# HUMAN-MACHINE INTERFACE Making Healthcare Digital







## Human-Machine Interface

### Scrivener Publishing

100 Cummings Center, Suite 541J Beverly, MA 01915-6106

Publishers at Scrivener Martin Scrivener (martin@scrivenerpublishing.com) Phillip Carmical (pcarmical@scrivenerpublishing.com)

## **Human-Machine Interface**

## **Making Healthcare Digital**

## Edited by **Rishabha Malviya**

Department of Pharmacy, School of Medical and Allied Sciences, Galgotias University, Noida, India

### Sonali Sundram

Department of Pharmacy, School of Medical and Allied Sciences, Galgotias University, Noida, India

### Bhupendra Prajapati

Department of Pharmaceutics, Shree S.K.Patel College of Pharmaceutical Education and Research, Ganpat University, Gujarat, India

and

## Sudarshan Kumar Singh

Department of Pharmaceutical Science, Chiang Mai University, Chiang Mai, Thailand





This edition first published 2024 by John Wiley & Sons, Inc., 111 River Street, Hoboken, NJ 07030, USA and Scrivener Publishing LLC, 100 Cummings Center, Suite 541J, Beverly, MA 01915, USA © 2024 Scrivener Publishing LLC

For more information about Scrivener publications please visit www.scrivenerpublishing.com.

All rights reserved. No part of this publication may be reproduced, stored in a retrieval system, or transmitted, in any form or by any means, electronic, mechanical, photocopying, recording, or otherwise, except as permitted by law. Advice on how to obtain permission to reuse material from this title is available at http://www.wiley.com/go/permissions.

#### Wiley Global Headquarters

111 River Street, Hoboken, NJ 07030, USA

For details of our global editorial offices, customer services, and more information about Wiley products visit us at www.wiley.com.

#### Limit of Liability/Disclaimer of Warranty

While the publisher and authors have used their best efforts in preparing this work, they make no representations or warranties with respect to the accuracy or completeness of the contents of this work and specifically disclaim all warranties, including without limitation any implied warranties of merchantability or fitness for a particular purpose. No warranty may be created or extended by sales representatives, written sales materials, or promotional statements for this work. The fact that an organization, website, or product is referred to in this work as a citation and/or potential source of further information does not mean that the publisher and authors endorse the information or services the organization, website, or product may provide or recommendations it may make. This work is sold with the understanding that the publisher is not engaged in rendering professional services. The advice and strategies contained herein may not be suitable for your situation. You should consult with a specialist where appropriate. Neither the publisher nor authors shall be liable for any loss of profit or any other commercial damages, including but not limited to special, incidental, consequential, or other damages. Further, readers should be aware that websites listed in this work may have changed or disappeared between when this work was written and when it is read.

#### Library of Congress Cataloging-in-Publication Data

ISBN 978-1-394-19991-4

Cover image: Pixabay.Com Cover design by Russell Richardson

Set in size of 11pt and Minion Pro by Manila Typesetting Company, Makati, Philippines

Printed in the USA

10 9 8 7 6 5 4 3 2 1

## Dedication

*This book is dedicated to all those wonderful readers who are working in healthcare and put their effort into improved patient care.* 

## Contents

Foreword xxi					xxiii
Pr	eface				xxv
Ac	know	vledger	nent		xxvii
Pa	rt I	: Adv	anced I	Patient Care with HMI	1
1	Sha	ma Mu	jawar, Ad	man-Machine Interface arohi Deshpande, Aarohi Gherkar, n and Bhupendra Prajapati	3
			luction	1 71	4
	1.2	Types	of HMI		6
		1.2.1	The Pus	hbutton Replacer	6
		1.2.2	The Dat	a Handler	7
		1.2.3	The Ove	erseer	7
	1.3	Trans	formatio	n of HMI	7
1.4 Importance and COVID Relevance With		d COVID Relevance With HMI	9		
	1.5	Appli	cations		11
		1.5.1	Biologic	al Applications	12
			1.5.1.1	HMI Signal Detection and Procurement	
				Method	12
			1.5.1.2	Healthcare and Rehabilitation	12
			1.5.1.3	Magnetoencephalography	13
			1.5.1.4	Flexible Hybrid Electronics (FHE)	13
			1.5.1.5	0	13
			1.5.1.6	Flexible Microstructural Pressure Sensors	14
			1.5.1.7	Biomedical Applications	14
				CB-HMI	15
			1.5.1.9	HMI in Medical Devices	15
		1.5.2	Industri	al Applications	15
			1.5.2.1	Metal Industries	16

			1.5.2.2	Video Game Industry	16
			1.5.2.3	Aerospace and Defense	16
			1.5.2.4	Water Purification Plant HMI Based	
				on Multi-Agent Systems (MAS)	17
			1.5.2.5	Virtual and Haptic Interfaces	17
			1.5.2.6	Space Crafts	17
			1.5.2.7	Car Wash System	18
			1.5.2.8	•	18
	1.6	Chall	enges	-	18
	1.7	Conc	lusion an	d Future Prospects	19
		Refer	ences		20
2	Imp	roving	, Healthc	are Practice by Using HMI Interface	25
	Vaib	ohav Ve	erma, Viv	vek Dave and Pranay Wal	
	2.1	Backg	ground of	Human-Machine Interaction	26
	2.2	Intro	duction		26
		2.2.1	Healthc	are Practice	26
		2.2.2	Human	-Machine Interface System in Healthcare	26
	2.3	Evolu	tion of H	MI Design	27
		2.3.1	HMI De	esign 1.0	27
			HMI De		28
			HMI Do		28
		2.3.4	HMI De	esign 4.0	28
	2.4		•	uman Brain	28
	2.5	Signa	l Associat	ted With Brain	31
		2.5.1	Evoked	Signals	31
			-	neous Signals	32
			Hybrid	-	32
			-	ocessing and Acquisition Methods	32
	2.7			ne Interface–Based Healthcare System	36
		2.7.1		are Practice System	36
				Healthcare Practice	36
				Current State of Healthcare Provision	37
				Concerns With Domestic Healthcare	38
		2.7.2		Education System	38
			2.7.2.1	Traditional and Modern Way of Providing	
				Medical Education	38
	2.8		-	el of HMI	38
	2.9		•	l Limitations of HMI Design	40
	2.10			n Healthcare Practice	40
		2.10.1	Simple	to Clean	41

		2.10.2	High Chemical Tolerance	41			
		2.10.3	Transportable and Light	41			
		2.10.4	Enhancing Communication	41			
	2.11	Appli	cation of HMI Technology in Medical Fields	42			
		2.11.1	÷.				
			Using HMI	42			
		2.11.2	Controls for Robotic Surgery				
			and Human Prosthetics	45			
		2.11.3	Sensory Replacement Mechanism	47			
		2.11.4	Wheelchairs and Moving Robots Along				
			With Neurological Interface	48			
		2.11.5	Cognitive Improvement	49			
	2.12		lusion and Future Perspective	51			
		Refere	ences	52			
3	Hur	nan-Ma	chine Interface and Patient Safety	59			
			r Singh and Rishabha Malviya				
		Introdu		59			
	3.2	Detecti	ing Anesthesia-Related Drug Administration				
			Errors and Predicting Their Impact				
		3.2.1	Methodological Difficulties in Studying Rare,				
			Dangerous Phenomena	61			
			Consequences of Errors	63			
			Lessons From Other Industries	65			
			The Double-Human Interface	66			
			The Culture of Denial and Effort	67			
			Poor Labeling	68			
	3.3	•	atic Approaches to Improve Patient				
		•	During Anesthesia	69			
			Design Principles	69			
			Evidence of Safety Gains	70			
			Consistent Color-Coding	71			
			The Codonics Label System	72			
	3.4		iumph of Software	73			
			Software in Hospitals	74			
			Software in Anesthesia	75			
			The Alarm Problem	76			
	3.5		nments that Audit Themselves	77			
	3.6		isks and Dangers	77			
	3.7	Conclu		78			
		Referen	nces	79			

### **x** Contents

4	Hun	nan-M	achine In	terface Improving Quality of Patient Care	89
	Rish	av Sha	rma and	Rishabha Malviya	
	4.1	Intro	duction		90
	4.2	An Ao	dvanced I	Framework for Human-Machine Interaction	92
		4.2.1	A Simul	ated Workplace Safety and Health Program	92
	4.3	Huma	an–Comp	outer Interaction (HCI)	93
	4.4	Multi	modal Pr	ocessing	95
	4.5	Integr	ated Mul	timodality at a Lower Order	
		(Stim	ulus Orie	ntation)	96
	4.6	•		Multimodal Integration (Perceptual Binding)	96
	4.7			mance From Multisensory Stimulation	97
	4.8	Ampl	itude Env	elope and Alarm Design	98
	4.9			in Alarm Tone Design for Medical Devices	99
				e Integration in Multimodal User Interfaces	99
			are in Ho	1	100
				e Interface (BCI) Outfit	101
	4.13			ld Techniques	101
		4.13.1			102
			ECoG		102
		4.13.3			102
			EMG		103
			MEG		103
			FMRI		103
				n Advanced Human-Machine Interface	104
	4.15	Conc			105
		Refer	ences		106
5	Sma	rt Pati	ent Enga	gement through Robotics	115
	Raki	hi Moh	an, A. Ai	run Prakash, Uma Devi N.,	
	Anja	ili Sha	rma S., A	iswarya Babu N. and Thennarasi P.	
	5.1	Intro	luction		116
		5.1.1	Robotic	s in Healthcare	116
		5.1.2	Patient I	Engagement Tasks (Front End)	118
			5.1.2.1	Robotics in Nursing, Patient Handling,	
				and Support	118
			5.1.2.2	Robotics in Patient Reception	119
			5.1.2.3	Robotics in Ambulance Services	120
			5.1.2.4	Robotics in Serving (Food and Medicine)	120
			5.1.2.5	Robotics in Surgery and Surgical Assistance	121
			5.1.2.6	Robotics in Cleaning, Moping, Spraying	
				and Disinfecting	122

		5.1.2.7	Robotics in Physiotherapy, Radiology,	
			Lab Diagnostics and Rehabilitation	
			(Exoskeletons)	122
		5.1.2.8	Robotics in Tele-Presence	122
		5.1.2.9	Robotics in Hospital Kitchen and Pantry	
			Management	123
		5.1.2.10	Robotics in Outdoor Medicine Delivery	123
		5.1.2.11	Robotics in Home Healthcare	123
	5.1.3	Docume	entation and Other Hospital Management	
		Tasks (B	ack End)	124
		5.1.3.1	Robotics in Patient Data Feeding	
			and Storing	124
		5.1.3.2	Robotics in Data Mining	124
		5.1.3.3	Robotics in Job Allocation to Hospital	
			Staffs	125
			Robotics in Payroll Management	125
		5.1.3.5	Robotics in Medicine and Medical	
			Equipment Logistics	126
		5.1.3.6	Robotics in Medical Waste Residual	
			Management	126
5.2	Theor	etical Fra	mework	126
5.3	Objec			127
5.4	Resea	rch Meth	odology	127
5.5	Prima	ry and Se	econdary Data	127
5.6	Factor	rs for Cor	nsideration	127
	5.6.1	Patient I	Demographics	127
	5.6.2	Hospital	/Health Institutes Demographics	127
	5.6.3	Patient I	Perception Factors	128
	5.6.4	Hospital	l's Feasibility Factors and Hospital's	
		Econom	ic Factors for Implementation	128
5.7	Robot	ics Imple	ementation	128
5.8	Tools	for Analy	vsis	129
5.9	•		ient's Perception	129
5.10	Review	w of Liter	ature	129
5.11	Hospi	tals Cons	idered for the Study	
		0	rect Sources)	131
5.12			nterpretation	133
	5.12.1	Crosstab	oulation	133
			on and Model Fit	137
		Factor A		140
	5.12.4	Regressi	on Analysis	147

	5.13	5.12.5 Descriptive Statistics Conclusion	149 153
		References Annexure	153 154
_			154
6		elerating Development of Medical Devices ng Human-Machine Interface	161
		-	101
		anjan Karati, Swarupananda Mukherjee, Souvik Roy Bhupendra G. Prajapati	
		Introduction	162
		HMI Machineries	162
		Brain–Computer Interface and HMI	165
		HMI for a Mobile Medical Exoskeleton	165
		Human Artificial Limb and Robotic Surgical	100
	0.5	Treatment by HMI	167
	6.6	Cognitive Enhancement by HMI	170
		Soft Electronics for the Skin Using HMI	170
	6.8	Safety Considerations	171
	6.9	Conclusion	173
	0.9	References	174
-	ть.		
7		Role of a Human-Machine Interaction (HMI) System he Medical Devices	183
		ara Alidousti Shahraki and Mohsen Aghabozorgi Nafchi	105
		Introduction	184
	7.1		184
		Patient Experience	185
	7.3 7.4	Cognitive Science	190
	7.4	HCI System Based on Image Processing	190
	7.5	7.5.1 Patient's Facial Expression	192
		7.5.2 Gender and Age	193
		7.5.3 Emotional Intelligence	194
	7.6	Blockchain	201
		Virtual Reality	201
	7.8	The Challenges in Designing HCI Systems	203
	/.0	for Medical Devices	206
	7.9	Conclusion	208
	1.7	References	207
		Neiciences	208

	Felemed		iteraction in Leveraging the Concept	211
Diț	oa K. Isr	ani and	Nandita S. Chawla	
-	Introd			212
8.2	Innov	ative Dev	velopment in HMI Technologies	
	and It	s Use in '	Telemedicine	213
	8.2.1	Nanotee	chnology	214
	8.2.2	The Inte	ernet of Things (IoT)	215
	8.2.3	Internet	of Medical Things (IoMT)	216
		8.2.3.1	Motion Detection Sensors	217
		8.2.3.2	Pressure Sensors	217
		8.2.3.3	Temperature Sensors	217
		8.2.3.4	Monitoring Cardiovascular Disease	217
		8.2.3.5	Glucose Level Monitoring	217
		8.2.3.6	Asthma Monitoring	217
		8.2.3.7	GPS Smart Soles and Motion	
			Detection Sensors	218
		8.2.3.8	Wireless Fetal Monitoring	218
		8.2.3.9	Smart Clothing	218
	8.2.4	AI		219
			e Learning Techniques	220
		Deep Le		221
			Monitoring Devices, Augmented and Virtual	222
			Technology	223
	8.2.9	Robotic	S	223
			Robotics in Healthcare	224
		8.2.9.2	History of Robotics	224
		8.2.9.3		224
		5G Tech	nnology	225
	8.2.11			225
		Big Dat		226
			Computing	226
		Blockch		227
			Clinical Trials	228
			Patient Records	228
			Drug Tracking	228
			Device Tracking	229
8.3			Utilizing HMI in Healthcare	
		lemedici		230
	8.3.1	Emotive	e Telemedicine	230

		8.3.2	Ambient Assisted Living	232
			8.3.2.1 Wearable Sensors for AAL	232
		8.3.3	Monitoring and Controlling Intelligent	
			Self-Management and Wellbeing	233
		8.3.4	Intelligent Reminders for Treatment, Compliance,	
			and Adherence	233
		8.3.5	Personalized and Connected Healthcare	233
	8.4	Obsta	cles to the Utilize, Accept, and Implement HMI	
		in Tele	emedicine	234
		8.4.1	Data Inconsistency and Disintegration	234
		8.4.2	Standards and Interoperability are Lacking	234
		8.4.3	Intermittent or Non-Existent Network Connectivity	234
		8.4.4	Sensor Data Unreliability and Invalidity	235
		8.4.5	Privacy, Confidentiality, and Data Consistency	235
		8.4.6	Scalability Issues	235
		8.4.7	Health Consequences	235
		8.4.8	Clinical Challenges	236
		8.4.9	Nanosensors and Biosensors Offer Health Risks	236
		8.4.10	Limited Computing Capability and Inefficient	
			Energy Use	236
		8.4.11	Memory Space is Limited	237
		8.4.12	Models of Digital Technology are Rigid	
			and Sophisticated	237
		8.4.13	Regulatory Frameworks	237
		8.4.14	Incorporated IT Infrastructure	237
		8.4.15	Misalignment with Nations' e-Health Policies	238
		8.4.16	Implementing Costs	238
		8.4.17	Operational and Systems Challenges	238
		8.4.18	Logistical Challenges	239
		8.4.19	Communication Barriers	239
		8.4.20	Unique Challenges	239
	8.5	Concl	usions	239
		Refere	ences	240
9	Mal	cing Ho	ospital Environment Friendly for People:	
-		•	of HMI	247
			gum P., Badrud Duza Mohammad,	
			Kumar A. and Muhasina K.M.	
	9.1	Introd	luction	248
	9.2	A Scer	nario for Ubiquitous Computing	
			mbient Intelligence	249

9.3	Emer	rgence of Ambient Intelligence 250				
9.4		0	Advanced Human-Machine Interfaces	251		
9.5	Brain	Compute	er Interface (BCI)	252		
	9.5.1	The BCI	System: An Introduction	252		
	9.5.2	The Cha	aracteristics of a BCI	253		
		9.5.2.1	Dependent and Independent BCIs	253		
		9.5.2.2	Motor Disabilities: Options for Restoring			
			Function	253		
	9.5.3	Compoi	nents of BCI	254		
	9.5.4	Structur	e of the Human Brain and Its Signals	254		
		9.5.4.1	A Signal That is Evoked	256		
		9.5.4.2	Spontaneous Signals	256		
		9.5.4.3	Hybrid Signals	257		
9.6	Devel	opment i	n MHI Technologies and Their Applications	257		
9.7	Techr	iques of S	Signal Acquisition and Processing			
	Appli	ed to HM	Π	258		
9.8	Hospi		dly Environment for Patients	260		
	9.8.1	Physiolo	ogical Study State	260		
		9.8.1.1	Nature	260		
		9.8.1.2	Music	260		
	9.8.2	Pain Sta	te	260		
		9.8.2.1	Nature	260		
		9.8.2.2	Natural Light	261		
	9.8.3	Sleep		261		
		9.8.3.1	Nature Images	261		
	9.8.4		Experience	261		
			Patient's Satisfaction	261		
		9.8.4.2	Interaction	262		
9.9			f HMI for Patient-Friendly			
	Hospi	ital Envir		263		
	9.9.1		are and Engineering	263		
	9.9.2		s for Robotic Surgery and Human			
		Prosthet		265		
	9.9.3	1	Substitution System	266		
	9.9.4	Mobile 1	Robots and Wheelchairs With Neural			
		Interfac		267		
	9.9.5		ogy on Biometric System	268		
	9.9.6		ement of Cognition Level	269		
	9.9.7	fNIRS-EEG Multimodal BCI as a Future Perspective 27				

xvi Contents
--------------

	9.10	Conclu Referen		270 271	
			rging Application and Regulatory HMI in Healthcare	279	
10	Preet	am L. Ni	tion in the Neural Healthcare Industry ikam, Amol U. Gayke, Pavan S. Avhad, bad and Rishabha Malviya	281	
		Introdu		282	
	10.2	Stimula	tion of Muscles	283	
	10.3	Cochle	ar Implants	283	
		10.3.1		283	
		10.3.2	Prosthetics for Ears	284	
	10.4	Periphe	eral Nervous System Interaction	284	
	10.5		Electrodes	285	
	10.6	Flat-Int	erfaced Nerve Electrodes	287	
	10.7	0.7 Transverse and Longitudinal Intrafascicular			
		Electro	de (LIFE and TIME)	287	
	10.8	Multi-O	Channel Arrays That Penetrate	288	
		10.8.1	Numerous-Channel Arrays That Penetrate	288	
	10.9	Spinal C	Cord Stimulation and Central Nervous		
		System	Interaction	289	
		10.9.1	Cortical Connections	289	
		10.9.2	Stimulation of the Auditory Nucleus		
			and Ganglions	290	
		10.9.3	Stimulation of the Deep Brain	290	
	10.10	Compu	ter–Brain Interfaces	290	
	10.11	Conclu	sion	291	
		Referen	nces	291	
11	•		EHR in M-Healthcare Application	295	
	Eva K	aushik d	and Rohit Kaushik		
	11.1	Introdu	iction	296	
			Why EHR is Needed in the Nation?	296	
		11.1.2	Empowering Patients in Healthcare Management	297	
		11.1.3	Data Management in EHR	298	
		11.1.4	Long-Term Architectural Approach	298	
	11.2	•	ound Related Work	299	
	11.3	Methoo	01	300	
		11.3.1	Use-Cases on Ground Base Reality	300	

		11.3.2	Integration of Technology to Solve	
			Healthcare Issues	301
		11.3.3	Workflow	302
	11.4	Tools an	nd Technologies	303
	11.5	Limitati	ions	304
	11.6	Future S	Scope	305
		11.6.1	Personalized EHR Cards	305
	11.7	Discuss	ion	306
		11.7.1	Electronic Health Records and Personal Health	
			Records	306
		11.7.2	Physicians' Review Toward EHR	307
		11.7.3	Interoperability	307
	11.8	Conclus	sion	308
		Referen	ices	308
12	Role	of Huma	n-Machine Interface in the Biomedical	
			opment to Handle COVID-19 Pandemic	
			-	311
			nd Nabendu Chaki	
	12.1		iction: Background and Driving Forces	312
		12.1.1	Observed Scenario During May 2021	314
			12.1.1.1 Transmission Medium	314
		12.1.2	Limitation of Vaccine Technology	314
			Adverse Effect of Protective Measure	314
		12.1.4	Revoking of Restrictions Causes Surges	
			in Pandemic	315
	12.2	Method	ls	315
		12.2.1	Determine Major Influencing Factors	316
		12.2.2	Analyzed the Selected Influencing Factor	317
			12.2.2.1 Evidence 1	318
			12.2.2.2 Evidence 2	318
			12.2.2.3 Evidence 3	320
		12.2.3	Managing Mechanism to Reduce	
			the Spreading Rate of COVID-19	320
		12.2.4	The Households Health Safety Systems to	
			Disinfect Outdoor Cloths	321
			12.2.4.1 Present Households Disinfect Systems	
			for Cloth and Personal Belonging	321
			12.2.4.2 The Outline of Households Health Safety	
			Systems to Disinfect Outdoor Clothes	322
		12.2.5	Upgradation of Individual Room	
			Air Conditioning System	324

			12.2.5.1 The Outline of the AI-Based Room	
			Ventilator System	324
		12.2.6	Design of Next-Generation Mask	324
	12.3	Results	0	325
	12.4	Conclu	sion	325
		Acknow	wledgment	325
		Referer	nces	326
13	Role	of HMI	in the Drug Manufacturing Process	329
			ı, Kevinkumar Garala	
	and B	hupend	ra G. Prajapati	
	13.1	Introdu	iction	330
		13.1.1	Dialogue Systems	331
	13.2	Types of	of HMI	333
	13.3		ages and Disadvantages of HMI	334
	13.4	3.4 Roles of HMI in the Pharmaceutical		
		Manufa	acturing Process	339
	13.5	Comm	on Applications for Human-Machine Interfaces	343
		13.5.1	Automotive Dashboards	343
		13.5.2	Monitoring of Machinery and Equipment	344
		13.5.3	Digital Displays	344
		13.5.4	Digital Displays Building Automation	344
		13.5.5	Video and Audio Production	344
	13.6	13.6 Healthcare System-Based Human-Computer Interact		n 345
		13.6.1	Healthcare System	345
		13.6.2	Teaching of Medicine and Physiology	346
	13.7	Performance Test of Healthcare System Based on HCI		349
		13.7.1	HCI-Based Medical Teaching System	349
	13.8	Humar	n-Machine Interface for Healthcare	
		and Rehabilitation		
		13.8.1	Ambient Intelligence and Ubiquitous Computin	g
			Scenario	349
		13.8.2	The Advanced Human-Machine Interface	
			Framework	350
	13.9 Human-Machine Interface for Research Reactor:		n-Machine Interface for Research Reactor:	
		Instrun	nentation and Control System	351
	13.10	Future Scope of Human-Machine Interface (HMI)		
		Conclusion		
		Referer	nces	353

Break	Breaking the Silence: Brain-Computer Interface			
for Co	357			
Abhis	hek Mok	kal, Smita Andhale, Prathmesh Wagh,		
Vivek	Bhosale	e and Rishabha Malviya		
14.1	· · · · · · · · · · · · · · · · · · ·			
14.2	Survey	359		
14.3	Technic	361		
	14.3.1	Potentials Associated With an Event	361	
			361	
	14.3.3	Evoked Visual Possibilities	361	
	14.3.4	Sensorimotor Rhythms	362	
	14.3.5	Motor Imagery	362	
14.4	4 BCI Components			
	14.4.1	Signal Acquisition	363	
	14.4.2	Signal Processing	363	
	14.4.3	Extraction of Features	363	
		e e	363	
14.5	<ul><li>4.6 BCI Invasion</li><li>4.7 BCI With Limited Invasion</li></ul>		364	
14.6			364	
14.7			364	
			364 365	
14.9	BCI Applications			
			365	
			365	
			366	
			366	
			366	
		e 1	366	
14.9.7 Reduces Healthcare Costs			367	
14.10	BCI He	althcare Challenges	367	
			367	
			367	
	14.10.3	Legality	368	
	14.10.4	Freedom of Privacy	368	
	14.10.5	Issues With Standardization	368	
	14.10.6	Problems With Reliability	368	
	14.10.7	Prolonged Training Process	369	
	14.10.8	Expensive Acquisition and Control	369	
	for Co Preeta Abhis Vivek 14.1 14.2 14.3 14.4 14.5 14.6 14.7 14.8 14.9	for Community Preetam L. Nie Abhishek Mole Vivek Bhosala 14.1 Introdu 14.2 Survey 14.3 Technid 14.3.1 14.3.2 14.3.3 14.3.4 14.3.5 14.4 BCI Co 14.4.1 14.4.2 14.4.3 14.4.4 14.5 BCI Sig 14.6 BCI Invi 14.7 BCI Wi 14.8 BCI No 14.9 BCI App 14.9.1 14.9.2 14.9.3 14.9.4 14.9.5 14.96 14.9.7 14.10 BCI Het 14.10.1 14.10.2 14.10.5 14.10.6 14.10.7	<ul> <li>14.4.1 Signal Acquisition</li> <li>14.4.2 Signal Processing</li> <li>14.4.3 Extraction of Features</li> <li>14.4.4 Signal Categorization</li> <li>14.5 BCI Signal Acquisition Methods</li> <li>14.6 BCI Invasion</li> <li>14.7 BCI With Limited Invasion</li> <li>14.8 BCI Not Invasive</li> <li>14.9 BCI Applications</li> <li>14.9.1 Movement</li> <li>14.9.2 Recreation</li> <li>14.9.3 Reconstruction</li> <li>14.9.4 Interaction</li> <li>14.9.5 Interaction With Others</li> <li>14.9.6 Diagnosis and Treatment of Depression</li> </ul>	

XX CONTENTS

	14.11	Conclu		370
		Referer	nces	370
15	Artib	en Patel	erspective: Human-Machine Interfaces , Ravi Patel, Rakesh Patel, Bhupendra Prajapati	375
	and Shivani Jani			
		Abbreviations		
	15.1	Introdu		376
	15.2	•	re Regulations Needed?	377
		15.2.1	2	378
		15.2.2	1	378
		15.2.3		378
		15.2.4		378
			Compensation	379
	15.0	15.2.6	0	379
	15.3		ulatory Perspective	379
		15.3.1	History of Medical Device Regulation and Its	200
		1522	Supervision in the United States Classification of Medical Devices	380 384
		15.3.2		
		15.3.3		385
		15.3.4	How to Determine if the Product is a Medical Device or How to Classify the Medical Device	385
		15.3.5	Device Development Process	387
		15.3.6	-	391
		15.3.7	e	393
		15.3.8	Human Factors and Medical Devices	395
		15.3.9	Continuous Improvement of Regulations	402
	15.4	Conclu		407
		Referer	nces	407
16	Towa	rds the ]	Digitization of Healthcare Record Management	411
	Shiva	ni Patel	, Bhavinkumar Gayakvad, Ravisinh Solanki,	
			d Dignesh Khunt	
	16.1	Introdu	iction	412
	16.2	Digital	Health Records: Concept and Organization	416
	16.3	Mechai	nism and Operation of Digital Health Record	419
		16.3.1	Physician-Hosted EHR	420
		16.3.2	Remotely-Hosted EHR	420
			16.3.2.1 Subsidized System	420
			16.3.2.2 Dedicated Hosted System	421

		16.3.2.3	Cloud-Based or Internet-Based	40.1	
164	Domofit	a of Dicita	Computing	421 426	
16.4		-	l Health Records	426 426	
	16.4.1 16.4.2	Security Costs		420 427	
	16.4.2			427	
	16.4.4			427	
	16.4.4	0	and Readability	427	
	16.4.6	Practice Management			
	16.4.7	6			
16.5			gital Health Records	428 428	
10.0	16.5.1 Completeness				
		Correctness			
		Complex		429 429	
	16.5.4			430	
		16.5.4.1	•	430	
			Hardware, Software and Network	430	
			Procedure	430	
16.6	Risk & Problems Associated With the System				
		Lack of C		431	
	16.6.2	Privacy a	nd Data Security Issues	431	
	16.6.3	Problems in Patient Matching			
	16.6.4	Alteration of Algorithms in Decision-Support			
		Models		432	
	16.6.5				
16.7	Future Benefits				
16.8	Miscell	aneous		434	
	16.8.1	Policies I	Regarding Data Exchange	434	
		16.8.1.1	Directed Exchange	435	
		16.8.1.2		435	
			Consumer-Mediated Exchange	435 438	
	16.8.2	8			
		16.8.2.1		438	
			Australia	439	
		16.8.2.3	Canada	439	
		16.8.2.4	USA	440	
		16.8.2.5	China	440	
	16.8.3	Data Ana		442	
	16.8.4		Benefits to the Stakeholders	443	
		16.8.4.1	Advantages to the Patient	443	
		16.8.4.2	Advantages to the Healthcare Providers	444	

		16.8.4.3 Advantages to the Society	444			
	16.9	Conclusion	445			
		References	446			
17	Intell	Intelligent Healthcare Supply Chain				
		g Kalaria, Shambhavi Singh and Bhupendra G. Prajapati				
	17.1	Introduction	450			
	17.2	Supply Chain – Method Networking?	451			
	17.3	Healthcare Supply Chain and Steps Involved				
	17.4	Importance of HSC				
	17.5	Risks and Complexities Affecting				
		the Globally Distributed HSC	453			
		17.5.1 Legacy HSC	453			
		17.5.1.1 SWOT Analysis of Legacy HSC	454			
		17.5.2 What is an Intelligent Supply Chain?	454			
		17.5.3 Difference Between Legacy HSC				
		and Intelligent HSC	456			
	17.6	6 Technologies Come to Aid to Build				
		an Intelligent HSC	457			
		17.6.1 HMI	457			
		17.6.2 AI	458			
		17.6.3 ML/DL	459			
	17.7	Blockchain	460			
		Robotics				
		Cloud Computing				
		Big Data Analytics (BDA)				
		Industry 4.0				
		Internet of Things (IoT)				
		Digital Twins				
		Supply Chain Control Tower				
		Predictive Maintenance	472			
		A Digital Transformation Roadmap	473			
		Prerequisite for Designing Intelligent HSC	475			
		HMI—Usage in HSC Management	476			
		HMI—A Face of the Supply Chain Control Tower				
		The Intelligent Future of the Healthcare Industry	478			
	17.21	Conclusion	480			
		References	481			

## Foreword

It gives me immense pleasure to write the foreword for this book edited by Dr. Rishabha Malviya. Dr. Malviya is a highly dedicated and enthusiastic individual who works tirelessly to achieve his goals. His commitment to his work is unparalleled, and he is truly one of the most exceptional people I have had the pleasure of meeting.

As for the book's topic, Human-Machine Interface (HMI) is a hot trend in the medical field. Developers are always exploring ways to enhance the technologies that play a crucial role in daily life. In the context of a hospital, HMI holds immense significance as it enables devices to function better and enhance the experience of both healthcare professionals and patients. The implementation of HMI in a clinical setup offers a range of advantages. The development of dynamic human-machine interfaces and user interfaces has significantly benefited the healthcare sector. As new and innovative techniques for patient care emerge, HMI will continue to evolve, offering even more benefits for healthcare professionals and patients alike.

As a comprehensive resource, this book empowers readers to utilize their skills and expertise to advance healthcare through HMI. The book delves into a variety of HMI tools and related strategies that can be used to evaluate, design, regulate, and upgrade healthcare delivery systems and processes. Finally, it offers a comprehensive overview of the state-of-the-art applications of computational intelligence in the healthcare sector, providing insights into how these technologies can be utilized to improve patient care and outcomes. I fully believe that this book will be a helpful reference for healthcare professionals, academicians, students, and computer engineers who work on, or want to learn about, medical systems.

> **Mr. Dhruv Galgotia** CEO, Galgotias University, Greater Noida, India

## Preface

With increasing healthcare expenditures and greater demand for affordable, user-friendly medical devices, Human-Machine Interface (HMI) has emerged as an essential trend in product development. HMI systems offer the controls necessary for a user to operate a device or instrument. When done correctly, they facilitate simple, dependable accessibility and streamline technological operations. HMI systems are vital in the medical sector and can accelerate recovery, improve clinical monitoring, and even save lives.

Most medical procedures are improved by HMI systems, from calling an ambulance to ensuring that a patient receives adequate treatment. This book describes biomedical technologies in the context of advanced HMI, with a focus on direct brain-computer connection. This book describes several HMI tools and related techniques for analyzing, creating, controlling, and upgrading healthcare delivery systems, and provides details regarding how advancements in technology, particularly HMI, ensure ethical and fair use in patient care.

Written by renowned authors from various regions, this book starts an introduction to basics of the human-machine interface and moves on to a second chapter that deals with how HMI can improve healthcare practices. A third chapter explains the connection between patient safety and security using HMI, and a fourth discusses how HMI improves the quality of patient care. Chapter 5 explores the most advanced application of the technology in the form of robotics for healthcare, while the sixth and seventh chapters investigate the latest research in the development of medical devices that use HMI. Chapter 8 provides current information about the robust technology framework that enables telemedicine. Chapter 9 discusses the hot topic, the "environment-friendly hospital." This chapter gives a better understanding of how to improve the environment of hospitals and therefore make future healthcare places and spaces more responsive to patient needs.

The second half of the book explores and investigates how the most recent advancement of this technology can improve patient care. Chapter 10 explains HMI's emergence as a highly successful means of treating mental health issues, depression, Alzheimer's disease, dementia, and paralysis by repairing human cognitive or sensory-motor functions. The next chapter deals with the privacy of patients and the security of their information, specifically with the adoption of electronic records in the healthcare industry, while Chapter 12 explores the latest progress made in combating COVID-19 with advanced medical devices. Chapter 13 outlines how pharmaceutical manufacturing has entered a new level of productivity and quality assurance thanks to HMI. The next chapter discusses how the brain-computer interface is used for communication, while Chapter 15 focuses on important regulatory perspectives about the implementation of HMI. The book concludes with two chapters that address record and supply chain management.

Potential readers of the book include practitioners and researchers interested in applying the ideas of human-computer interaction. Our thanks go to all the authors for their great contributions to this book's success. We also want to express our regards to the prestigious Wiley and Scrivener Publishing for their continuous kind support and guidance.

> Editors August 2023

## Acknowledgement

Firstly, we would like to express our gratitude toward the superpower that enables us to complete this work.

We are also grateful for our friends who always encourage and motivate us to start this work. A special word of gratitude to the management of Galgotias University, who believe in us and give us the opportunity so we can serve our nation through our education.

We are eternally grateful to our families for their continuous support and encouragement that made it possible to complete this task. They all kept us going beyond all the ups and downs.

Many thanks to all contributors, without their participation, this task cannot be completed. At last, we would like to thank, our publisher whose constant support and guidance assisted us in making the best possible book.