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Part 20701:

**Point-of-care medical device
communication — Service oriented
medical device exchange architecture
and protocol binding**

Informatique de santé — Interopérabilité des dispositifs —

*Partie 20701: Communication entre dispositifs médicaux sur le site
des soins — Architecture d'échange orientée services entre dispositifs
médicaux et liaison par protocole*

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Health informatics—Point-of-care medical device communication

Part 20701: Service-Oriented Medical Device Exchange Architecture and Protocol Binding

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Abstract: Within the context of the ISO/IEEE 11073 family of standards for point-of-care (PoC) medical device communication, an architecture for service-oriented distributed PoC medical devices and medical IT systems is defined. This standard defines a binding of the Participant, Discovery, and Communication Model defined in IEEE Std 11073-10207™ to the profile for transport over Web Services defined in IEEE Std 11073-20702™. Moreover, a binding to Network Time Protocol (NTP) and Differentiated Services (DiffServ) is defined for time synchronization and transport Quality of Service requirements.

Keywords: alert systems, BICEPS, DiffServ, IEEE 11073-20701™, ISO/IEEE 11073, MDPWS, medical device communication, NTP, patient, point-of-care, remote control, service-oriented architecture

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Introduction

This introduction is not part of IEEE Std 11073-20701-2018, Health Informatics—Point-of-care medical device communication—Part 20701: Service-Oriented Medical Device Exchange Architecture and Protocol Binding.

ISO/IEEE 11073 standards enable communication between medical devices and external computer systems. They provide automatic and detailed electronic data capture of patient vital signs information and device operational data. The primary goals are to:

- Provide real-time plug-and-play interoperability for medical devices
- Facilitate the efficient exchange of vital signs and medical device data, acquired at the Point-of-Care (PoC), in all health care environments

“Real-time” means that data from multiple devices can be retrieved, time correlated, and displayed or processed in fractions of a second. “Plug-and-play” means that all the clinician has to do is to make the connection—the Participants automatically detect, configure, and communicate without any other human interaction.

“Efficient exchange of medical device data” means that information that is captured at the PoC (e.g., patient vital signs data) can be received, parsed, and interpreted by many different types of applications without unnecessary loss of information. The standards are especially targeted at acute, surgical, and continuing care devices, such as patient monitors, ventilators, infusion pumps, ECG devices, endoscopic camera system, insufflators, endoscopic light sources, dissectors, etc. They comprise a family of standards that can be bound to one another to provide optimized connectivity for devices at the Point-of-Care.

Within the context of the ISO/IEEE 11073 family of standards for PoC medical device communication, this standard defines an architecture for service-oriented distributed PoC medical devices and medical IT systems. It defines a binding of the Participant, Discovery, and Communication Model defined in IEEE Std 11073-10207 to the profile for transport over Web Services defined in IEEE Std 11073-20702. Moreover, a binding to Network Time Protocol (NTP) and Differentiated Services (DiffServ) is defined to satisfy time synchronization and transport Quality of Service requirements.

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