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Health informatics — Point-of-care medical device communication — Part 10415: Device specialization — Weighing scale

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

Partie 10415: Spécialisation des dispositifs — Plateau de balance



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Case postale 56 • CH-1211 Geneva 20
Tel. + 41 22 749 01 11
Fax + 41 22 749 09 47
E-mail copyright@iso.org
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Institute of Electrical and Electronics Engineers, Inc.
3 Park Avenue, New York • NY 10016-5997, USA
E-mail stds.ipr@ieee.org
Web www.ieee.org

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Contents

	Page
Foreword.....	v
Introduction.....	vii
1. Overview.....	1
1.1 Scope.....	1
1.2 Purpose.....	1
1.3 Context.....	2
2. Normative references	2
3. Definitions, acronyms, and abbreviations	2
3.1 Definitions.....	2
3.2 Acronyms and abbreviations	3
4. Introduction to ISO/IEEE 11073 personal health devices.....	3
4.1 General.....	3
4.2 Introduction to IEEE 11073-20601 modeling constructs	4
5. Weighing scale device concepts and modalities	4
5.1 General.....	4
5.2 Body weight.....	5
5.3 Body height.....	5
5.4 Body mass index	5
6. Weighing scale domain information model	5
6.1 Overview.....	5
6.2 Class extensions	5
6.3 Object instance diagram.....	6
6.4 Types of configuration	7
6.5 Medical device system object	8
6.6 Numeric objects	11
6.7 Real-time sample array objects	15
6.8 Enumeration objects.....	15
6.9 PM-store objects	15
6.10 Scanner objects	15
6.11 Class extension objects	15
6.12 Weighing scale information model extensibility rules.....	15
7. Weighing scale service model.....	15
7.1 General.....	15
7.2 Object access services.....	15
7.3 Object access event report services	17

This is a preview of "ISO/IEEE 11073-10415...". Click here to purchase the full version from the ANSI store.

8. Weighing scale communication model	17
8.1 Overview.....	17
8.2 Communications characteristics.....	17
8.3 Association procedure.....	18
8.4 Configuring procedure	19
8.5 Operating procedure.....	21
8.6 Time synchronization.....	21
9. Test associations	21
9.1 Behavior with standard configuration	22
9.2 Behavior with extended configurations.....	22
10. Conformance.....	22
10.1 Applicability.....	22
10.2 Conformance specification.....	22
10.3 Levels of conformance	23
10.4 Implementation conformance statements.....	23
Annex A (informative) Bibliography.....	28
Annex B (normative) Any additional ASN.1 definitions.....	29
Annex C (normative) Allocation of identifiers	30
Annex D (informative) Message sequence examples	31
Annex E (informative) Protocol data unit examples	33

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Foreword

ISO (the International Organization for Standardization) is a worldwide federation of national standards bodies (ISO member bodies). The work of preparing International Standards is normally carried out through ISO technical committees. Each member body interested in a subject for which a technical committee has been established has the right to be represented on that committee. International organizations, governmental and non-governmental, in liaison with ISO, also take part in the work. ISO collaborates closely with the International Electrotechnical Commission (IEC) on all matters of electrotechnical standardization.

IEEE Standards documents are developed within the IEEE Societies and the Standards Coordinating Committees of the IEEE Standards Association (IEEE-SA) Standards Board. The IEEE develops its standards through a consensus development process, approved by the American National Standards Institute, which brings together volunteers representing varied viewpoints and interests to achieve the final product. Volunteers are not necessarily members of the Institute and serve without compensation. While the IEEE administers the process and establishes rules to promote fairness in the consensus development process, the IEEE does not independently evaluate, test, or verify the accuracy of any of the information contained in its standards.

The main task of technical committees is to prepare International Standards. Draft International Standards adopted by the technical committees are circulated to the member bodies for voting. Publication as an International Standard requires approval by at least 75 % of the member bodies casting a vote.

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ISO/IEEE 11073-10415 was prepared by the 11073 Committee of the Engineering in Medicine and Biology Society of the IEEE (as IEEE Std 11073-10415-2008). 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*

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- *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 — Independant 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 weighing scales. These standards align with, and draw upon, the existing clinically focused standards to provide support for communication of data from clinical or personal health devices.

^a For information on references, see Clause 2.