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Health informatics — Personal health device communication —

Part 10417: Device specialization — Glucose meter

*Informatique de santé — Communication entre dispositifs médicaux
sur le site des soins —*

Partie 10417: Spécialisation des dispositifs — Glucomètre

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Foreword

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ISO/IEEE 11073-10417 was prepared by the 11073 Committee of the Engineering in Medicine and Biology Society of the IEEE (as IEEE Std 11073-10417-2008). It was adopted by Technical Committee ISO/TC 215, *Health informatics*, in parallel with its approval by the ISO member bodies, under the “fast-track procedure” defined in the Partner Standards Development Organization cooperation agreement between ISO and IEEE. Both parties are responsible for the maintenance of this document.

ISO/IEEE 11073 consists of the following parts, under the general title *Health informatics — Personal health device communication* (text in parentheses gives a variant of subtitle):

- *Part 10101: (Point-of-care medical device communication) Nomenclature*
- *Part 10201: Domain information model*
- *Part 10404: Device specialization — Pulse oximeter*

- Part 10407: Device specialization — Blood pressure monitor
- Part 10408: (Point-of-care medical device communication) Device specialization — Thermometer
- Part 10415: (Point-of-care medical device communication) Device specialization — Weighing scale
- Part 10417: Device specialization — Glucose meter
- Part 10471: (Point-of-care medical device communication) Device specialization — Independent living activity hub
- Part 20101: (Point-of-care medical device communication) Application profiles — Base standard
- Part 20601: (Point-of-care medical device communication) Application profile — Optimized exchange protocol
- Part 30200: (Point-of-care medical device communication) Transport profile — Cable connected
- Part 30300: (Point-of-care medical device communication) Transport profile — Infrared wireless

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Introduction

ISO/IEEE 11073 standards enable communication between medical devices and external computer systems. This document uses the optimized framework created in IEEE Std 11073-20601^a and describes a specific, interoperable communication approach for glucose meters. These standards align with and draw on the existing clinically focused standards to provide support for communication of data from clinical or personal health devices.

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^a For information on references, see Clause 2.

Health informatics — Personal health device communication —

Part 10417: Device specialization — Glucose meter

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1. Overview

1.1 Scope

Within the context of the ISO/IEEE 11073 family of standards for device communication, this standard establishes a normative definition of communication between personal telehealth glucose meter devices and compute engines (e.g. cell phones, personal computers, personal health appliances, and set top boxes) in a manner that enables plug-and-play interoperability. It leverages appropriate portions of existing standards, including ISO/IEEE 11073 terminology, information models, application profile standards, and transport standards. It specifies the use of specific term codes, formats, and behaviors in telehealth environments restricting optionality in base frameworks in favor of interoperability. This standard defines a common core of communication functionality for personal telehealth glucose meters.

1.2 Purpose

This standard addresses a need for an openly defined, independent standard for controlling information exchange to and from personal health devices and compute engines (e.g. cell phones, personal computers, personal health appliances, and set top boxes). Interoperability is the key to growing the potential market for these devices and to enabling people to be better informed participants in the management of their health.

1.3 Context

See IEEE Std 11073-20601™ for an overview of the environment within which this standard is written.

This document, IEEE Std 11073-10417, defines the device specialization for the glucose meter, being a specific agent type, and it provides a description of the device concepts, its capabilities, and its implementation according to this standard.

This standard is based on IEEE Std 11073-20601, which in turn draws information from both ISO/IEEE 11073-10201:2004 [B4]¹ and ISO/IEEE 11073-20101:2004 [B3]. The medical device encoding rules (MDER) used within this standard are fully described in IEEE Std 11073-20601.

This standard reproduces relevant portions of the nomenclature found in ISO/IEEE 11073-10101:2004 [B3] and adds new nomenclature codes for the purposes of this standard. Between this standard and IEEE Std 11073-20601, all required nomenclature codes for implementation are documented.

NOTE—In this standard, IEEE Std 11073-104zz is used to refer to the collection of device specialization standards that utilize IEEE Std 11073-20601, where zz can be any number from 01 to 99, inclusive.²

2. Normative references

The following referenced documents are indispensable for the application of this document (i.e., they must be understood and used, so that each referenced document is cited in text and its relationship to this document is explained). For dated references, only the edition cited applies. For undated references, the latest edition of the referenced document (including any amendments or corrigenda) applies.

IEEE Std 11073-20601™-2008, Health informatics—Personal health device communication—Part 20601: Application profile—Optimized Exchange Protocol.^{3,4}

3. Definitions, acronyms, and abbreviations

3.1 Definitions

For the purposes of this standard, the following terms and definitions apply. *The Authoritative Dictionary of IEEE Standards* [B2] should be referenced for terms not defined in this clause.

3.1.1 agent: A node that collects and transmits personal health data to an associated manager.

3.1.2 class: In object-oriented modeling, a class describes the attributes, methods, and events that objects instantiated from the class utilize.

3.1.3 compute engine: *See: manager.*

3.1.4 device: A term used to refer to a physical apparatus implementing either an agent or manager role.

3.1.5 glucose meter: A medical device for determining the approximate concentration of glucose in the blood.

¹The numbers in brackets correspond to those of the bibliography in Annex A.

²Notes in text, tables, and figures are given for information only and do not contain requirements needed to implement the standard.

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⁴IEEE publications are available from the Institute of Electrical and Electronics Engineers, 445 Hoes Lane, Piscataway, NJ 08854, USA (<http://standards.ieee.org/>).

3.1.6 handle: An unsigned 16-bit number that is locally unique and identifies one of the object instances within an agent.

3.1.7 manager: A node receiving data from one or more agent systems. Some examples of managers include a cellular phone, health appliance, set top box, or a computer system.

3.1.8 obj-handle: *See: handle.*

3.1.9 object: In object-oriented modeling, a particular instantiation of a class. The instantiation realizes attributes, methods, and events from the class.

3.1.10 personal health device: A device used in personal health applications.

3.1.11 personal telehealth device: *See: personal health device.*

3.2 Acronyms and abbreviations

APDU	application protocol data unit
ASN.1	Abstract Syntax Notation One
AST	alternative site testing
DIM	domain information model
EUI-64	extended unique identifier (64 bits)
HbA1c	hemoglobin bound to glucose (the A1c form)
HCP	health care professional
ICS	implementation conformance statements
ISF	interstitial fluid
MDC	medical device communication
MDER	medical device encoding rules
MDS	medical device system
MOC	managed object class
OID	object identifier
PDU	protocol data unit
PHD	personal health device
VMO	virtual medical object
VMS	virtual medical system

4. Introduction to ISO/IEEE 11073 personal health devices

4.1 General

This standard and the remainder of the series of ISO/IEEE 11073 personal health device (PHD) standards fit in the larger context of the ISO/IEEE 11073 series of standards. The full suite of standards enables agents to interconnect and interoperate with managers and with computerized health-care information systems. See IEEE Std 11073-20601 for a description of the guiding principles for this series of ISO/IEEE 11073 Personal Health Device standards.

IEEE Std 11073-20601 supports the modeling and implementation of an extensive set of personal health devices. This standard defines aspects of the glucose meter device. It describes all aspects necessary to implement the application layer services and data exchange protocol between an ISO/IEEE 11073 PHD glucose meter agent and a manager. This standard defines a subset of the objects and functionality contained in IEEE Std 11073-20601, and it extends and adds definitions where appropriate. All new definitions are given in Annex B in Abstract Syntax Notation One (ASN.1). Nomenclature codes referenced in this standard, which are not defined in IEEE Std 11073-20601, are normatively defined in Annex C.

4.2 Introduction to IEEE 11073-20601 modeling constructs

4.2.1 General

The ISO/IEEE 11073 series of standards, and in particular IEEE Std 11073-20601, is based on an object-oriented systems management paradigm. The overall system model is divided into three principal components: the domain information model (DIM), the service model, and the communication model. See IEEE Std 11073-20601 for a detailed description of the modeling constructs.

4.2.2 Domain information model

The DIM is a hierarchical model that describes an agent as a set of objects. These objects and their attributes represent the elements that control behavior and report on the status of the agent and the data that an agent can communicate to a manager. Communication between the agent and the manager is defined by the application protocol in IEEE Std 11073-20601.

4.2.3 Service model

The service model defines the conceptual mechanisms for the data exchange services. Such services are mapped to messages that are exchanged between the agent and the manager. Protocol messages within the ISO/IEEE 11073 series of standards are defined in ASN.1. The messages defined in IEEE Std 11073-20601 can coexist with messages defined in other standard application profiles defined in the ISO/IEEE 11073 series of standards.

4.2.4 Communication model

In general, the communication model supports the topology of one or more agents communicating over logical point-to-point connections to a single manager. For each logical point-to-point connection, the dynamic system behavior is defined by a connection state machine as specified in IEEE Std 11073-20601.

4.2.5 Implementing the models

An agent implementing this standard shall implement all mandatory elements of the information, service, and communication models as well as all conditional elements where the condition is met. The agent should implement the recommended elements, and it may implement any combination of the optional elements. A manager implementing this standard shall utilize at least one of the mandatory, conditional, recommended, or optional elements. In this context, “utilize” means to use the element as part of the primary function of the manager device. For example, a manager whose primary function is to display data would need to display a piece of data in the element in order to utilize it.

5. Glucose meter device concepts and modalities

5.1 General

This clause presents the general concepts of glucose meters. In the context of personal health devices in this family of standards, a glucose meter is a device that measures the concentration of glucose in the blood. Glucose, or the concentration of blood sugar in the blood, is the primary source of energy for the body's cells. The glucose level is tightly regulated in the human body and is normally maintained between about 70 mg/dL and 150 mg/dL (4 mmol/L and 8 mmol/L). The total measurement of glucose in the circulating blood is therefore about 3.5 g to 7.5 g (assuming an ordinary adult blood volume of 5 L). Glucose levels rise after meals and are usually lowest in the morning, before the first meal of the day.

In a healthy adult male of 75 kg with a blood volume of 5 L, a blood glucose level of 100 mg/dL (5.5 mmol/L) corresponds to a total of about 5 g (1/5 oz and equivalent to a commercial sugar packet) of glucose in the blood and approximately 45 g (1½ oz) in the total body fluid (which includes blood and interstitial fluid) and on average will be about 60% of the total body weight in men.

The failure to maintain blood glucose in the normal range leads to conditions of persistently high (hyperglycemia) or low (hypoglycemia) blood sugar. Diabetes mellitus, characterized by persistent hyperglycemia from several causes, is the most prominent disease related to the failure to regulate blood sugar. Fructose and galactose are also sugars found in the blood; however, only glucose levels are regulated via insulin and glucagon.

Countries that use the metric system generally use mmol/L. The United States uses mg/dL. To convert blood glucose readings, implement the following conversions:

Divide the mg/dL by 18 to get mmol/L (or multiply by 0.055)
Multiply the mmol/L by 18 to get mg/dL (or divide with 0.055)

Glucose meters considered in this specialization are typically handheld instruments that require a sample of blood or body fluid to perform the glucose measurement. The glucose concentration measured by various techniques can be classified into different types defined by three elements: sample type, sample source, and concentration reference method. Table 1 shows all glucose concentration types defined in this standard.

Table 1—Glucose concentration types

Sample type	Sample source	Reference method
Blood	Capillary	Whole blood
		Plasma
	Venous	Whole blood
		Plasma
	Arterial	Whole blood
		Plasma
Interstitial fluid	N/A	N/A
Control solution	N/A	N/A

NOTE—Blood glucose concentration may be indirectly derived from interstitial fluid sample (ISF), which is a common technique used in continuous glucose monitoring. A control solution is normally used for glucose meter quality control.

In addition to glucose measurement, glucose meters generally provide a means for the user to associate information on meals, exercise, and medications with a glucose measurement. Advanced devices may also allow users to customize device settings and to provide additional information related to their diabetes treatment and disease management.

6. Glucose meter domain information model

6.1 Overview

This clause describes the domain information model of the glucose meter.