiologic receiver **38** and/or portable tablet **36** or external computer monitor **22**, which may be done via Bluetooth, WiFi, or another form of wireless protocol, which will be further described herein. The processor **44** performs the function of controlling transmission of the radio **46**. Transmission between the physiologic transmitter **32** and receivers **38** are typically one-way but it is contemplated that data may be exchanged in both directions.

[0058] Referring next to FIGS. **2** and **4**, the physiologic sensors may be connected to the physiologic transmitter **32** using leads **56** and electrical connectors **57**. Optionally, the physiologic sensors may transmit data wirelessly to the physiologic transmitter **32**. The physiologic transmitter **32** has separate ports **59** for receiving the electrical connectors **57** for, e.g., ECG, PP, and RESP signals **34**. The physiologic transmitter **32** may include an integrated rechargeable battery **47** for supporting at least a day's use before recharging. The physiologic transmitter **32** is recharged by connecting a charger **60** to the transmitter **32**. The charger **60** may itself include a battery from which it supplies power to the transmitter **32** or the charger **60** may be configured to connect to a utility power source. The charger **60** is configured to convert the voltage from a first level, such as a 120 VAC utility supply, to a second level, such as 5 or 12 VDC, suitable for charging the battery **47** in the physiologic transmitter **32**. To enhance patient safety a connector **58** from the charger **60** may be configured to be inserted into the same port **59** as the ECG connector **57** and power is delivered to the rechargeable battery **47** via this port **59**. Thus, the rechargeable battery **47** may only be recharged by the recharger **60** by removing the ECG connector **56** from the physiologic transmitter **32** and insert-

ing the connector **58** for the recharger **60** in its place, allowing only one to be inserted one at a time. By doing so, the system ensures that the patient is never connected to the physiologic transmitter **32** at the same time that the physiologic transmitter **32** is attached to an electrical power source.

[0059] The physiologic transmitter interface **62** may include a number of visual displays for relaying information to the operator and enhancing operation. In one embodiment of the present invention, the physiologic transmitter **32** has an interface **62** which may include an on/off button **64** for powering the module “on” when desired and powering the module “off” when not in use and in order to conserve the battery life. A digital display **66**, such as a LCD display, may display the heart rate of the patient, which may be determined by, e.g., the ECG or peripheral pulse data. Optionally, device status and/or information for the technologist may be displayed. The physiologic transmitter **32** may also include a selection button or buttons, which may be pressed to select each waveform or a combination of waveforms to be sent to the physiologic receiver **38** or to be used to determine the trigger signal **42**. The selected waveform may be identified, for example, on the digital display **66**, by one or more LEDs located on the physiologic transmitter **32**, or by any other suitable visual indicator.

[0060] The physiologic transmitter interface **62** may include a number of indicator lights, which may be in a first lit state or a second unlit state to relay information or provide alerts to the operator. A first indicator light may be a wireless indicator light **68** that becomes lit to indicate that wireless communication is functioning. The wireless indicator light **68** may include multiple “bars” **69**, where a varying number of the bars **69** are illuminated to indicate the strength of a wireless connection between the transmitter **32** and another device. Optionally, the wireless indicator light may also display a different color light to indicate varying strength of the wireless connection. It is contemplated that the wireless communication may be, e.g., WiFi, Bluetooth, a proprietary protocol, as will be further discussed herein, or a combination thereof. The physiologic transmitter **32** may, for example, be configured to communicate with a tablet computer **36** via a WiFi connection and with the physiologic receiver **38** via the proprietary protocol. Another indicator light may be a battery indicator light **70** indicating that the device is fully charged. The battery indicator light **70** may also display a different color light to indicate that battery power is low or a blinking feature to indicate low battery life remaining. Another indicator light may be a charge notification light **72**, which may become lit to indicate that the battery is currently being charged. The charge notification symbol **72** may be an icon in the shape of a plug or lightning strike. Another indicator light may be a heart rate indicator **74**. If the indicator light **74** is lit, it is an indication that all leads **56** of an ECG are receiving data and a heart rate can be properly displayed from the ECG data. If the indicator light **74** is off, it is an indication that a lead(s) **56** has fallen off and/or ECG data is not being properly gathered. The heart rate indicator **74** may be in the form of a heart shaped icon. The transmitter **32** may also generate and transmit a message containing data corresponding to its operating status, such as the battery life and lead connection/operation status. The message may be transmitted either via a standard wireless protocol or via the proprietary protocol to another device in communication with the transmitter **32**.

[0061] The physiologic transmitter interface **62** may also include a representation of a patient’s torso **76** with a number of position indicator lights **78**, **80** representative of the posi-

tioning of the surface electrodes on the patient’s torso. Further, a first set of position indicator lights **78** may represent the positioning of the surface electrodes on the patient’s torso during an MRI scan and a second set of position indicator lights **80** may represent the positioning of the surface electrodes on the patient’s torso during a CT scan. Each set of leads **56** may require different characteristics. For example, the positioning of the leads **56** may require different lead lengths or the operating environment of an MRI scanner may have different shielding requirements for the leads **56** than for a CT scanner. The leads **56**, therefore, may include an identifier incorporated, for example, in the electrical connector **57** for the lead **56**. The identifier may be, for example, a set of jumpers corresponding to a bit pattern, an identification resistor having a different value for different lead sets, or any other suitable method of identifying the lead set. The physiologic transmitter **32** may be configured to detect the identifier and determine whether the set of leads is to be used for an MRI scan or a CT scan. Optionally, a single set of leads suitable for both an MRI scan and a CT scan may be provided. The physiologic transmitter **32** may receive a signal transmitted from the physiologic receiver **38** indicating whether the leads are to be configured for an MRI scan or a CT scan, where the physiologic receiver **38** has detected the type of scanner from a cable **100** connected between the physiologic receiver **38** and the host scanner **40** as discussed in more detail below. If, for example, the leads are to be used for an MRI scan, the interface will light the first set of position indicator lights **78** corresponding with the correct positioning for MRI. If the lead set is to be used for a CT scan, the interface will light the second set of position indicator lights **80** corresponding with the proper positioning for CT.

[0062] It is further contemplated that a different set of leads may be used for pediatric and adult imaging, and separate identifiers may be used for the pediatric and adult heads. In addition to detecting the type of scanner to which it will be connected, the physiologic transmitter **32** may detect if pediatric or adult imaging is to be performed. The physiologic transmitter **32** may include different filtering or gating algorithms based on whether pediatric or adult imaging is to be performed and execute the corresponding algorithm according to the detected identifier.

[0063] The position indicators **78**, **80** may further indicate whether the leads are properly connected to the patient. The position indicators **78**, **80** may be configured to operate in a first state and a second state. For example, the first state may be displaying a first color while the second state may be displaying a second color. Optionally, the first state may be a blinking light while the second state may be a solid light. In both the first and the second states, the position indicators **78**, **80** function to provide an indication of the proper positioning of the leads on the patient’s torso. In the first state, the position indicators **78**, **80** will indicate that each of the leads are properly connected to the electrodes and in communication with the physiologic transmitter **32**. In the second state, the position indicators **78**, **80** will identify each lead not properly connected to the electrode or not in communication with the physiologic transmitter **32**, for example, if a conductor within the lead fails. According to the illustrated embodiment, the position indicators **78**, **80** will light in a first color, such as green, to show that each lead of the ECG cable is properly attached and that transmitter **32** is receiving electrical signals from each of the electrodes of the ECG. The position indicators **78**, **80** will light in a second color, such as red, if the

corresponding electrode has become detached or the lead has failed, alerting the operator of a problem with the lead set. It is further contemplated that the transmitter 32 may generate a data message to be transmitted to the receiver 38 providing the status of the leads connected to the patient.

[0064] Referring next to FIGS. 2 and 5, the trigger monitoring system 30 may include a tablet computer 36 incorporating a wireless communication module. As described above, data may be transmitted wirelessly to a receiver of a portable device, such as tablet 36 or another external computer monitor 22. Bluetooth or WiFi may be used for communication to a tablet computer 36 because of the compatibility with existing protocols on the tablet computer 36, but any form of wireless transmission may be used. The transmitter 32 may utilize a separate antenna for transmitting to the tablet computer 36.

[0065] The processor 49 of the tablet computer 36 executes a stored application to receive and/or transmit data via the wireless communication module and provide a visual representation of the data on a display 90 of the tablet computer 36. According to one embodiment of the invention, the wireless communication module is configured to communicate an appropriate communication standard, such as Bluetooth. Optionally, the wireless communication module may utilize any suitable communication protocol. Data is received by an antenna 92 connected to and typically integrated with the wireless communication module.

[0066] According to application requirements, the tablet 36 may store the data on a memory device 94 and/or provide a visual representation of the data on a display 90. The memory device 94 may be volatile or non-volatile. Optionally, the tablet 36 may be removed from the scan room 10 and taken to a remote location where the stored data may be transmitted to another device, such as another computer, a monitor or other display device or a printer.

[0067] The data displayed on the tablet 36 or another computer may, for example, correspond to the data measured by the physiologic transmitter 32. The physiologic waveforms, peak information, raw physiologic data, gating trigger, or a combination thereof may be displayed on the tablet display 90 in order for the operator to make a qualitative assessment of the patient condition while undergoing the exam. When a tablet 36 or computer receives data from the physiologic transmitter 32, the display 90 may show one or more waveforms of the physiologic data, the trigger data, heart rate, pulse rate, or respiratory rate simultaneously on the display 90 and in substantially real time. The tablet 36 is able to display multiple parameters, such as ECG, respiratory waveforms and peripheral pulse waveforms. The display 90 may also show the trigger rate and trigger pulse data 96. The display 90 may also allow the waveforms to change colors to indicate that a lead has become detached, thus alerting the operator.

[0068] Referring again to FIG. 2, the trigger monitoring system 30 includes a physiologic receiver 38 also incorporating a wireless communication module. A series of instructions, or a program, is stored on a memory device 43 on the physiologic receiver 38. The memory device 43 may be a single device or multiple devices and may include persistent memory, non-persistent memory, or a combination thereof. Optionally, a portion or all of the memory device 43 may be integrated on a single device with the processor 44. The physiologic receiver 38 executes the stored application to receive and/or transmit data via the wireless communication

module and send a trigger signal 42 to an attached host scanner 40. According to one embodiment of the invention, the wireless communication module of the physiologic receiver 38 is configured to communicate with the physiologic transmitter 32 via a proprietary protocol discussed in more detail below. Optionally, the wireless communication module may utilize any suitable wireless communication standard. Data is received by an antenna 39, or one of multiple antennas, connected to and typically integrated with the wireless communication module.

[0069] The physiologic receiver 38 is configured to receive the data transmitted by the physiologic transmitter 32. According to application requirements, the physiologic receiver 38 may store the data on the memory device 43. The memory device may be volatile or non-volatile. The manner in which the physiologic receiver 38 uses the information provided from the physiologic transmitter is governed by the physiologic receiver 38 as well as by the preference of the technologist performing the examination.

[0070] Referring next to FIGS. 2 and 6, a processor or CPU 41 of the physiologic receiver 38 receives the data from the physiologic transmitter 32 and processes the data to send a trigger signal 42 to the scanner 40 with which it is attached. The raw data 34, filtered data 33 or a trigger signal 42 may be stored in the memory device 43. The receiver 38 may be configured to create a log of the data which may be transmitted at periodic intervals or in response to a transmit command. The processor 41 may also monitor operation of the receiver and identify error states in the receiver 38. The error states may similarly be stored in the memory device 43 and incorporated into the log data.

[0071] The physiologic receiver 38 connects to the MRI or CT scanner using a cable 100 configured according to the application requirements. For an MRI scanner, a fiber optic cable may be required, and for a CT scanner, a cable with copper or other metal conductors may be required. Further, scanners from different manufacturers may require different configurations of cables 100. Each cable 100 may require certain conductors be connected to certain pins of connectors or may, for example, require a set of conductors configured to transmit data via a network protocol, such as Ethernet. The physiologic receiver 38 may be configured to be used for both MRI and CT applications and for different scanners. Ports 104 on the receiver 38 allow for the connection of both MRI and CT scanner connectors 102. According to the illustrated embodiment, the physiologic receiver 38 includes multiple ports 104 where, for example, one port may be used for MRI scans and a second port may be used for CT scans. Optionally, a single port 104 may be included on the physiologic receiver 38 with internal logic circuits configurable to provide the appropriate signals to the port 104 as a function of the cable 100 connected to the port 104. It is also contemplated that the receiver 38 includes one or more ports, such as a Universal Serial Bus (USB) port, configured to communicate with an external device, for example, to transmit log data for remote processing.

[0072] The physiologic receiver 38 is able to adjust for connection to an MRI scanner or CT scanner by reading an identification module 101 in the cable 100. The identification module 101 may be incorporated, for example, in the electrical connector 102 for the cable 100. The identification module 101 may be, for example, a set of jumpers corresponding to a bit pattern, an identification resistor having a different value for different lead sets, or any other suitable method of

identifying the lead set. The physiologic receiver **38** may be configured to detect the identification module **101** and determine whether the trigger monitoring system **30** is to be used for an MRI scan or a CT scan. Based on the host scanner **40**, the physiologic receiver **38** will adjust the type and format of the data that is communicated. The physiologic receiver **38** may be configured to transmit a signal to the physiologic transmitter **32** to indicate whether the cable **100** connected is configured for an MRI scan or a CT scan such that the physiologic transmitter **32** may activate the appropriate position indicator lights **78, 80**, as discussed above.

[0073] Referring next to FIG. 7, in operation, the trigger monitor system **30** provides trigger monitor communication between devices inside the scan room **10** and external to the scan room, such as in control room **11**. The wireless functionality of the trigger monitor system **30** facilitates operation both during the scan and outside the scan (e.g., pre-scan or post-scan). During the scan, cable management is simplified by eliminating cables extending between the physiologic sensors and a cabled acquisition module. Additionally, power cables and the potential for interfering emissions from the cables are eliminated by utilizing a rechargeable battery in the system **30**. Initial preparation of the patient is also improved by allowing the technician or other medical personnel to arrange the electrodes and leads on the patient outside of the scan room **10**. The patient and the physiologic transmitter **32** may then be moved into the scan room **10** for the scan. Improved visualization of the waveform data during scanning is also realized using, e.g., mobile tablet computers **36**.

[0074] Typically, physiologic sensors must be attached to the patient within the scan room **10**. Because of the wireless functionality of the system, the physiologic transmitter **32** may be installed on the patient outside of the scan room **10**. In this respect, the operator can make sure that the physiological acquisition equipment is functioning before entering the scan room **10**. The physiological acquisition equipment can also be installed on the patient in an examination room, where there is more room and comfort to the patient, as well as reducing the overall time a patient is in the scan room **10**, which, in turn, permits increased utilization of the scanners. When it is shown that the physiological acquisition equipment is functioning properly, the patient can be brought into the scan room **10** or control room **11**.

[0075] The wireless functionality also allows the operator to view the physiologic waveforms sent from the physiologic transmitter **32** on a tablet display **90** or on a computer display **22** from a remote location, such as a location outside of the scan room **10**. The tablet display **90** can also be viewed from within the scan room **10** where the operator can easily move around with the tablet **36** and hold it easily in their hands during set up and scanning of the patient.

[0076] Referring next to FIG. 8, when the patient is being scanned, the physiologic transmitter **32** is conveniently attached to the patient's body while the patient is lying down on the sliding platform **19**. While the patient is being scanned, the operator can continue to view the physiologic waveforms from any location inside or outside the scan room **10**, from the tablet **36**, another computer display **22**, or the scanner display **48**.

[0077] It is contemplated that the trigger monitoring system **30** is conveniently interchangeable between MRI and CT systems. Since many clinical sites run multiple scanners **40**, a single physiologic transmitter **32** and receiver **38** may be utilized with both MRI and CT systems. Different leads **56** to

the physiologic sensors and different cables **100** to the host scanners **40** may be plugged into each device. According to one embodiment of the invention, the transmitter **32** and receiver **38** are provided as pairs, where the devices are configured to only communicate with the other corresponding unit in the pair. This will avoid the potential for a transmitter **32** in a first scanner for transmitting gating signals that may be received by a receiver **38** in a second scanner. Optionally, a single transmitter **32** can be used in conjunction with multiple physiologic receivers **38**, where each receiver **38** may be located by one of the scanners **40** and the transmitter **32** moved as required. Detection by the physiologic transmitter **32** and physiologic receiver **38**, respectively, of the MRI or CT connectors ensures that the proper type and format of data is used. An initial setup routine may be executed to establish the transmitter **32** and the desired receiver **38** as a pair to avoid communications between devices on different scanners. Moreover, the physiologic transmitter **32** and physiologic receiver **38**, respectively, include the appropriate ports for both MRI and CT system connectors and for different connectors associated with different manufacturers of the scanner **40**.

Trigger Monitor System Wireless Technology Protocol

[0078] A novel wireless transmission protocol has been developed for use which provides high reliability of transmission between wireless devices with low latency and low jitter. The protocol will be discussed with respect to the aforementioned trigger monitor system **30**. However, it is understood that the protocol may be utilized in various other applications requiring similar reliability with low latency and low jitter. The transmission of waveform data from the physiologic transmitter **32** to the physiologic receiver **38** requires the satisfaction of a number of quality of service requirements that support an overall performance index of the trigger monitor system **30**. It is understood that the performance index may be influenced by other factors which are independent of wireless requirements, such as the filtering and gating performed by the processor of the physiologic transmitter prior to data communication.

[0079] The quality of services requirements are determined by timing and reliability factors required in the communication of waveform data for image synchronization. For example, the physiologic transmitter **32** sends triggering information to the host scanner **40** based on ECG, PP and RESP waveforms. The waveform with the finest temporal resolution is the ECG waveform, thus driving the desired timing requirements. The timing requirements for CT based applications are less stringent as CT applications can successfully trigger anywhere in the 70-80% period of the R-R wave cycle. Therefore, MRI timing requirements set the standard for timing requirements.

[0080] Timing requirements are dependent upon low latency and low jitter in the transmission of the gating trigger. As is understood in the art, latency is the duration of time from when a signal is sampled to when it is transmitted and jitter is the repeatability of the latency between multiple samples. According to one embodiment of the invention, it is desired to have a wireless latency less than 10 ms so as to not degrade the diagnostic quality of the exam. Moreover, it is desired to have a wireless jitter less than 2 ms. Jitter that is greater than 2 ms will create heartbeat to heartbeat variation in the collected data thereby reducing the diagnostic quality of the exam.

[0081] The trigger monitoring system **30** also relies upon the reliable transmission of the trigger pulse from the physiologic transmitter to the physiologic receiver. False positives (generating a trigger signal other than the desired point of the QRS waveform) will result in an image being acquired when not expected. False negatives (not generating a trigger signal at the desired point of the QRS waveform) will result in a scan not being acquired when expected. Receipt of a false positive trigger may occur, for example, if noise is introduced in the wireless data during transmission. A false negative may occur due, for example, to transmission failures of packets communicated between the transmitter and the receiver.

[0082] In MRI and CT imaging, a false negative results in missing images during a scan. Because consecutive scans of a targeted anatomy may be compiled to generate a three-dimensional image of the targeted anatomy, missing scans may result in missing sections of the targeted anatomy and lower quality images. In MRI applications, patients typically remain in place and a missed image can be re-acquired in a subsequent scan with little or no risk to the patient. However, because CT scans utilize x-ray radiation, the impact of missed triggers in CT is greater than in MRI. Missed sections of the targeted anatomy or low quality images may result in a repeated exam that can expose the patient to additional ionizing radiation which may be harmful to the patient. A false positive results in an image being taken at an unexpected or undesired location within a respiratory or cardiac cycle. The extra image may result in motion artifacts being generated within the image, reducing the quality of the image. Thus, it is desirable to minimize false negative and false positive detections during MRI and CT scans.

[0083] Referring now to FIGS. **9** and **10**, a wireless transmission system **200** providing improved reliability and implementing the proprietary wireless protocol is shown. The wireless transmission system **200** will be discussed with respect to the trigger monitoring system **30** described, herein. However, it is understood that the protocol and transmission system **200** may be implemented for other applications requiring highly reliable transmissions without deviating from the scope of the invention. In the illustrated embodiment of the present invention, a transmitter **210** includes a transmit circuit **212**, an antenna **214**, and a control circuit **216**. The control circuit receives data from external sources, such as the physiologic sensors, and processes the data for transmission. It is contemplated that the control circuit may include a processor executing a series of instructions stored in memory, digital or analog integrated circuits configured to perform specific functions, or a combination thereof. The processed data is sent from the control circuit **216** to the transmit circuit **212** where it is converted into a suitable signal, such as a radio frequency (RF) signal for transmission by the antenna **214**.

[0084] As illustrated in FIG. **9**, the receiver **220** includes an antenna **222**, a splitter **224**, multiple receive circuits **226**, **228**, **230**, **232** and a control circuit **234**. It is contemplated that the control circuit may include a processor executing a series of instructions stored in memory, digital or analog integrated circuits configured to perform specific functions, or a combination thereof. The antenna **222** receives the RF signal from the transmitter **210** and sends it to the splitter **224**. The splitter **224** may identify and separate multiple signals received at the antenna **222** and using, for example, frequency demodulation, amplitude demodulation, de-multiplexing, time-division, or any other suitable method of splitting the multiple signals complementary to the method of combining or trans-

mitting the multiple signals utilized by the transmitter **210**. The splitter **224** may send the separated RF signals to each of the receive circuits **226**, **228**, **230**, **232** or, optionally, the splitter **224** may route the separated RF signals to one of the receive Circuits **226**, **228**, **230**, **232** based, for example, on the frequency of the RF signal from the transmitter **210**. Each receive circuit **226**, **228**, **230**, **232** converts the RF signal to a digital or analog signal suitable for processing by the control circuit **234**. The control circuit **234** extracts the data from the signals and may perform additional processing of the data or transmit the data to another device, for example, via a wired network connection or, for the physiologic receiver **38**, via the cable **100** to the host scanner **40**. According to the embodiment illustrated in FIG. **9**, the receiver **220** includes a single antenna **222** and a splitter **224** to send the RF signals to each receive circuit **226**, **228**, **230**, **232**. As illustrated in FIG. **10**, multiple antennas **222** may be provided with one antenna **222** in communication with each receive circuit **226**, **228**, **230**, **232**. According to still another option, multiple antennas **222** may be routed through the splitter **224** and/or to each of the receive circuits directly **226**, **228**, **230**, **232**. Each receive circuit **226**, **228**, **230**, **232** is tuned to a preselected frequency. Optionally the frequency of each receive circuit **226**, **228**, **230**, **232** may be configurable, however, during operation, it is preferred that each receive circuit remain at a single frequency. In the illustrated embodiment, four receive circuits **226**, **228**, **230**, **232** are illustrated. It is contemplated that the transmission protocol described herein may be practiced with various other numbers of receive circuits **226**, **228**, **230**, **232**, the number selected according to application requirements without deviating from the scope of the invention. Four receive circuits **226**, **228**, **230**, **232** provides a desired quality of service for the trigger monitor system **30** described herein.

[0085] The transmitter **210** sends data to the receiver **220** at multiple frequencies to increase reliability of the transmission. The delivery of data is made more reliable as a result of the frequency diversity because delivery at the at least four different frequencies results in back-up delivery in the ease of interference at a particular channel frequency. During operation, each receive circuit **226**, **228**, **230**, **232** remains at a specific channel, or frequency, and each receive circuit **226**, **228**, **230**, **232** is preferably set to a different wireless channel. For each data sample sent to the receiver **220**, the transmitter **210** is configured to transmit at varying frequencies and transmits the same data packet at the frequency corresponding to the channels at which each of the different receiver circuits **226**, **228**, **230**, **232** are set. Use of multiple frequencies improves the probability that one of the channels will be clear to successfully transmit the data packet.

[0086] The transmitter **210** sends data to the receiver **220** at multiple frequencies according to a transmission schedule **250** as illustrated, for example, in FIG. **11**. According to the illustrated embodiment, the transmitter is scheduled to transmit data at four different frequencies. Transmission occurs at a periodic interval, having a duration, T_{XMIT} , which may be predefined or configurable. For the trigger monitor system **30**, it is desirable to have a low latency, therefore, the duration, T_{XMIT} , is preferably less than 5 ms and, more preferably is about 1 ms. Within each periodic interval, the transmitter **210** sends the data at each of the frequencies of the receiver circuits **226**, **228**, **230**, **232**. A first transmission XMIT1 occurs at a first frequency during a first portion, T_1 , of the duration, T_{XMIT} , of the periodic cycle. A second transmission XMIT2 occurs at a second frequency during a second portion,

T_2 , of the duration, T_{XMIT} , of the periodic cycle. A third transmission XMIT3 occurs at a third frequency during a third portion, T_3 , of the duration, T_{XMIT} , of the periodic cycle. A fourth transmission XMIT4 occurs at a fourth frequency during a fourth portion, T_4 , of the duration, T_{XMIT} , of the periodic cycle. The transmitter 210 achieves frequency diversity, therefore, by sending four transmissions XMIT1-XMIT4 of the same data packet at four frequencies during each transmission period.

[0087] At the end of each transmission interval, the receiver 220 may verify that the data was transmitted successfully. According to one embodiment, the receiver 220 extracts the data sent from each data packet at each of the four frequencies. The data may be stored in memory on the receiver 220. Because the same data was used to generate the data packet which was transmitted at each frequency, the extracted data should be the same. The control circuit 234 in the receiver may compare the data extracted from each frequency against each other. If the data from each of the data packets is identical, the receiver confirms that the data was transmitted successfully. Optionally, if at least three frequencies are used to transmit the data, the control circuit 234 may use a majority voting method, where if the data from over half of the data packets is identical, the control circuit 234 uses the data from the majority of the data packets that are identical and confirms that the data was transmitted successfully. If the data from at least half of the data packets are different from each other, the control circuit 234 indicates that the data was not transmitted successfully and may ignore the data from that transmission interval.

[0088] According to another embodiment, the transmitter 210 may generate a checksum based on the data included in the data packet. The receiver 220 extracts the data and the checksum sent in each data packet at each of the four frequencies. The receiver 220 determines a checksum based on the data extracted from the data packet and compares the calculated checksum to the transmitted checksum. If receiver 220 determines that a data packet from any of the four frequencies was successfully transmitted as a result of matching checksums, the receiver 220 may utilize the data from that data packet and confirms that the data was transmitted successfully. If the receiver 220 determines that the calculated checksum does not match the transmitted checksum at any of the frequencies, the receiver 220 indicates the data was not transmitted successfully and may ignore the data from that transmission interval.

[0089] Spatial diversity may be achieved by using multiple receiving antennas. The receiving antennas are spatially displaced and act independently. Optionally, a circular antenna or antenna array may be configured to receive the transmissions from multiple polarizations. Multipath propagation can, for example, adversely affect the quality of service on a given antenna/radio pair, but the multipath impact will be different on the other antenna/radio pairs. Use of multiple antennas reduces the probability that multipath effects will impact overall quality of service. Thus, it is further contemplated that the receiver 220 may include four antennas 222. Each antenna 222 may be in communication with one of the receive circuits 226, 228, 230, 232 and may be configured to receive a transmission at the frequency corresponding to the respective receive circuit 226, 228, 230, 232. Thus, if interference exists along one transmission path, another transmission path may receive the transmission between the transmitter 210 and the receiver.

[0090] At the end of each transmission interval, the receiver 220 may execute a verification of successful transmission for the multiple antennas in a manner similar to that described above for transmission at multiple frequencies. The receiver 220 may verify successful transmission based on comparison of the data received at each antenna or, if available, may evaluate a checksum transmitted with the data.

[0091] It is further contemplated that the transmitter may employ frequency diversity and spatial diversity together. In other words, data may be transmitted at multiple frequencies and received by spatially displaced antennas. Verification of transmitted data may be a two-step process. For example, verification may first determine whether data received from the multiple antennas was successful. If the receiver 220 successfully received data at a majority of antennas, the receiver 220 may next determine whether the received data is the same across a majority of the frequencies. If the data is the same at the majority of antennas and across a majority of the transmission frequencies, the transmission was successful. In the event a checksum is utilized, any data packet successfully received, as verified by the checksum, indicates successful transmission.

[0092] As yet another method of ensuring reliable data transmission, the control circuit 216 of the transmitter 210 uses time diversity in which multiple samples of a signal are obtained prior to transmitting the signal to the receiver 220. With reference to FIG. 12, according to the illustrated embodiment, four samples 262 of a signal are taken prior to transmission of the signal. As illustrated, the transmitter obtains four samples 262; however, it is contemplated that various other numbers of samples may be utilized without deviating from the scope of the invention. The control circuit 216 of the transmitter 210 stores the value of each sample in memory on the transmitter 210. Preferably, a first-in-first-out (FIFO) buffer is established having a length equal to the number of samples to be transmitted. At each transmission interval, the transmitter 210 obtains the present value of the data to be transmitted and stores it in the most recent location in the FIFO buffer, shifting the remaining values down one location. The transmitter 210 then includes each of the values in the FIFO buffer in the data packet. According to the illustrated embodiment, initial loading of the FIFO buffer may occur, for example, by not making a transmission 264 at the first three sample instances 262. With the fourth sample 262, a transmission 264 begins to occur between the transmitter 210 and the receiver 220. Optionally, other preloading techniques may occur, for example, sending a single sample 262 in a transmission 264 with the first sample, sending two samples 262 in a transmission 264 with the second sample 262, sending three samples 262 in a transmission 264 with the third sample 262, and sending four samples 262 in subsequent transmissions 264. At each transmission 264 the four previous samples 262 are transmitted. If the duration, T_{XMIT} , of the sample period is one millisecond, then a four millisecond latency exists from obtaining the first sample to transmitting the data to the receiver 220. However, if one of the transmissions 264 is not successful, the data is inherently retransmitted during the next transmission 264. Each sample 262 is retransmitted four times. The control circuit 234 of the receiver 220 may read the sample 262 from each transmission 264 and, for example, execute according to a majority of the values for one sample 262 being the same. If, for example, any three of the values for a sample 262 are the same, the control circuit 234 discards the conflicting value as an erroneous

transmission 264 and executes based on the three common values. Although the illustrated embodiment obtains four samples 262 per transmission 264, it is contemplated that at least two, or various other numbers of, samples 262 may be sent during each transmission 264 without deviating from the scope of the invention. According to still another aspect of the invention, different numbers of samples may be obtained for data corresponding to different physiologic parameters. For example, four samples 262 may be obtained for cardiac data while eight samples may be obtained for trigger data.

[0093] Although the control circuit 234 of the receiver 220 may execute according to a majority of values of a sample 262 being the same, it is also contemplated, that the data may include, for example, a checksum or other means of error detection. If the control circuit 234 determines based on the checksum that a received message is correct, it identifies the packet as containing good data. The data may then be stored and relied upon for future execution. Thus, if the transmitter 210 is using a four sample redundancy but three packets in a row are lost, the final packet will still contain valid data and the receiver 220 may rely on the single received sample 262 for execution.

[0094] It is further contemplated that the transmission protocol may utilize all three of the afore-described diversity techniques, namely frequency diversity, spatial diversity, and time diversity. Verification may be a multiple step process, verifying that one of the diversity techniques is successful prior to verifying that a subsequent diversity technique is successful. With multiple diversity techniques, it may be preferable to include a checksum, such that verification of successful transmission of any one data packet based on the checksum, results in the data from that data packet being used by the receiver 220.

[0095] It is also contemplated that multiple transmitters 210 and receivers 220 may be operating within range of each other. To avoid reception of and processing of data packets from other transmitters 210 and/or receivers 220, each transmitter 210 and receiver 220 may be established as a pair. The transmitter 210 and receiver 220 may be configured initially, for example, via hardware and/or software switches to only communicate with a paired device. Optionally, each transmitter 210 and receiver 220 may be configurable to communicate with multiple other devices; however, an initialization routine may be executed to connect the transmitter 210 and receiver 220 as a pair based, for example, on addresses or other identification within each device. During operation, although both the transmitter 210 and the receiver 220 may be configured to transmit a message to the other device, each transmission is unidirectional, requiring no acknowledgement. Thus, the source and/or destination address or other identifier is included in the data packet. The receiving device verifies that it is either the intended recipient or receiving a transmission from its corresponding paired device. If the received transmission is either not intended for the receiving device or not sent from its corresponding device, the data packet is discarded.

[0096] Thus, the wireless protocol disclosed herein utilizes multiple methods of improving reliability of data transmission between two devices without requiring an acknowledge signal. The data may be transmitted at multiple frequencies to avoid interference at any one frequency. The data may be transmitted and/or received utilizing multiple antennas or multi-directional antennas to avoid interference along any one transmission path. The data may also be saved and trans-

mitted in batches such that each data sample is transmitted multiple times to avoid the loss of any one data transmission. It is contemplated that various combinations of the aforementioned techniques may be utilized to achieve improved reliability of transmissions.

[0097] It should be understood that the invention is not limited in its application to the details of construction and arrangements of the components set forth herein. The invention is capable of other embodiments and of being practiced or carried out in various ways. Variations and modifications of the foregoing are within the scope of the present invention. It also being understood that the invention disclosed and defined herein extends to all alternative combinations of two or more of the individual features mentioned or evident from the text and/or drawings. All of these different combinations constitute various alternative aspects of the present invention. The embodiments described herein explain the best modes known for practicing the invention and will enable others skilled in the art to utilize the invention.

We claim:

1. A trigger monitor system, comprising:

a transmitter including:

at least one input operable to receive a data signal corresponding to a physiological parameter from a patient,

a processor operable to receive the data signal from each input and to generate at least one of a filtered data signal from each data signal and a trigger signal as a function of at least one of the data signals and the filtered data signals, and

a transmit circuit operable to transmit at least one of the data signals, the filtered data signals, and the trigger signal; and

a receiver including:

a receive circuit operable to receive the transmitted signal from the transmitter, and

a processor in communication with the receive circuit to receive the transmitted signal and when the transmitted signal is the trigger signal, the processor is in communication with a host scanner to transmit the trigger signal to the host scanner to initiate image acquisition of the patient.

2. The trigger monitor system of claim 1 further comprising at least one of an external computer and a portable tablet operable to receive each of the signals from the transmitter and to show the received signal on a display.

3. The trigger monitor system of claim 1 wherein:

the host scanner is one of a magnetic resonance imaging (MRI) scanner and a computed tomography (CT) scanner, and

the receiver is operable to detect the type of host scanner to which it is connected.

4. The trigger monitor system of claim 1 wherein the transmitted signal is one of the data signal and the filtered data signal and the processor in the receiver is operable to generate the trigger signal as a function of the transmitted signal.

5. The trigger monitor system of claim 1 wherein the physiological parameters are selected from a group comprising electrocardiography (ECG) data, peripheral pulse data, and respiratory cycle data.

6. The trigger monitor system of claim 1 wherein a lead is placed on the patient to detect the physiological parameter and to generate the data signal corresponding to the physi-

ological parameter and wherein the processor in the transmitter is operable to detect whether the lead is properly connected to the patient.

7. The trigger monitor system of claim 1 wherein the transmitter further comprises a rechargeable battery and a power source input wherein the power source can only be attached to the power source input when an ECG data input is disabled.

8. The trigger monitor system of claim 1 wherein the processor of one of the transmitter and the receiver is operable to further process the data signal corresponding to the physiological parameter to produce at least one of a pulse rate, a respiratory rate, a heart rate, a PPG waveform, and an ECG waveform.

9. The trigger monitor system of claim 1 wherein:

the transmit circuit is operable to transmit one of the data signal, the filtered data signal, and the trigger signal in a data packet;

the transmit circuit transmits the data packet using at least two frequencies;

the receiver receives the data packet at each frequency; and the processor in the receiver extracts the transmitted signal from each data packet.

10. The trigger monitor system of claim 9 wherein the transmitter stores at least two values of the data signal, filtered data signal, or trigger signal to be transmitted in a memory device on a first-in-first-out basis and includes the at least two stored values in the data packet.

11. A monitor system for use with either a magnetic resonance imaging (MRI) scanner or a computed tomography (CT) scanner, the monitor system comprising:

a transmitter including:

at least one input operable to receive a data signal corresponding to a physiological parameter from a patient,

a processor operable to receive the data signal from each input, and

a transmit circuit operable to transmit each data signal; and

a receiver in communication with the transmitter and in communication with the MRI or CT scanner, the receiver including:

a receive circuit operable to receive the data signal from the transmitter, and

a processor in communication with the receive circuit to receive the data signal and operable to detect whether the receiver is connected to the MRI scanner or the CT scanner.

12. The monitor system of claim 11 wherein a lead is placed on the patient to detect the physiological parameter and to generate the data signal corresponding to the physiological parameter and wherein the processor in the transmitter is operable to detect whether the lead is properly connected to the patient.

13. The monitor system of claim 11 wherein the transmitter further includes a first set of indicators providing a graphical representation of placement of a plurality of leads on a torso of the patient during an MRI scan.

14. The monitor system of claim 13 wherein the transmitter further includes a second set of indicators providing a graphical representation of placement of the leads on the torso of the patient during a CT scan.

15. The monitor system of claim 14 wherein each of the first and second set of visual indicators indicate whether the lead is properly connected to the patient.

16. The monitor system of claim 11 wherein:

the processor of at least one of the transmitter and the receiver is operable to generate at least one of a filtered data signal from each data signal and a trigger signal as a function of at least one of the data signals and the filtered data signals, and

the processor of the receiver is in communication with the MRI or CT scanner to transmit the trigger signal to the MRI or CT scanner to initiate image acquisition of the patient.

17. A method of initiating image acquisition on a host scanner from a physiological data acquisition system, the method comprising the steps of:

connecting at least one sensor to a patient;

receiving a data signal from the sensor at a transmitter, the signal corresponding to a physiological parameter of the patient;

generating at least one of a filtered data signal and a trigger signal from the data signal in a processor of the transmitter;

transmitting at least one of the data signal, the filtered signal, and the trigger signal from the transmitter as a transmitted signal;

receiving the transmitted signal with a receiver in communication with the transmitter; and

when the transmitted signal is a trigger signal, transmitting the trigger signal from the receiver to a host scanner to initiate image acquisition on the host scanner.

18. The method of claim 17 wherein the transmitter includes a set of indicators providing a graphical representation of a plurality of locations at which a lead for each sensor is to be placed on a torso of the patient during an imaging scan and wherein the step of connecting the at least one sensor further comprises the steps of:

placing each sensor on the torso of the patient in one of the plurality of the locations, and

verifying that each indicator from the set of indicators shows that the sensor is placed correctly and operating normally.

19. The method of claim 18 wherein:

the host scanner is one of a MRI scanner and a CT scanner;

the transmitter includes a first set of indicators providing a graphical representation of a plurality of locations at which the lead for each sensor is to be placed on the torso of the patient during an MRI scan;

the transmitter includes a second set of indicators providing a graphical representation of a plurality of locations at which the lead for each sensor is to be placed on the torso of the patient during a CT scan; and

the method further comprises the steps of automatically identifying whether the physiological data acquisition system is connected to the MRI scanner or the CT scanner;

using the first set of indicators to place each sensor when the physiological data acquisition system is connected to the MRI scanner; and

using the second set of indicators to place each sensor when the physiological data acquisition system is connected to the CT scanner.

20. The method of claim 17 wherein the physiological data acquisition system includes a portable tablet, the method further comprising the steps of:

receiving the transmitted signal at the portable tablet; and displaying an image of at least one of the data signal, the filtered data signal, and the trigger signal on a display of the portable tablet.

21. The method of claim **17** further comprising: transmitting the transmitted signal from the transmitter using at least two frequencies; and receiving the transmitted signal with the receiver at each of the frequencies.

22. The method of claim **17** further comprising the steps of: storing at least two values of the data signal, filtered data signal, or trigger signal to be transmitted in a memory device on a first-in-first-out basis; and including each of the stored values in the transmitted signal.

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专利名称(译)	无线生理数据采集系统		
公开(公告)号	US20160015352A1	公开(公告)日	2016-01-21
申请号	US14/801406	申请日	2015-07-16
[标]申请(专利权)人(译)	NEOCOIL		
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发明人	BROWN, BRIAN WOLFF, STEVEN SHAW, ANDREW GEISLER, MARK S.		
IPC分类号	A61B6/00 A61B5/00 A61B5/0205 A61B5/0402 A61B5/055 A61B6/03		
CPC分类号	A61B6/541 A61B5/055 A61B6/032 A61B5/0816 A61B5/0205 A61B5/0002 A61B5/024 A61B5/0402 A61B5/0022 A61B5/7285 A61B6/03 A61B6/503 A61B6/566 G01R33/3692 G01R33/5673 G16H40/63 H04L1/201 H04L67/12 H04L67/125 H04L69/02 H04L69/14		
优先权	62/025171 2014-07-16 US		
外部链接	Espacenet USPTO		

摘要(译)

生理发射器管理连接到患者的生理数据采集设备和连接到MRI或CT扫描仪的接收器之间的多个通信。发射器的处理器能够基于所获取的生理数据生成波形数据和触发数据，并将数据发送到连接到主扫描器的生理接收器。然后，接收器能够将触发信号传递到主扫描器，以基于患者的心脏和/或呼吸周期在选定的时间范围内对患者成像。

