Medical Device Systems Engineering Knowledge Repository Report

Esteban Solorzano

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Preface

Caution

The report published on this website is a draft and subject to frequent updates. Please be aware that the content may change over time as revisions are made. Thank you for your understanding.



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If you have questions, comments, or feedback, please contact Esteban Solorzano. este ban. solorzano@gmail.com

This is the report of the Medical Device Systems Engineering Knowledge Repository (MDSE-KR). The report was written in markdown (a markup language) using the Visual Studio IDE, it was rendered in Quarto to publish html and PDF outputs. This report can be easily re-generated, maintained, transferrable and even upgraded.

Summary

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The field of medical device development is rapidly evolving, driven by technological advancements and the increasing complexity of healthcare systems. Ensuring the safety, efficacy, and compliance of these devices is paramount for protecting patient health and well-being. In response to this need, this project proposes the creation of a comprehensive knowledge repository focusing on the systems engineering aspects of medical device development. The objectives of this endeavor include designing a cohesive resource that compiles knowledge and best practices, educating professionals and students in systems engineering about the unique challenges of medical devices, offering practical guidance throughout the device lifecycle, and deepening understanding of regulatory requirements. The proposed methodology entailed developing the book systematically, incorporating industry standards and literature reviews, gathering insights through interviews and surveys, structuring content with clarity and coherence, and validating accuracy through peer review. Leveraging tools like Git and GitHub, this project aims to facilitate collaboration and ensure the relevance of its content. This report encapsulates the systematic approach and comprehensive scope of the project, promising to deliver a valuable resource for those involved in medical device development and systems engineering.

2 Introduction

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The field of medical device development is rapidly evolving, with advancements in technology and the growing complexity of healthcare systems. Ensuring the safety, efficacy, and compliance of medical devices is paramount to protect patient health and well-being. This project proposes the creation of a comprehensive knowledge respository that delves into the systems engineering aspects of medical device development.

2.1 Impact

The creation of a comprehensive knowledge repository on the systems engineering of medical devices is essential to bridge the knowledge gap between engineering and healthcare, ensuring the continued development of safe and effective medical technologies. This project aims to contribute significantly to this important field, benefiting professionals, students, and the broader healthcare industry.

This system will serve as a valuable resource for:

- Systems engineers looking to specialize in medical device development.
- Healthcare professionals and clinicians seeking a deeper understanding of the engineering processes behind medical devices.
- Regulatory experts striving to align systems engineering practices with compliance requirements.

1	.0	

• Students and educators in systems engineering and biomedical engineering programs.

Part I Background

3 Background

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3.1 Systems Engineering in Medical Device Industry

David M. Cronin from a company called Cognition that provides software solutions for requirements management and lifecycle management of medical devices states that for many, the phrase "systems engineering" is typically associated with large aerospace and defense companies; companies making products that are developed over many years, with long lives in the market, extremely high costs, and a relatively low total number of products manufactured. Many of these companies also employ "large," permanent teams of systems engineers, which could be daunting to a small device company. Few device engineers are seen at conferences on systems engineering. Instead, these events include transportation, infrastructure, government, space, and of course aerospace and defense. A casual observer might think that systems engineering is not intended for the medical device industry. This is unfortunate!" (Cronin, n.d.a).

3.2 What is a Medical System?

According to Section 201(h) of the Federal Food, Drug, and Cosmetic Act, a medical device (system) is "any instrument, machine, contrivance, implant, in vitro reagent that's intended to treat, cure, prevent, mitigate, diagnose disease" ("21 USC 321: Definitions; Generally," n.d.a).

3.2.1 Examples of medical systems

The following are examples of medical systems. The list is not exhaustive.

• Spinal Tumor RF Ablation System



- Invasive / Non Invasive Ventilator
- Renal RF Ablation System
- Vascular Compression System
- Intra-Aortic Balloon Pump
- Endoilluminator
- RF Puncture Generator







- Bleed Monitoring System
- Pulsed Field Ablation System
- Nerve Tissue RF Ablation System

3.3 Medical Device Regulation

The medical devices that are manufactured, marketed and commercialized are subject to regulation by numerous worldwide regulatory bodies, including the FDA and comparable international regulatory agencies. These agencies require manufacturers of medical devices to comply with applicable laws and regulations governing development, testing, manufacturing, labeling, marketing and distribution. Medical devices are also generally subject to varying levels of regulatory control based on risk level of the device.

In the U.S., authorization to distribute a new device can generally be met in one of two ways ("Boston Scientific SEC Filings," n.d.a):

3.3.1 Premarket Notification (510(k))

The premarket notification (510(k)) is made to the FDA to demonstrate that the device is as safe and effective as, or substantially equivalent to, a legally marketed device (the "predicate" device). Applicants must submit performance data to establish substantial equivalence. In some instances, data from human clinical trials must also be submitted in support of a 510(k)







premarket notification. If so, these data must be collected in a manner that conforms to the applicable Investigational Device Exemption (IDE) regulations. The FDA must issue a decision finding substantial equivalence before commercial distribution can occur. Changes to cleared devices that could not significantly affect the safety or effectiveness of the device can generally be made without additional 510(k) premarket notifications; otherwise, a new 510(k) is required.

3.3.2 Premarket Approval (PMA) Application

The submission of a premarket approval (PMA) application to the FDA demonstrates that the device is safe and effective for its intended use. This approval process applies to most Class III devices and generally requires clinical data to support the safety and effectiveness of the device, obtained in adherence with IDE requirements. The FDA will approve the PMA application if it finds that there is a reasonable assurance that the device is safe and effective for its intended purpose and that the proposed manufacturing is in compliance with the Quality System Regulation (QSR). For novel technologies, the FDA may seek input from an advisory panel of medical experts and seek their views on the safety, effectiveness and benefit-risk of the device. The PMA process is generally more detailed, lengthier and more expensive than the 510(k) process.

3.4 European Union (EU)

In the European Union (EU), it is required to comply with the Medical Device Regulation (MDR or EU MDR) which became effective in May 2021, superseding the existing Medical Device and Active Implantable Medical Device Directives. Medical devices which have a valid CE Certificate ("CE Marking," n.d.) to the prior Directives (issued before May 2021) can continue to be sold during the applicable transition period or until the CE Certificate expires, whichever comes first, providing there are no significant changes to the design or intended use. The CE Mark, which is required to sell medical devices in the EU is affixed following a Conformity Assessment and either approval from the appointed independent Notified Body or through self-certification by the manufacturer. The selected pathway to CE marking is based on device risk classification. CE marking indicates conformity to the applicable General Safety and Performance Requirements (GSPRs) for the MDR. The MDR changes multiple aspects of the regulatory framework for CE marking, such as increased clinical evidence requirements, changes to labeling, and new requirements, including Unique Device Identification (UDI), and many new post-market reporting obligations. MDR also modifies and increases the compliance requirements for the medical device industry and will continue to require significant investment over the next few years to transition all products. The CE mark continues to be a prerequisite for successful registration in many other global geographies. In addition, other EU countries continue to impose significant local registration requirements despite the implementation of

MDR, and the United Kingdom has introduced new requirements following its exit from the EU.

It is also required to comply with the regulations of every other country where the product will be commercialized before launch or maintain new products on the market, including regulations that have been introduced in many countries in the Middle East and Southeast Asia that previously did not have medical device regulations, or had minimal regulations. In Japan, it is required to comply with Japan's Ministry of Health, Labor and Welfare (MHLW) regulations. In conjunction with the MHLW, the Pharmaceutical and Medical Device Agency is an independent agency that is responsible for reviewing drug and medical device applications and works with the MHLW to assess new product safety, develop comprehensive regulations, and monitor post-market safety.

The FDA and other worldwide regulatory agencies and competent authorities actively monitor compliance to local laws and regulations through review and inspection of design and manufacturing practices, record-keeping, reporting of adverse events, labeling and promotional practices. The FDA can ban certain medical devices, detain or seize adulterated or misbranded medical devices, order recall or market withdrawal of these devices and require notification of health professionals and others with regard to medical devices that present unreasonable risks of substantial harm to the public health. The FDA may also enjoin and restrain a company for certain violations of the Food, Drug and Cosmetic Act and the Safe Medical Devices Act, pertaining to medical devices, or initiate action for criminal prosecution of such violations. Regulatory agencies and authorities in the countries where business is done can halt production in or distribution within their respective country or otherwise take action in accordance with local laws and regulations.

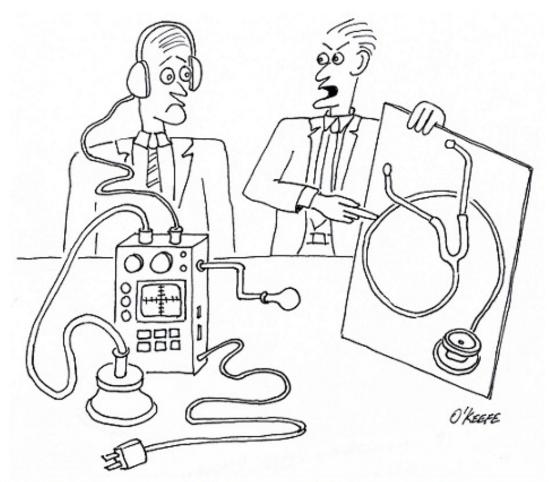
International sales of medical devices manufactured in the U.S. that are not approved by the FDA for use in the U.S., or that are banned or deviate from lawful performance standards, are subject to FDA export requirements. Additionally, exported devices are subject to the regulatory requirements of each country to which the device is exported.

Important

According to Webinar Applications of Systems Engineering in Healthcare, lead by Chris Unger, Ph.D. ESEP of GE Healthcare and Vincent Balgos of Jama Software, some challenges faced by the medical device industry:

- Constant time pressure launching safe and effective products
 - $-\sim70\%$ of medical products are delivered late.
 - Time to define requirements has increased 29% and unplanned requirements churn has increased 81%.
- Shifting regulatory landscape

- E.g., Software as a Medical Device (SaMD), Software in a Medical Device (SiMD), Medical Device Regulation (MDR), In Vitro Diagnostic Regulation (IVDR), etc.
- Cost of adherence and impact on business strategy.
- Quality issues represent significant financial impact
 - Non-routine quality events cost the industry between \$2.5 and \$5 billion per year on average.
 - On average, one company per year has seen a 10% drop in share price after a single, major quality event.
- Constant increasing complexity, particularly with software
 - Software has become the biggest cause of medical device recalls.
 - E.g., The global artificial intelligence/machine learning medical device market was an estimated \$4 billion in 2022 and is anticipated to reach \$35.5 billion by 2032.
 - E.g., Remote patient monitoring market was valued at \$2.1 billion in 2022 and expected to reach \$8.1 by 2030.
 - Increasing risk of cybersecurity concerns.
- Heavy focus on acquisition and geographically distributed development teams
 - E.g., The medical devices sector in Q2 2023 witnessed deals worth \$33 billion, a growth of 42% compared to Q1 2023 and 87% compared to Q2 2022.



Interesting design, but this is more of what we had in mind.

3.5 Medical System Product Life Cycle

- Exploratory: Is there viability to solve a clinical need?
- Technology Development: Can we make this technology?
- Product Development: Create the end product.
- Sustaining: Keep a product on the market and enhance the system.

Many life saving devices come with significant risk which must be mitigated through a defined system design process. A seamless integration of the design and development process and the safety risk management process will allow devices to be safety used on humans. The

development process is described in ISO 13485, the international standard for the development of medical devices. ISO 14971 is the international standard for the evaluation of the safety risk of a medical device. Universities and companies hoping to use their devices in clinical trials on patients are required to follow a well-defined process incorporating design and development planning, design input, design output, design review, design verification, and design validation (Wehde 2020).

3.6 Role as Medical Device Systems Engineer

On their day to day, Medical device Systems Engineers (MDSE) interact with internal and external stakeholders.

3.6.1 Internal stakeholders

Some of the internal stakeholders that MDSEs interact with are:

- Bioinformatics: These disciplines involve the use of computational tools and biological data to develop technologies and software for managing biological information, genomics, and drug development.
- Biotechnology
- Biomedical Engineering: This discipline is at the core of medical system development. Biomedical engineers apply principles of engineering to healthcare and medical fields. They work on devices, imaging technology, prosthetics, and various medical equipment.
- Chemical Engineering: In the development of pharmaceuticals, drug delivery systems, and the manufacturing of medical substances, chemical engineers play a significant role in ensuring the efficiency and safety of these elements.
- Clinical Research
- Control Engineering: Control engineers work on systems that require precise control, such as automated drug delivery systems, robotics in surgery, or other systems where accurate control is necessary.
- Data Science and Analytics
- Design Quality Assurance
- Electrical Engineering: Electrical engineers play a crucial role in medical systems, especially in the design of medical devices that involve electronics, sensors, and control systems. They work on everything from circuit design to signal processing.
- Finance
- Industrial Engineering: Industrial engineers may focus on optimizing healthcare systems, streamlining processes in hospitals or clinics, and improving the overall efficiency of healthcare delivery.

- Materials Engineering: Developing new materials that are biocompatible, durable, and safe for medical devices, implants, and equipment is crucial. Materials engineers contribute their expertise in selecting and designing materials suitable for medical use.
- Mechanical Engineering: Mechanical engineers contribute to the design and development of medical devices, ranging from prosthetics to complex imaging equipment and robotic surgical systems. They focus on mechanics, materials, and product design.
- Project Management
- Regulatory Affairs and Compliance
- Software Engineering
- Computer Science: With the advancement of medical technology, software engineers and computer scientists are essential in developing the software that operates medical devices, manages patient data, and enables communication between different systems.
- Supply Engineering
- Systems Engineering

3.6.2 External stakeholders

Some of the external stakeholders that MDSEs interact with are:

- Patients
- Medicine and Healthcare Professionals
- Insurance Companies
- Governments
- Standards Organizations
- Distributors
- Component suppliers

4 Medical Device Systems Engineering

Medical Device Systems Engineering is a multidisciplinary field that encompasses the design, development, and implementation of medical devices. It integrates engineering concepts, medical knowledge, regulatory compliance, and user-centered design principles to ensure the seamless functioning of complex medical systems. This approach bridges the gap between technical innovation and patient-centric care, leading to the creation of advanced devices that address healthcare challenges.

4.1 Components of Medical Device Systems Engineering

According to Nocchi (Nocchi 2023) the following are components that make up medical device systems engineering:

- Requirements Analysis and Definition: Understanding the clinical needs and user requirements is the foundation of any medical device. Engineers collaborate closely with medical professionals to define specifications, ensuring that the device aligns with its intended purpose.
- Design and Development: This phase involves translating requirements into tangible design elements, encompassing hardware, software, and user interfaces. Iterative design processes are common, enabling refinements based on feedback and testing.
- Risk Management: Identifying and mitigating risks is essential to ensure patient safety. Engineers assess potential hazards and develop strategies to minimize or eliminate them throughout the device's lifecycle.
- Verification and Validation: Rigorous testing and validation protocols are crucial to verify that the device meets its intended functionality and is safe for use. This includes laboratory testing, simulations, and clinical trials.
- Regulatory Compliance: Adhering to regulations set by authorities such as the FDA, EMA, or other regional bodies is paramount. Engineers ensure that devices meet these standards and navigate the complex landscape of approvals.
- Human Factors Engineering: Designing devices with user experience in mind is critical for healthcare professionals to effectively operate the technology in real-world settings. Ergonomics and usability are key considerations.
- Interoperability and Integration: Many medical devices are part of larger healthcare systems. Ensuring seamless integration and communication between devices is crucial for data exchange and coordinated care.

4.2 Challenges and Best Practices:

Nocchi (Nocchi 2023) states the following challenges and best practice systems engineers face with medical systems:

- Complexity and Innovation: The integration of diverse technologies, ranging from hardware to software, poses challenges in managing complexity while fostering innovation. Embracing modular design and agile methodologies can streamline the development process.
- Regulatory Compliance: Navigating the regulatory landscape requires a deep understanding of regional requirements. Engaging regulatory experts early in the process and maintaining thorough documentation eases the compliance journey.
- Human-Centered Design: Prioritizing the end user's needs and experience can significantly impact device adoption and success. Regular user testing and feedback loops help refine design elements.
- Risk Management: Identifying and managing risks requires a proactive approach. A
 thorough understanding of potential hazards, supported by regular risk assessments, is
 essential.
- Cross-Disciplinary Collaboration: Effective communication among engineers, medical professionals, regulatory experts, and other stakeholders is key. Collaboration fosters a comprehensive understanding of all facets of device development.

4.3 What is different about Medical Technology Industry versus the "Rest of Systems Engineering"?

Chris Unger (Chief Systems Engineer, GE Healthcare, ESEP) presented to the INCOSE Healthcare Working group key points that makes medical device systems engineering from the rest of the systems engineering:

- Compliance with regulations: Food and Drug Administration (FDA), International Electrotechnical Commission (IEC; French: Commission électrotechnique internationale), International Organization for Standardization (ISO), Health Insurance Portability and Accountability Act (HIPAA), International Classification of Diseases (ICD-10), etc.
- Defects are VERY costly to handle (audit, warning letters, recalls, ...)
- Most products are developed in a geographically distributed way
- Rapid technology evolution is impacting development and delivery
 - Artificial Intelligence (AI), Internet of Things (IoT), product variants, Mobile Medical Apps, complex deployment models, cloud.
- Extreme time to market pressures: 1st to market usually gains 80% share.
- Market Driven versus Contract Driven.

- Customer of "systems engineering" is internal (marketing, product management).
- Requirements, dates, budgets are more 'flexible'...success is judged by the market, not by a single customer.

5 How Medical Device Systems Engineering differ to other industries

Table 5.1 presents a comparative analysis of systems engineering practices across four diverse industries: Medical Device, Aerospace, Automotive, and Consumer Electronics. Each industry operates within distinct regulatory frameworks, market demands, and stakeholder expectations, leading to unique approaches in managing safety, performance, cost, complexity, and customization in product development.

Table 5.1: Comparative Analysis of Systems Engineering Characteristics Across Industries: Medical Device, Aerospace, Automotive, and Tech

Feature	Medical Device Industry	Aerospace Industry	Automotive Industry	Consumer Electronics Industry
Focus	Safety and regulatory compliance (FDA requirements)	Performance, reliability, and safety for critical applications	Safety, cost- effectiveness, and manufac- turability	Cost, functionality, and user experience
Life	Highly regulated	Long development	Cyclical	Fast-paced
Cycle	with strict change control processes	cycles with significant upfront investment	development with model year changes	development with shorter product lifecycles
Stakeh	oRiensler range including patients, doctors, and regulatory bodies	Primarily engineers, government agencies, and airline customers	Consumers, dealerships, and regulatory bodies	Consumers, retailers, and internal marketing/design teams
Risk	Extremely high	High focus on	Focus on safety	Focus on user
Man-	focus on	mitigating risks of	while balancing	safety and product
age-	mitigating risks	catastrophic failure	cost and manu-	liability
\mathbf{ment}	to patient safety		facturability	

Feature	Medical Device Industry	Aerospace Industry	Automotive Industry	Consumer Electronics Industry
Cost Con- sider- a- tions	Balancing cost-effectiveness with safety and regulatory requirements	Cost is a major driver, but safety remains paramount	Balancing cost with performance and consumer expectations	Cost is a major driver, with emphasis on economies of scale
	exityices can be complex with software, hardware, and user interaction	Highly complex systems with long development timelines and extreme performance demands	Complex systems with a focus on integration and manufacturabil- ity	Range from simple to complex, with emphasis on user experience and ease of use
Custon	customization allowed for medical devices	Limited customization, with focus on platform development for different variants	Some customization for different markets and customer segments	High degree of customization for specific features and functionalities

Table 5.2 presents a comparative analysis of systems engineering approaches across four diverse industries: Medical Device, Aerospace, Automotive, and Technology.

Table 5.2: Comparative Analysis of Systems Engineering Approaches Across Industries: Medical Device, Aerospace, Automotive, and Consumer Electronics

MedTech	Aerospace & Defense	Automotive	Tech
Environmentsmplex of Use (Physiological)	Complicated	Complicated to Complex (Level 2 Self-Driving and Above)	Complicated
Reliability High Expecta- tion	High	Medium	Low
Cadence 2 weeks - 6 years ComplexityMedium	10 years High	1 year - 5 years Medium	2 weeks - 1 year Medium

\mathbf{Users}	Medium variation in	Consistent	High variation	High variation
	training and capabilities	training and	in training and	in training and
	(Multiple Specialties)	capabilities	capabilities	capabilities
Variation	Medium	Medium	High	Medium
Funding	Market Demand	Contract,	Market Demand	Market Demand
		Limited		
		Buyers		
Procureme	e 4t dividual, Healthcare	Contract,	Individual,	Individual,
	System	Limited	Fleet	Fleet
		Buyers		

Table 5.3 provides examples of differences between systems engineering in medical device industry and other industries.

Table 5.3: Examples of differences across industries

FeatuMedical Device Industry (Example)	Other Industries (Example)
Focusafety and Regulatory Compliance	Performance and Technical Specifications
Examapterdiac pacemaker is being developed. Systems	An airplane wing is being
engineers focus on volume, power efficiency, and therapy performance to achieve optimal therapy performance and longevity.	designed. Systems engineers focus on weight, strength, and aerodynamic efficiency to achieve optimal fuel consumption and flight performance.
Life Highly Variable Regulation and	More Flexible and Iterative
Cy- Change Control Processes cle	Development Cycles

FeatuMedical Device Industry (Example)

Example gnificant software bug is discovered in a blood glucose monitor after initial release. A software patch is prioritized, developed, verified, validated, and released relatively quickly through a field update.

A minor software bug is discovered in a remote monitoring system for blood glucose monitors after initial release. A software patch can be released quickly through a nightly deployment.

Stak Budder Range Including Patients, Doctors, and Regulatory Bodies

Exampleems engineers for a new insulin pump consider not only technical specifications but also user needs (e.g., easy for elderly patients to operate) and feedback from doctors regarding functionality and integration with existing hospital systems.

Risk Focus on Mitigating Risks to Patient Safety Man-

age-

ment

Example tential risk identified during the development of a surgical robot is the possibility of unintended arm movement during delicate procedures. Systems engineers use design for reliability to identify the required tolerance for minimizing the risk, and evaluate the design concepts against the required tolerance using cost-benefit analysis and engineering calculations.

Other Industries (Example)

During the development of a new car model, engineers discover a significant issue with the Advanced Driver Assistance Systems (ADAS). A software patch is prioritized, developed, certified, and released relatively quickly through an over-the-air update.

During the development of a new car model, engineers discover a minor issue with the infotainment system. A software patch can be released relatively quickly through an over-the-air update.

Primarily Engineers and Internal Stakeholders

While developing a new type of engine, the primary focus for systems engineers might be on meeting internal performance targets set by the company and collaborating with mechanical and electrical engineers on achieving those goals.

Risk Management is Important, But Tolerances May Be Higher

When designing a new bridge, there's a risk of structural failure during an earthquake. While safety is crucial, there might be a tolerance for a certain level of risk based on cost-benefit analysis and engineering calculations.

Important

According to Joseph Green Chief Systems Engineer from Medtronic from an email conversation on May 6, 2024, the main differences between how systems engineering is performed in the medical device industry versus other industries are as follows:

- 1. Funding and procurement require MedTech to self-fund or seek financing leading to a market-driven expectation. This leads to several differences in the systems engineering role: the need to understand the stakeholder business, negotiate trade-offs between a large number of (conflicting) external stakeholders, and make trade-offs throughout the program duration based on market fluctuations.
- 2. The strong, and growing, overlap between Tech and MedTech industries drive stake-holder expectations that MedTech provides similar user experience and cadence as Tech while maintaining reliability expectations of traditional MedTech. This leads to several differences in the systems engineering role: the need to understand and maintain knowledge of current Tech industry trends, adopt or at least accommodate agile methodologies, plan and execute the delivery of incremental value on short(er) timelines, and accommodate/compensate for the lower reliability of Tech products while integrating more of them into the healthcare environment.
- 3. The environments of use (i.e., use conditions) are very harsh and difficult to reduce to first principles. This leads to several differences in the systems engineering role: the need to continually reassess applicability of known use conditions, and identify and develop unique models for each application.
- 4. The cadence of release is highly variable and highly sensitive to market conditions. This leads to several differences in the systems engineering role: the need to dynamically negotiate and alter project scope based on competitive analysis and announcements, and continually and simultaneously focus on both increasing capability and reducing cost.

Methodology

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The study adopts a Systems Engineering approach, which involves analyzing the entire Medical Device Systems Engineering content management process as a system with interconnected components. This methodology allows for a holistic understanding of the system's requirements, interactions, and potential improvements. The research methodology encompasses:

- 1. Requirement Analysis: Identifying the key requirements for efficient content management, including version control, compatibility with various file formats, and ease of collaboration.
- 2. System Modeling: Utilizing SysML (Systems Modeling Language) based on ISO/IEC 19514:2017 (Information technology - Object management group systems modeling language (OMG SysML)) ("ISO/IEC 19514:2017 | IEC Webstore," n.d.) to model and create diagrams such as use case diagrams, block definition diagrams, sequence diagrams, and activity diagrams to visualize the content management process and its interactions.
- 3. Evaluation: Assessing existing tools and technologies for content management, including Quatro and its capabilities in rendering content into different formats like HTML and PDF.
- 4. **Proposal:** Proposing a refined content management methodology tailored to the specific needs of online reference books in medical device systems engineering.
- 5. Standards that specify Knowledge Management for Systems Engineering: Apply the knowledge management process as defined in IEC 15288 ("ISO/IEC 19514:2017 IEC Webstore," n.d./). The main goal of this process is to empower organizations to exploit opportunities to reuse existing knowledge. Also the INCOSE Systems Engineering Handbook (INCOSE Systems Engineering Handbook 2023a) defines the Knowledge

Management process as a way to leverage existing knowledge within an organization for systems engineering projects.

6.1 General methods

The following methodology was used for the Masters Project in Systems Engineering.

- Use Stevens Institute of Technology guidelines and templates for masters project.
- Develop the "knowledge repository" as a system: stakeholder needs, concept, architecture, models, requirements, verification/validation.
- Select and utilize systems engineering methods and tools from courses of Stevens School of Systems and Enterprises.
- Select and utilize industry standards such as IEC 15288 and the INCOSE (International Council on Systems Engineering) Systems Engineering Handbook INCOSE (2023).
- Literature Review: Conduct an extensive review of existing literature, research papers, and relevant resources in the field of systems engineering and medical devices.
- Interviews and Surveys: Collect insights and best practices from industry experts, professionals, and academics in both systems engineering and medical device development.
- Content Development: Create well-structured chapters and sections based on the outlined scope, ensuring clarity and coherence.
- Graphics and Illustrations: Include diagrams, flowcharts, and illustrations to enhance understanding and provide practical examples.
- Peer Review: Seek input and feedback from experts in the field to validate the content's accuracy and relevance.
- Use Git and/or GitHub as repository for the master's project artifacts.

6.2 Systems Engineering Methods

6.2.1 System Engineering constraints and considerations

Table 6.1 provides an outline of the system engineering constraints and considerations of the system.

Table 6.1: Systems Engineering Constraints and Considerations

Domain	Plan
Strategy	The generation of the system engineering artifacts will follow
	the systems engineering framework provided in Stevens
	Institute of Technology course SYS-625.
Documentation	The system engineering documentation will be generated as
	Quatro report that is rendered in HTML and PDF.
Units	The system of units used in this document will be the
	International System of Units (SI) unless otherwise indicated.
Diagrams	System modeling will be made using OMG Systems Modeling
	Language (OMG SysML). ("About the OMG System
	Modeling Language Specification Version 2.0 Beta. The
	Object Management Group" 2023)
Tables	All table templates are customized for purposes of this report.
	There is no work instruction or standard operating procedure
	that is define the table layouts to use.
Document Navigation	Hyperlinks are embedded in the document to facilitate
	navigation of information with identifications.

6.2.2 Systems Engineering Model

Figure 6.1 shows the system engineering roadmap used for the Medical Device Knowledge Repository (MDSE-KR). This roadmap provides a structured approach to system engineering.

The roadmap outlines the following key steps in the system engineering process:

- Functional/Operational Deficiency: Identify areas where the operation of interest may be lacking.
- Stakeholder Expectations/User Needs: Gather requirements and expectations from stakeholders and users3.
- System Concepts/System Context: Define the system's context and generate concepts.
- Operational View & System Objectives: Establish the operational perspective and objectives of the system.
- System Requirements: Detail the requirements that the system must fulfill.
- Functional View: Develope a view of the system's functions.
- Physical View: Create a view of the system's physical components.

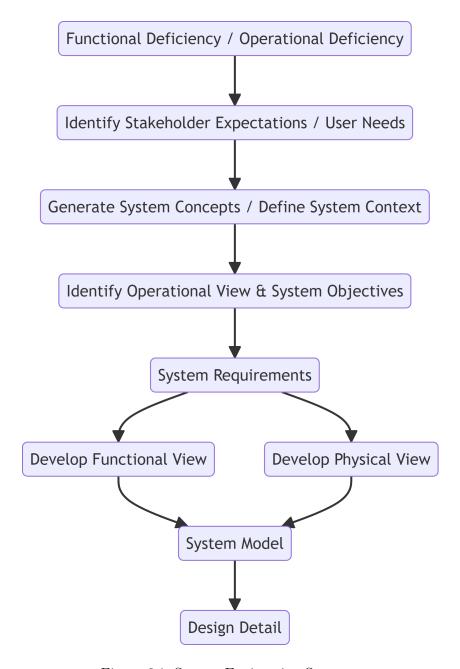


Figure 6.1: System Engineering Strategy

- $\bullet\,$ System Model: Build a model that represents the system.
- Design Detail: Work out the detailed design of the system.

7 Problem



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7.1 Problem Statement

In recent years, the field of medical device systems engineering has gained significant attention due to the increasing complexity of medical devices and the rigorous regulatory requirements they must meet. As a result, there has been a noticeable growth in the number of books and resources dedicated to medical devices. Topics covered in these books may include regulatory compliance, risk management, quality assurance, and design principles tailored to medical devices. But there is very few books on systems engineering for medical devices.

Systems engineering is a broad discipline applied across various industries, including aerospace, automotive, defense, telecommunications, and more. Therefore, there are numerous books available on systems engineering principles, methods, and applications in these fields.

The number of books on systems engineering of medical devices is fewer in comparison to those covering systems engineering in more established industries.

7.1.1 Problem from the perspective of non-systems engineers

Lack of a clear understanding of what is systems engineering of medical devices:

- Colleagues and senior leadership aren't clear...
- If it is 'requirements' (or even models), why does that add value?

- Medical Device Systems Engineering can look like more paperwork (or more modeling work)
- And have a separate function? Why not hire more software and hardware people "who actually deliver things the customer uses"?

7.1.2 Problem from the perspective of systems engineers

Medical Device Systems Engineers don't seem to agree what it is...but everyone seems sure they know and are right.

7.2 Problem modeled as a casual loop

Figure 7.1 is a diagram of a causal loop (Sterman and Sterman 2000) that shows a system where investment in systems engineering yields positive results. The diagram shows that increased profits can lead to more resources for better systems engineering which help reduce unsuccessful medical devices.

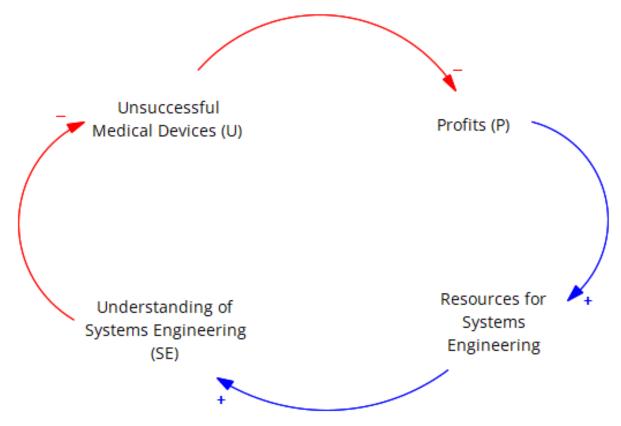


Figure 7.1: Problem modeled as a casual loop

Analysis of the Causal Loop in the Image:

An explanation of the elements that make up the casual loop is given as follows:

- Unsuccessful Medical Devices (U) -> Decreased Profits (P) (Negative) Unsuccessful devices lead to lower sales and profitability.
- Profits (P) -> Resources for Systems Engineering (SE) (Positive) More profits allow for more investment in systems engineering.
- Understanding of Systems Engineering (SE) -> Decreased Unsuccessful Medical Devices (U) (Negative) Better understanding of systems engineering leads to fewer poorly designed devices. If there's a lack of understanding of systems engineering principles among stakeholders in the medical device industry, it can lead to ineffective utilization or implementation of systems engineering methodologies in the development process.
- Resources for Systems Engineering (SE) -> Improved Understanding of Systems Engineering (SE) (Positive) More resources dedicated to systems engineering education improves understanding.

Feedback Loops:

• Balancing Loop (B): This loop discourages unsuccessful devices. As unsuccessful devices (U) increase, profits (P) decrease. This decrease in profits (P) leads to fewer resources for systems engineering (SE). Less resources for systems engineering (SE) leads to a poorer understanding of systems engineering (SE), which ultimately leads to more unsuccessful devices (U). This loop creates pressure to improve systems engineering practices to break the cycle of unsuccessful devices.

Key Points:

- The diagram shows a reinforcing cycle (B) that discourages unsuccessful devices. This is because better understanding of systems engineering leads to fewer unsuccessful devices, which increases profits, which allows for more investment in systems engineering, and so on.
- Low adoption of systems engineering results in ineffective medical device development processes. Without proper systems engineering practices, the development processes may lack holistic consideration of all system components, leading to inefficiencies, errors, and delays.
- Ineffective development processes can contribute to increased incidents of device failures. Without robust systems engineering practices, there's a higher likelihood of design flaws, inadequate testing, and safety issues in medical devices, leading to higher failure rates and potential harm to patients.

7.3 Contributing factors

7.3.1 Systems engineering is used more in other fields

Systems engineering is employed more in other fields than the medical device industry. Some of the top fields where systems engineering is used include:

- Aerospace and Defense: Systems engineering plays a crucial role in designing and developing complex aircraft, spacecraft, missiles, and defense systems.
- Automotive Industry: In the automotive sector, systems engineering is essential for designing vehicles with integrated and optimized systems for safety, performance, and efficiency.
- Information Technology: Systems engineering is utilized in IT for designing, implementing, and managing large-scale computer systems, networks, and software applications.
- **Telecommunications:** Systems engineering is vital for designing and optimizing telecommunications networks, including mobile networks, satellite systems, and internet infrastructure.
- Energy Sector: Systems engineering is employed in the energy industry for designing and managing complex energy production and distribution systems, including power plants, renewable energy systems, and smart grids.
- **Transportation:** Systems engineering is crucial in designing and optimizing transportation systems, including railways, highways, airports, and public transportation systems.
- Manufacturing: Systems engineering is used in manufacturing for designing and optimizing production processes, supply chain management systems, and industrial automation systems.
- Environmental Engineering: In environmental engineering, systems engineering is applied to design and manage complex environmental systems, such as water treatment plants, waste management systems, and pollution control systems.
- Robotics and Automation: Systems engineering is essential for designing and integrating robotic systems and automation solutions across various industries, including manufacturing, healthcare, and agriculture.

7.3.2 Very few papers on systems engineering of medical devices

There are very few papers on the application of systems engineering to medical devices that are published as articles, and/or presented in conferences.

In the 34th Annual INCOSE International Symposium, of the 83 papers presented none were in the context of medical devices. Of the 48 presentations, only 2 were in the context of medical devices (is2024?-).

An article database query was performed using a software called IHS Goldfire ("Goldfire Cognitive Search – Accuris," n.d.) to determine how many peer reviewed articles (including articles within books) discuss systems engineering of a medical device. IHS Goldfire is a software platform developed by IHS Markit that contains tools for knowledge discovery, problemsolving, technology scouting, innovation management, and intellectual property management. Table 7.1 shows the query results per application field. Between 1980 and 2024 there were a total of 3432 articles that discuss systems engineering of a medical device. This is significantly less than the 40732 peer reviewed articles found for systems engineering for military applications.

Table 7.1: Quantity of peer reviewed systems engineering articles per application field since 1980

Application Field	Articles in books	Articles and Journals	Total
Medical Devices	2799	633	3432
Military	14908	25824	40732
Aerospace	12443	19254	31697
Automotive	13082	9433	22515
Software	24587	48953	73540
Telecomunications	15897	10841	26738
Transportation	20139	23044	43183
Manufacturing	21205	28341	49546

7.3.3 Lack of books and literature of systems engineering of medical devices

The are very few books that discuss or teach systems engineering in the context of medical device development. Of the few books found are the following:

• "Robust Systems Engineering for Medical Device Design" by Mr. Martin A. Coe. Description: This book introduces practical systems engineering methods for the design and development of commercially engineered systems, focused on the design of medical devices. It begins with systems engineering definitions, fundamentals and proceeds by integrating systems engineering activities into the development process to demonstrate a successful system design (Coe 2019).

• "Healthcare Systems Engineering" by Paul M. Griffin, et al. Description: Offers comprehensive coverage of the healthcare system, healthcare delivery, and healthcare systems modeling ("Healthcare Systems Engineering | Wiley," n.d.).

The INCOSE Systems Engineering Handbook only has one page and a half that talks about Biomedical and Healthcare Systems (INCOSE Systems Engineering Handbook 2023b).

Mission Description

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This section provides the system mission, and business rationale.

8.1 Mission

The mission is to pioneer a dynamic and inclusive knowledge repository dedicated to the systems engineering facets of medical device development. Commit to harnessing the latest advancements in technology and leveraging the evolving landscape of healthcare systems to ensure the safety, efficacy, and compliance of medical devices. Through collaborative efforts and interdisciplinary insights, aim to empower stakeholders with the necessary tools and knowledge to navigate the complexities of medical device development, ultimately safeguarding patient health and well-being.

Part II Sources

Sources



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This section discusses the sources of the stakeholder needs that feed into the modeling and design of the Medical Device Systems Engineering Knowledge Repository (MDSE-KR).

9.1 Source model

Figure 9.1 is a SysML block definition diagram that shows the sources of needs and requirements for designing a MedSE knowledge repository. The blocks in the diagram represent different sources of information that can be used to identify the needs and requirements of the knowledge repository.

The diagram lists valid (credible) sources:

- Job descriptions
- Training material
- Literature
- Publications
- Articles
- Standards
- Databases
- Surveys
- Interviews
- Webinars

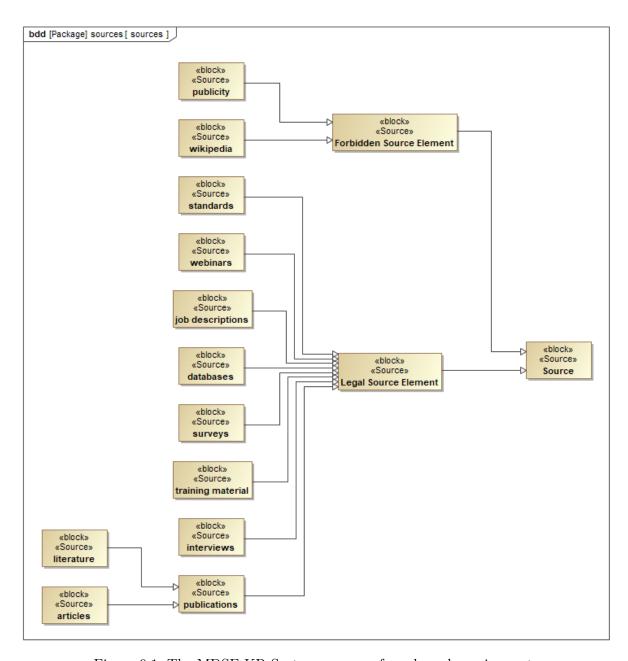


Figure 9.1: The MDSE-KR System sources of needs and requirements

The inclusion of "Forbidden Source Element" highlights the importance of a critical evaluation when selecting information sources. Reliable and verifiable sources like publications, standards, and legal databases should be prioritized for designing the knowledge repository.

9.2 Articles

Articles that talk about the systems engineering of medical devices can serve as source for the design of the MDSE-KR. Some example articles found that can serve as source for the design of the MDSE-KR are:

- Jones, D.J. and Masters, M.T. (2008), 11.1.3 Medical Device Development Process. INCOSE International Symposium, 18: 1215-1230. https://doi.org/10.1002/j.2334-5837.2008.tb00873.x (Jones and Masters 2008)
- Maheshwari, Apoorv. (2015). Application of Systems Engineering to Regulatory Compliance Activities for Medical Devices. (Maheshwari 2015)
- Corns, S. and Gibson, C. (2012), A Model-based Reference Architecture for Medical Device Development. INCOSE International Symposium, 22: 2066-2075. https://doi. org/10.1002/j.2334-5837.2012.tb01457.x (Corns and Gibson 2012)
- "Healthcare Systems Engineering SEBoK." Accessed: Apr. 18, 2024. Available: https://sebokwiki.org/wiki/Healthcare_Systems_Engineering ("Healthcare Systems Engineering SEBoK," n.d.)
- Malins, Robert & Stein, Jack & Thukral, Ajay & Waterplas, Christophe. (2015).
 SysML Activity Models for Applying ISO 14971 Medical Device Risk and Safety Management Across the System Lifecycle. INCOSE International Symposium. 25. 489-507. 10.1002/j.2334-5837.2015.00077.x. (Malins et al. 2015)

9.3 Medical Device Trends

The FDA provides public databases and reports that can provide insight of what are the most common medical devices that are in use and the characteristics of those devices (Health and Radiological 2024c).

9.3.1 Medical Device Classification

Figure 9.2 shows the distribution in percentage of medical devices registered with the FDA by class, as of February 1, 2024.

Here's a breakdown of the data displayed in the chart:

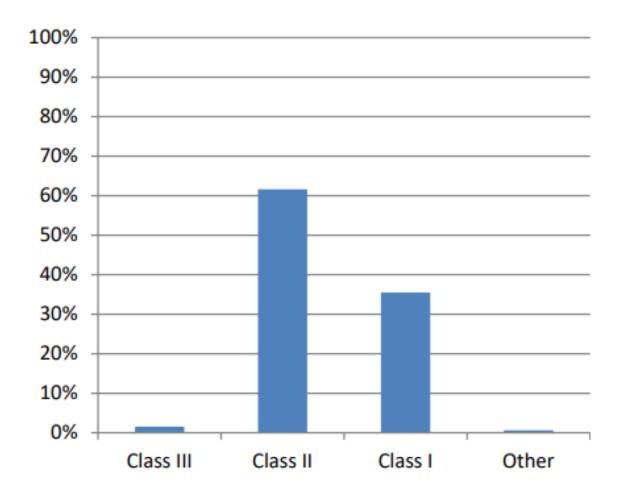


Figure 9.2: Distribution of Medical Devices Registered with the FDA (as of February 1, 2024)

- Class III makes up the largest portion of registered devices at around 60%.
- Class II is the second most common class of device at around 35%.
- Class I devices and "Other" devices each make up a smaller portion of registered devices.

Note

The FDA regulates medical devices based on the level of risk they pose to patients. Class III devices are considered the highest risk, while Class I devices are considered the lowest risk (Health and Radiological 2023).

9.3.2 Implantable versus non-implantable

Figure 9.3 is a line graph that shows the percentage of implantable and non-implantable medical devices.

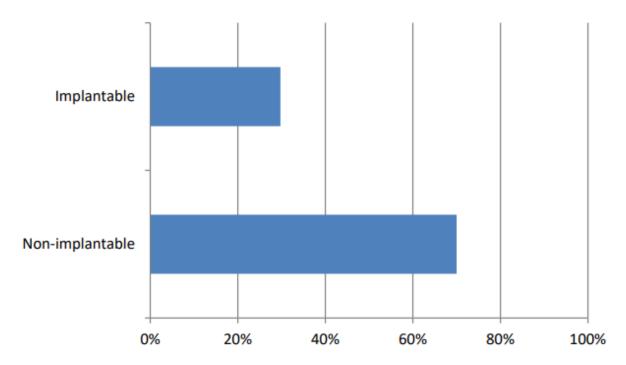


Figure 9.3: Proportion of Implantable vs. Non-Implantable Medical Devices Registered with the FDA (as of February 1, 2024)

The data shows that as of February 1, 2024, implantable medical devices make up a smaller percentage of registered devices than non-implantable devices.

Implantable medical devices are devices that are inserted into the body for a long period of time. Examples of implantable medical devices include pacemakers, artificial hips, and breast implants. Non-implantable medical devices are devices that are used on the body but are not inserted into it. Examples of non-implantable medical devices include stethoscopes, blood pressure cuffs, and bandages.

9.3.3 Medical Specialties

Figure 9.4 shows the distribution of FDA-registered medical devices by medical specialty, based on FDA product codes, as of February 1, 2024.

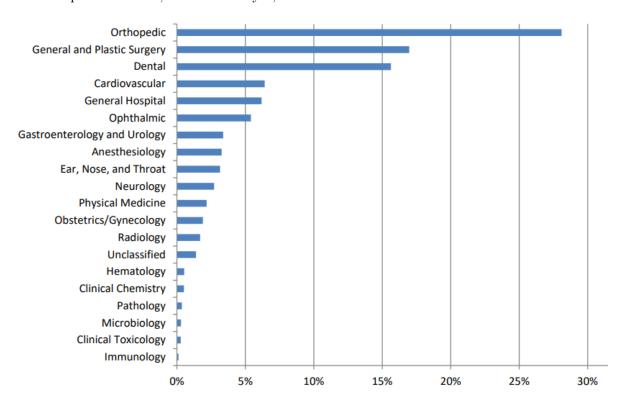


Figure 9.4: Distribution of FDA-Registered Medical Devices by Medical Specialty (as of February 1, 2024)

Here's what we can gleaned from the chart:

- Specialties with the most devices: The specialties with the highest percentage of registered devices are:
 - Orthopedic
 - General and Plastic Surgery

- Cardiovascular
- General Hospital
- Specialties with the least devices: The specialties with the lowest percentage of registered devices are:
 - Clinical Toxicology
 - Immunology
 - Microbiology
 - Clinical Chemistry
 - Hematology

Note

The number of devices registered in a particular specialty doesn't necessarily reflect the number of procedures performed in that specialty. For example, there may be a relatively small number of complex orthopedic devices compared to the number of simple bandages used in wound care, but both would be classified under orthopedic devices.

Some reasons why some specialties might have more devices than others:

- Surgical specialties: Surgical specialties tend to have a wider variety of devices because they use devices for a variety of procedures.
- Chronic conditions: Specialties that treat chronic conditions may have a wider variety of devices because they may use devices to monitor or treat the condition over time.

9.3.4 FDA Product Code

Figure 9.5 is word cloud that highlights the most frequent terms from FDA Product Codes of registered devices.

Based on the word cloud, the most frequent FDA Product Code Terms for registered medical devices with the FDA as of February 1, 2024:

- Surgical
- Tracheostomy
- Cardiovascular
- Wireless
- Synthetic

```
Tracheostomy Coagulation Wireless
                           Metal/Ceramic/Polymer
                                                     Adolescent
                                                 Spectacle
                               Magnifying Denture Technology
            Synthetic
        Cardiovascular Surgical
                                                                    Patient
                                            External
                    Cuff Spondylolisthesis Tray Fusion Cervical
                               Metal/Polymer Thoracolumbosacral
   Root-Form Endosseous
   Scoliosis Manual Support Pedicle
Electrode General Blood Aid Hip Bone Implant Hearing
Dental Lumbar Semi-Constrained Procedure
Template Prevent Stocking Device Plate Resin Metal
                        Graft Fixation Surgery Medical
     Component Knee
                                                   Orthosis Electrosurgical
                       Interlaminal Spinal
      Orthodontic
                                                Appliance Non-Porous
      Idiopathic Catheter
                               Prosthesis
                 Body
                           Tube Instrument Kit Sunglasses
   Legs) Teeth Cemented
                                                 Pooling Preformed
                                  Accessories
    Frame
              Orthopedic Screw
                                          Uncemented Use
              Abutment Polymer/Metal/Polymer Air-Conduction
                Integrated System Intervertebral
                                                          (Non-Prescription
Patellofemorotibial
                     Porous Polymer Replacement
            Powder
                                    Bracket Including Prescription
                       Cutting
                                     Porcelain
```

Figure 9.5: Most frequent FDA Product Codes Terms of the registered devices (as of February 1, 2024)

- Adult
- Cervical
- Spinal
- Electrode
- Plastic

It appears that surgical devices and those used in cardiology are the most common. There is also a high prevalence of terms related to materials like synthetic and plastic, along with terms related to location or application like cervical and tracheostomy.

9.4 Webinars

Webinars that discuss systems engineering in the medical device industry can serve as sources for the needs and requirements of the MDSE-KR. Two examples of webinars that were analyzed to extract source information were the following.

9.4.1 MassMEDIC Sponsored Webinar: Systems Engineering for Medical Device Development by Sunrise Labs, Inc ("MassMEDIC Sponsored Webinar: Systems Engineering for Medical Device Development" 2022).

A webinar titled "Systems Engineering for Medical Device Development" discussed how Systems Engineering contributes to success in complex medical device development.

https://www.youtube.com/watch?v=X-jzjOzocDA

The webinar discussed the role of a Systems Engineer and described the Systems Engineering process. From this webinar, the MDSE-KR should incorporate the following key points:

• Foundational Concepts:

- Define Medical Device Systems Engineering and its role in the development lifecycle.
- Understand the complexities of modern medical devices (electrical, mechanical, software integration).

• Systems Engineering Process:

- Key stages involved in Systems Engineering for medical devices (concept to commercialization).
- Techniques for requirements definition, management, and traceability.

• Cross-functional Collaboration:

- Effective communication and coordination between various engineering disciplines (electrical, mechanical, software).
- Integration with other devices and user interfaces.

• Risk Management:

- Identify and mitigating risks associated with medical device development.
- Design test protocols and mitigation response plans.

• Regulatory Considerations:

 Understand and adhering to design control regulations for medical devices (e.g., ISO 13485).

• Project Management:

- Strategies for staying on budget and schedule in medical device development projects.

• Case Studies:

 Real-world examples showcasing successful application of Systems Engineering in medical device development.

9.4.2 Systems Perspective Engineering: A webinar on Medical Device product development ("Systems Perspective Engineering: A Webinar on Medical Device Product Development" 2020)

A webinar titled "Systems Perspective Engineering: A webinar on Medical Device product development" discussed how usability engineering can be integrated into the systems engineering process for medical device development.

https://www.youtube.com/watch?v=r_Eh-VEm55E

From this webinar, the MDSE-KR should incorporate the following key points:

Usability Engineering Process:

- Iterative process applied throughout development.
- Complements design control and risk management.
- Follows IEC 62366 and FDA guidance.
- Involves user research, task analysis, risk analysis, formative evaluations, and summative validation.

Systems Engineering Approach (V Model):

- Starts with understanding user needs and defining requirements.
- Breaks down the system into manageable pieces.

- Focuses on mitigating technical risks early.
- Integrates different disciplines throughout development.

Why Integrate Usability into Systems Engineering? * Usability is a project-level risk that should be mitigated early. * Usability engineering tools complement the V model. * Early integration reduces design risk and rework later.

Who Owns Usability?

- Ideally, the systems engineer due to their focus on mitigating risks.
- Can be someone else with influence to plan and integrate usability activities.

Usability Engineering Strategy:

- Should be planned early and scaled based on device risk.
- Defines the types of evaluations and resources needed throughout development.
- Integrates usability activities throughout all development phases.

Recommendations for Reducing Usability Risk:

- Consider usability risk mitigation early in system architecture planning.
- Shift usability evaluation of critical hardware subsystems earlier.
- Evaluate software user interfaces before coding and implementation.
- Develop instructions for use and training as subsystems to be iterated on.
- Strategically sequence development of features based on usability risk.
- Plan ahead for materials and control of devices for usability studies.

Additionally, the webinar covered:

- Examples of usability engineering tools used throughout the development process.
- How to develop a usability engineering plan.
- How to conduct usability studies at different development phases.

9.5 Courses directed to systems engineers who work in the medical device industry

A company called Technology and Management Training Courses and Seminars (TONEX) provides a course called *"Systems Engineering for Medical Device Development" ("Systems Engineering for Medical Device Development," n.d.). The 2-day course is designed to equip professionals in the medical device industry with the essential knowledge and skills in systems engineering.

The course has the following learning objectives:

- Understand the fundamentals of systems engineering as applied to medical device development.
- Navigate regulatory requirements and standards specific to the medical device industry.
- Implement risk management strategies to enhance the safety and efficacy of medical devices.
- Apply systems thinking to optimize the integration of diverse components in the development process.
- Design and execute comprehensive verification and validation protocols for medical devices.
- Enhance communication and collaboration among cross-functional teams involved in medical device development.

This course is for professionals and decision-makers involved in various stages of medical device development, including:

- Biomedical Engineers
- Regulatory Affairs Specialists
- Product Managers
- Quality Assurance Professionals
- Systems Engineers
- Project Managers

Course Outline:

Introduction to Systems Engineering in Medical Devices

- Overview of Systems Engineering Principles
- Importance of Systems Thinking in Medical Device Development
- Key Challenges and Opportunities in the Field

Regulatory Landscape for Medical Devices

- Overview of FDA and International Regulatory Agencies
- Current Good Manufacturing Practices (cGMP)
- Ensuring Compliance with ISO Standards

Risk Management in Medical Device Development

- Identifying and Assessing Risks in the Development Process
- Risk Mitigation Strategies and Implementation
- Integration of Risk Management with Regulatory Requirements

Systems Integration and Interdisciplinary Collaboration

- Interconnected Components in Medical Device Systems
- Strategies for Effective Cross-Functional Collaboration
- Role of Systems Engineering in Integration Challenges

Verification and Validation in Medical Device Development

- Designing Comprehensive Verification Protocols
- Conducting Rigorous Validation Testing
- Ensuring Compliance with Regulatory Requirements

Communication and Documentation in the Development Lifecycle

- Effective Communication Strategies for Cross-Functional Teams
- Documentation Best Practices and Regulatory Requirements
- Creating a Culture of Transparency and Accountability in Development Teams

An analysis of the course objectives and outline derived the following MDSE-KR needs and requirements.

Needs:

- Gain a deep understanding of how systems engineering principles are applied to the specific context of medical device development.
- Master the Medical Device Development Life Cycle (MDLC) with a focus on the role of systems engineering at each stage.
- Effectively navigate the regulatory landscape governing medical devices (e.g., FDA QSR (Health and Radiological 2024a), ISO 13485).
- Implement robust risk management strategies to ensure the safety and efficacy of medical devices.
- Foster successful integration of diverse components within a complex medical device system.
- Enhance communication and collaboration skills to work effectively with cross-functional teams.

- Stay updated on best practices for verification and validation (V&V) of medical devices.
- Understand how systems engineering needs to adapt to emerging trends in medical device technology.

Requirements:

• Content:

- In-depth coverage of foundational systems engineering principles with a focus on medical device applications.
- Detailed breakdown of the MDLC with clear explanations of the systems engineering role at each stage.
- Dedicated chapters on risk management, including relevant techniques and regulatory considerations.
- Comprehensive discussion of systems integration challenges and best practices in a medical device context.
- Practical guidance on V&V processes for medical devices, including different testing types and regulatory compliance.
- Emphasis on communication and documentation best practices for effective crossfunctional collaboration.
- Inclusion of case studies showcasing successful medical device development projects with strong systems engineering involvement.
- A dedicated chapter on emerging trends in medical device technology and their implications for systems engineering.
- Appendix with relevant regulatory resources (FDA regulations, ISO standards).

• Format:

- Organized structure with clear headings, subheadings, and bullet points for easy navigation.
- Use of diagrams, figures, and tables to illustrate concepts.
- Glossary of key terms specific to systems engineering and medical device development.
- Index for information retrieval.
- Availability in both print and digital formats.

• Usability:

- Written at a level appropriate for experienced systems engineers, but with clear explanations for core concepts.
- Real-world examples and case studies to enhance understanding and practical application.
- Chapter summaries and review questions to solidify learning.
- Links to online resources (e.g., regulatory websites, industry best practices documents) for further exploration (optional for digital format).

9.6 Companies that offer systems engineering services for medical device development

9.7 Job Profiles of Systems Engineers of medical device companies

Appendix Medical Device Systems Engineer (MDSE) Job Descriptions contains a sample of eight job descriptions that showcase the variety of roles and responsibilities under the title "Systems Engineer" in the medical device industry. The source of the Job Descriptions was from LinkedIn.

Here's a breakdown of key findings of the eight job descriptions:

Commonalities:

- All positions require a strong understanding of engineering principles and practices.
- Most roles emphasize experience working on complex systems, often involving hardware, software, and electrical components.
- Excellent communication and collaboration skills are crucial for success in this field, as systems engineers frequently interact with various teams (e.g., design, manufacturing, regulatory).
- Ability to manage projects, meet deadlines, and prioritize effectively is essential.

Key Differences:

- Experience Level: The roles range from requiring 6+ years of experience (Job Description #4) to 10+ years (Job Descriptions #3, #5, #8).
- Focus Area: Responsibilities can be specific to a certain medical device type (e.g., cardiac mapping Job Description #1, heart failure management Job Description #6) or broader, encompassing various technologies (Job Description #7).

- **Project Stage:** Some positions focus on the entire development lifecycle (Job Description #5), while others target specific stages like early concept development (Job Description #7) or system verification and validation (Job Description #6).
- Leadership: Some roles involve leading and mentoring engineers (Job Descriptions #3, #5, #7, #8), while others focus on individual technical contributions (Job Descriptions #1, #4, #6).

Additional Insights:

- Several positions highlight the importance of adhering to medical device regulations like FDA and ISO standards (Job Descriptions #3, #5, #6, #8).
- Some roles emphasize experience with specific technologies relevant to medical devices, such as Bluetooth or implantable sensors (Job Descriptions #6, #7).

The eight job descriptions for Medical Device Systems Engineers were examined to identify the required qualifications, responsibilities, and skills. The information is presented in several tables for clarity.

9.7.1 MDSE Responsibilities

Table 9.1 ranks from most common to least common the responsibilities based on how often they appeared in the job descriptions. Participating in cross-functional teams, managing projects, and developing system requirements are the most common. Less frequent responsibilities include conducting training and managing intellectual property.

Table 9.1: Medical Device Systems Engineer Responsibilities (Most Common to Least Common)

Responsibility	# of Job Descriptions	
Participate in cross-functional teams	8	
Manage projects	7	
Develop system requirements	7	
Communicate effectively with various teams	7	
Lead design reviews	6	
Perform risk analysis	6	
System verification and validation	6	
Develop design documentation	5	
Troubleshoot and solve technical problems	5	
Translate user needs into technical specifications	4	
Manage external vendors	3	
Create and maintain technical documentation	3	

Responsibility	# of Job Descriptions	
Conduct training	2	
Partner with research and development teams	2	
Identify unmet user needs	1	
Lead brainstorming sessions	1	
Manage intellectual property	1	

9.7.2 MDSE Systems Engineering Skills

Table 9.2 focuses on skills specific to systems engineering, ranked from most common to least common. Complex systems thinking, system requirements development, and system design and architecture are the most common. Test plan development and execution, and trade-off analysis are less frequently mentioned.

Table 9.2: Medical Device Systems Engineer - Systems Engineering Skills (Most Common to Least Common)

Skill	# of Job Descriptions
Complex systems thinking	7
System requirements development	7
System design and architecture	6
Risk analysis and management	6
System verification and validation	6
Interface management (between subsystems)	3
Systems modeling and simulation	2
Test plan development and execution	2
Trade-off analysis (considering various factors)	1
Systems integration and deployment	1

9.7.3 MDSE Medical Device Skills

Table 9.3 highlights medical device specific skills, ranked from most common to least common. General medical device experience and knowledge of regulatory affairs (FDA, ISO) are common requirements. Experience with specific technologies or domains are less frequent.

Table 9.3: Medical Device Systems Engineer - Medical Device Skills (Most Common to Least Common)

Skill	# of Job Descriptions
Medical device experience (general)	4
Regulatory affairs knowledge (e.g., FDA, ISO standards)	4
Experience with specific medical device technologies (e.g.,	2
implantable sensors)	
Experience in a specific medical device domain (e.g., Renal Care)	1

9.7.4 MDSE Soft Skills

Table 9.4 categorizes soft skills required for the role from most common to least common, with communication, collaboration, and problem-solving being the most sought-after. Public speaking and teaching/mentoring are the least common skills mentioned.

Table 9.4: Soft Skills (Most Common to Least Common)

Skill	# of Job Descriptions
Communication (written and oral)	8
Collaboration	8
Problem-solving	7
Analytical skills	6
Attention to detail	5
Technical expertise (engineering principles)	5
Project management	6
Leadership	4
Regulatory knowledge (FDA, ISO)	4
Creativity	2
Public speaking	1
Teaching/Mentoring	1

9.7.5 MDSE Qualifications

Table 9.5 ranks the qualifications listed in the job descriptions by frequency. A Bachelor's degree in Engineering and strong communication skills are the most common requirements, while an advanced degree (Ph.D. or Post-Graduate) and experience in a specific medical device domain are the least common.

Table 9.5: Medical Device Systems Engineer Qualifications (Most Common to Least Common)

Qualification	# of Job Descriptions
Bachelor's degree in Engineering or related field	8
Strong communication skills	8
Ability to work effectively in a team	7
Experience with complex systems	7
Project management skills	6
Master's degree in Engineering or related field (or equivalent	4
experience)	
Medical device experience	4
Regulatory affairs knowledge (e.g., FDA, ISO standards)	4
Experience with specific medical device technologies (e.g.,	2
implantable sensors)	
Leadership experience	2
Advanced degree (Ph.D. or Post-Graduate)	1
Experience in a specific medical device domain (e.g., Renal	1
Care)	

9.7.6 MDSE Preferred Qualifications

Table 9.6 summarizes qualifications that are desirable but not always mandatory from most common to least common. A Master's degree, leadership experience, and expertise in specific medical device technologies are preferred by some employers.

Table 9.6: Medical Device Systems Engineer - Preferred Qualifications (Most Common to Least Common)

of Job Descriptions
4
2
2
1
1
1
1

The following sources for the MDSE-KR was obtained from the analysis of the eight job descriptions:

Foundational Engineering Knowledge:

- Solid grounding in engineering fundamentals: This includes mechanics, electronics, thermodynamics, and materials science.
- In-depth coverage of a specific engineering discipline: Mechanical, electrical, or biomedical engineering would be most relevant.

Systems Engineering Skills:

- Systems engineering mindset: Understandi complex systems, their interactions, and life cycle.
- System requirements development: Capture user needs, translate them into technical specifications, and perform requirements analysis.
- System design and architecture: Design and modeling the overall system and its subsystems.
- Risk analysis and management: Identify potential risks throughout the development lifecycle and implement mitigation strategies.
- Systems verification and validation: Ensure the system meets requirements and performs as intended.
- **Project management:** Planning, scheduling, budgeting, and managing resources for successful project completion.

Medical Device Specific Knowledge:

- Medical device regulatory landscape: Focus on key regulations like FDA 510(k) and ISO 13485.
- Common medical device technologies: Sensors, actuators, microprocessors, communication protocols.
- **Biocompatibility principles:** Selection of materials that are safe for human interaction within the body.
- Ethical considerations in medical device design: Ensuring patient safety, privacy, and data security.
- Emerging trends in medical device technology: Artificial intelligence, machine learning, and telehealth.
- Career paths for medical device systems engineers: Explore various specializations and leadership opportunities.

- Case studies of successful medical device development projects.
- Real-world examples and exercises to reinforce learning and practical application.
- Guidance on professional development resources and certifications relevant to the field.

9.8 Survey

This section dives into the insights gleaned from a survey conducted in April 2024. The survey targeted systems engineers working in the field of medical device development. The survey received responses from a diverse group of professionals from leading companies including Boston Scientific, the FDA, Nudge BG, BIOTRONIK, and others. The primary objective of this survey was to identify the knowledge and resources that are most valuable to medical device systems engineers in their daily work.

The analysis of the survey responses was aimed to inform the development of the MDSE-KR.

The following section will present a detailed analysis of the survey findings.

For reference, the template used for the survey questions is included in Appendix Survey of this report. This will allow readers to gain a deeper understanding of the specific questions asked and the context surrounding the survey responses.

10 Survey Results

Caution

The report published on this website is a draft and subject to frequent updates. Please be aware that the content may change over time as revisions are made. Thank you for your understanding.

Tip

If you have questions, comments, or feedback, please contact Esteban Solorzano. esteban.solorzano@gmail.com

This section contains the survey results for a total of 22 respondents.

10.1 Question 1

Please identify the primary challenges you have encountered in the systems engineering process for medical devices. Select all that apply from the following options:

Figure 10.1 is a bar graph of question 1 results.

The biggest challenge according to question 1 results is **Systems Integration** with 13 respondents. Following closely behind are Interdisciplinary Collaboration and Safety and Efficacy at 11 and 14 respondents respectively.

Other challenges faced by systems engineers working on medical devices include:

- Cybersecurity (9 respondents)
- Usability and Human Factors (7 respondents)
- Regulatory Compliance (9 respondents)
- Cost Constraints (3 respondents)
- Global Market Access (1 respondent)
- Emerging Technologies (2 respondents)

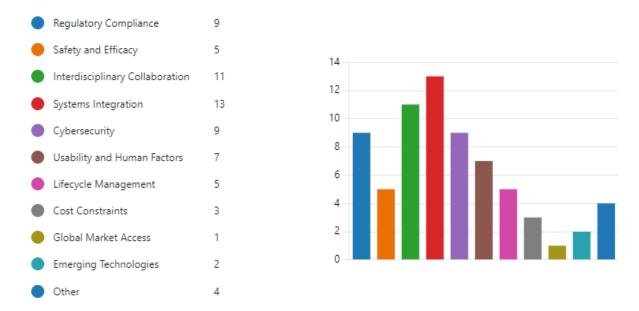


Figure 10.1: Question 1 results

• Other (4 respondents)

10.2 Question 2

What tools do you find indispensable in your daily tasks as a systems engineer? Please select all that apply from the following options:

Figure 10.2 is a bar graph of question 2 results.

Based on question 2 results, the most indispensable tools for systems engineers working on medical devices are **Requirement management software** and **Documentation tools**, with 18 and 15 respondents selecting them respectively.

Following these two are:

- Data analysis and visualization tools (11 respondents)
- Collaboration tools (13 respondents)

These findings suggest that a significant portion of a systems engineer's time is spent on managing requirements, documenting processes, collaborating with team members, and analyzing data.

Here's a deeper look into some of the other tools selected by the respondents:

CAD software (e.g., SolidWorks, ... 4

System modeling tools (e.g., Ma... 4

Engineering tools (e.g., LabView,... 7

Data analysis and visualization t... 11

Simulation tools (e.g., Simulink, ... 5

Requirement management soft... 18

Version control systems (e.g., Gi... 10

Regulatory compliance software... 0

Risk management tools (e.g., F... 7

Documentation tools (e.g., Micr... 15

Project management software (... 12

Quality management systems (e... 5

Collaboration tools (e.g., Slack, ... 13

Other

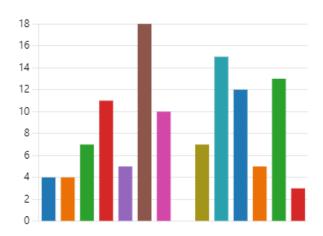


Figure 10.2: Question 2 results

3

- Engineering tools (e.g., LabView) (7 respondents)
- Risk management tools (e.g., FMEA) (7 respondents)
- Simulation tools (e.g., Simulink) (16 respondents)
- Version control systems (e.g., Git) (10 respondents)
- Project management software (12 respondents)
- Quality management systems (5 respondents)

10.3 Question 3

Could you please elaborate on why you find the selected tools valuable in your day-to-day work as a systems engineer? Feel free to provide specific examples or experiences that illustrate their importance.

Figure 10.3 is a word cloud of question 3 results.

5 respondents (42%) answered Tools for this question.



Figure 10.3: Question 3 results

The analysis of the results of this follow-up question reveals several key themes regarding why systems engineers find specific tools valuable:

1. Structure and Documentation:

• Requirement management and documentation tools provide a framework to record decisions and trace how activities meet requirements. This ensures traceability and simplifies demonstrating compliance with regulations. (Example: "Cockpit is used to navigate, trace and clearly understand our requirements and source/rationale")

2. Collaboration and Communication:

• Collaboration tools are essential for communication within the team and across disciplines. They facilitate information dissemination and decision making throughout the development process. (Example: "Collaboration and communication is key for Systems engineering. Tools that help facilitate communication and the system's boundaries are critical.")

3. Information Management:

• Data analysis and visualization tools, version control systems, and quality management systems help gather information, keep it up-to-date, and create a clear picture of the project's status. (Example: "It's the only way to create a complete picture of product design requirements, risks, and tests.")

4. Specific Needs of Medical Device Development:

• Some engineers highlighted the importance of tools tailored to medical device development, such as FMEA for risk management. (Example: "As a Design Assurance Engineer, I focus on communication/collaboration tools, project management software (JIRA), and requirements management (JAMA).")

5. Balancing Functionality with Efficiency:

• While some emphasized the importance of powerful tools like Matlab, others stressed that tools should not become a hindrance and should prioritize getting the job done efficiently. (Example: "Overall, they help in getting the job done without being a hinderance.")

Note

- The responses suggest a preference for familiar and widely used tools like Microsoft Office suite alongside more specialized engineering tools.
- There's a recognition that the "best" tools depend on the specific role and project within medical device systems engineering.

10.4 Question 4

Which methodologies do you consider most beneficial in your daily tasks as a systems engineer working with medical devices? Please select all that apply from the following options:

Agile Methods (e.g., Agile, Kanb... 6 Traditional Development Model... 4 Model-Based Approaches (e.g., ... 12 Quality and Compliance (e.g., D... 5 Risk Management (e.g., ISO 149... 9 Verification and Validation Proce... 9 Change Control Processes Configuration Management Lean and Continuous Improvem... 1 Human Factors and Usability (e.... 8 Regulatory Compliance (Regulat... 11 Engineering Practices (e.g., Requ... 15 Cross-disciplinary Collaboration 12 Innovative Design Approaches (... 5 Other 0

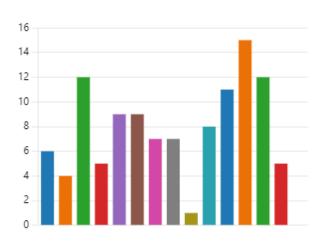


Figure 10.4: Question 4 results

Figure 10.4 is a bar graph shows the results of a survey question asking systems engineers working on medical devices which methodologies they find most beneficial in their daily tasks.

Here's a breakdown of the findings:

- Model-Based Approaches (e.g., MBSE, SysML) is the most popular methodology, with 12 respondents selecting it.
- Engineering Practices (e.g., Requirements Engineering, Design Reviews) follows closely behind at 15 respondents.
- Quality and Compliance (e.g., FMEA, HACCP) is another well-regarded methodology, with 16 respondents finding it beneficial.

These results suggest that systems engineers working on medical devices heavily rely on methodologies that provide structure and guidance throughout the development process. This is likely due to the rigorous requirements for safety and regulatory compliance in the medical device industry.

Here's a closer look at some of the other methodologies selected by the respondents:

- Risk Management (e.g., ISO 14971) (14 respondents)
- Verification and Validation Processes (12 respondents)
- Change Control Processes (10 respondents)
- Configuration Management (8 respondents)
- Agile Methods (e.g., Agile, Kanban) (6 respondents)
- Human Factors and Usability (e.g., HFMEA) (4 respondents)
- Lean and Continuous Improvement (6 respondents)
- Cross-disciplinary Collaboration (12 respondents)
- Innovative Design Approaches (e.g., TRIZ) (5 respondents)

10.5 Question **5**

Could you please provide insights into why you find the selected methodologies valuable in your day-to-day work as a systems engineer for medical devices? Describe the outcomes or benefits you've experienced by employing these methodologies. Additionally, if applicable, mention any alternative methodologies that were considered but not chosen, and the rationale behind your selection.



Figure 10.5: Question 5 results

Figure 10.5 is word cloud of question 5 results.

The follow-up survey question provided valuable insights into why specific methodologies are beneficial for systems engineers working on medical devices. Here's a breakdown of the key themes:

1. Emphasis on Requirements and System Definition:

• The system engineers highlighted the importance of methodologies like **requirements engineering** and **model-based approaches (MBSE)**. These methodologies ensure a clear understanding of what the system needs to do and how it will function, leading to fewer rework loops and more efficient development. (Example: "Don't know, what are my choices? have to get the requirements correct and properly scoped... Model-based approaches allow better insight into how the system might behave...")

2. Communication and Collaboration:

• The critical role of **cross-disciplinary collaboration** was emphasized. Methodologies that facilitate communication across teams (e.g., engineering, design, user experience) are essential for developing a cohesive medical device. (Example: "Cross-disciplinary collaboration is at the heart of what I do - nothing sticks if there isn't full understanding and agreement...")

3. Risk Management and Safety:

• Quality and compliance methodologies (e.g., FMEA, HACCP (Nutrition and Applied 2024a)) were considered valuable for managing risks and ensuring the device meets regulatory requirements. (Example: "These are either required or the most efficient approaches to getting work completed. Procedures and systems drive these tools more than others...")

4. Specific Needs of Medical Devices:

• Some system engineers pointed out that some methodologies, like Human Factors and Usability are particularly important for medical devices due to the focus on user safety and interaction. (Example: "Human Factors and Usability - reports on things like formative studies are important to have in documenting requirement rationale.")

5. Balancing Efficiency and Innovation:

• While **engineering practices** and established methodologies are crucial, some mentioned the potential benefits of **agile methods** for flexibility and adapting to changing requirements. (Example: "Agile methods are highly effective in helping to focus on the highest value first, preventing scope creep and supporting a 'fail fast' mindset.")

6. Regulatory Considerations:

• A few responses suggested that regulatory requirements should not solely dictate the chosen methodologies. However, a well-defined systems engineering approach can facilitate regulatory compliance. (Example: "Again, many of processes listed did not strike me as medical device specific. I also think regulatory should not drive systems engineering but good systems engineering should deliver what you need to get the product approved in many cases.")

10.6 Question 6

Which job roles do you primarily engage with in your daily activities?

Figure 10.6 is a bar graph depicting the results of a survey question asking systems engineers working on medical devices which job roles they interact with most in their daily activities.

Here's a breakdown of the findings, based on the number of respondents who selected each category:

- System Engineers (20 respondents) are the most frequently mentioned collaborators, likely due to their crucial role in bringing the designed system to life.
- **Project Managers** (13 respondents) closely follow, highlighting the importance of crossfunctional collaboration on medical device projects.

Following these two roles are:

- Software Engineers (15 respondents)
- Quality Assurance/Quality Control (QA/QC) Engineers (14 respondents)
- Regulatory Affairs Specialists (9 respondents)



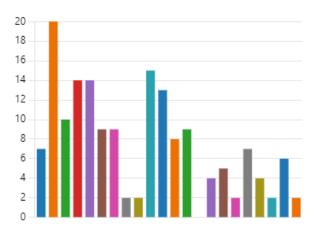


Figure 10.6: Question 6 results

These responses demonstrate the interdisciplinary nature of systems engineering in the medical device field. Effective communication and collaboration among these various roles are essential for the successful development of medical devices.

Here's a look at some of the less frequent interactions, but still important for systems engineers:

- **Design Engineers** (9 respondents)
- Field Service Engineers (4 respondents)
- Technical Support Engineers (5 respondents)
- Validation Engineers (2 respondents)
- Risk Management Specialists (7 respondents)
- Compliance Engineers (4 respondents)
- Supply Chain/Logistics Engineers (2 respondents)
- Marketing/Sales (6 respondents)

10.7 Question 7

Please indicate which job roles, in your opinion, possess a good understanding of the deliverables and artifacts produced by systems engineers?

Figure 10.7 is a word cloud of question 7 results.

The overlap between the two most frequently mentioned job roles in both surveys is interesting. Here's a breakdown of the findings:

• **Project Managers** (13 respondents in the previous survey and 8 respondents in the follow-up question) continue to be identified as a key role that understands the deliverables and artifacts produced by systems engineers. This highlights the importance of their role in overseeing the entire project lifecycle and ensuring systems engineers' work aligns with project goals.

Here are some other insights from the follow-up question:

• Quality Assurance/Quality Control (QA/QC) Engineers (14 respondents in the previous survey and 9 respondents in the follow-up question) are likely involved in the verification and validation processes of medical devices, making them familiar with the systems engineering deliverables needed to ensure quality.



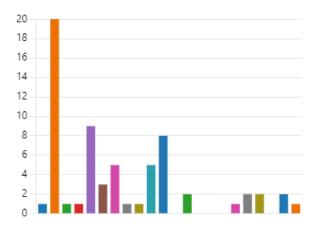


Figure 10.7: Question 7 results

• Regulatory Affairs Specialists (9 respondents in the previous survey and 3 respondents in the follow-up question) understand the regulatory requirements that systems engineers consider throughout the design process.

The follow-up question also highlights some roles that may benefit from a stronger understanding of systems engineering deliverables:

- Software Engineers (15 respondents in the previous survey and 5 respondents in the follow-up question) collaborate frequently with systems engineers, but their understanding of deliverables might be limited depending on their area of focus within the software development process.
- Electrical and Mechanical Engineers (24 respondents in the previous survey and 2 respondents in the follow-up question) could benefit from a clear understanding of the system-level design considerations provided by systems engineers.

Overall, the survey results suggest that while some roles naturally have a better understanding of systems engineers' deliverables due to close collaboration (e.g., project managers, QA/QC engineers), there's an opportunity to improve communication and knowledge sharing across disciplines (e.g., software engineers, design engineers). This can enhance overall collaboration and ensure everyone involved has a clear understanding of how their work contributes to the medical device development process.

10.8 Question 8

Could you share examples of books, articles, or papers that have resonated with you as a systems engineer working with medical devices? Please provide one or more titles and, if possible, briefly explain how they impacted your work or perspective. Your insights will help us better understand valuable resources in this field.

Figure 10.8 is a word cloud of question 8 results.

The following is a breakdown of the mentioned resources and how they resonated with the respondents:

Books:

- Design for Six Sigma by Creveling, Slutsky, and Antis (ISBN 0-13-009223-1): This book focuses on a methodology for process improvement, which can be valuable for optimizing medical device development (Creveling, Slutsky, and Jr. Antis 2002). (One respondent mentioned it but no details on impact were provided)
- Human error: models and management by James Reason: This book explores human factors and error management, a crucial aspect of medical device safety (Reason 1990). (One respondent mentioned it but no details on impact were provided)

experience NASA handbook software development Infusion Pump medical device device specific multiple hats

Pettus and Vanderveen Systems Engineering Gerrit Muller Systems Design software Systems engineering engineering handbook software engineering engineering handbook

level overview

Figure 10.8: Question 8 results

- Anything by Nancy Leveson or Gerrit Muller: These authors are known for their work on safety-critical systems, highly relevant to medical devices. (One respondent mentioned these authors but no specific titles were mentioned)
- The Five Dysfunctions of a Team by Patrick Lencioni: This book, though not specific to medical devices, addresses team collaboration and communication, essential skills for systems engineers (Lencioni 2002). (One respondent highlighted its impact on their understanding of cross-functional collaboration)
- Systems Engineering, Principles and Practice: This book provides a general overview of the field, useful for understanding core systems engineering concepts even if not specific to medical devices (Kossiakoff et al. 2020). (One respondent mentioned it as a high-level overview)

Articles and Papers:

• "Worth the Effort? Closed Loop Infusion Pump Integration" by Pettus and Vanderveen (AAMI 2013): This article likely focuses on a specific case study of medical device integration, potentially offering practical insights (Pettus and Vanderveen 2013). (One respondent mentioned it but no details on impact were provided)

Training Materials:

• Architecture and Systems Engineering Online Program from MIT: This training focused on modeling, a crucial skill for systems engineers (Technology, n.d.). (One respondent highlighted its value)

- INCOSE Systems Engineering Handbook: This widely recognized resource provides a comprehensive guide to systems engineering practices (INCOSE Systems Engineering Handbook 2023c). (Multiple respondents mentioned it as a main guide or reference)
- Stanford Biodesign textbook: This resource likely focuses on biomedical device design and development processes ("Biodesign | Biomedical Engineering," n.d.). (One respondent mentioned it but no details on impact were provided)
- Webinars from Intertek on 60601 standards: These webinars address medical device safety standards (IEC 60601), essential knowledge for systems engineers. (One respondent mentioned them as a valuable resource)
- Company Training Materials (Boston Scientific): Some respondents learned from their employers' training programs, highlighting the importance of company-specific processes and knowledge sharing.

Overall Insights:

- There is no single "go-to" resource, but a combination of books, articles, training materials, and on-the-job experience appears to be most beneficial.
- Systems Engineering fundamentals are considered crucial, with resources like the INCOSE Systems Engineering Handbook being highly regarded.
- Medical Device Specific Knowledge: Resources that address specific challenges and considerations of medical device development are also valuable (e.g., standards, case studies).
- **Soft Skills:** Resources on collaboration, communication, and team dynamics can be beneficial for systems engineers working in a cross-functional environment.

10.9 Question 9

In your opinion, what regulations or standards should be covered in a comprehensive medical device systems engineering book? Please provide your suggestions below.

Figure 10.9 is a word cloud of question 9 results.

The survey question provide information for what regulations and standards should be covered in the Medical Device Systems Engineering knowledge repository (MDSE-KR). Here's a breakdown of the suggestions:

Essential Standards:

basic ones series of standards standards for MEE requirements decomposition design input device systems requirement's failure IEC ISO space with books topic medical devices

Medical Safety book Systems Engineering specific topics regulations in standards collateral standards dig deeper

Figure 10.9: Question 9 results

- ISO 13485:2016 Medical devices Quality management systems Requirements for regulatory purposes: This standard outlines the quality management system requirements for medical device manufacturers. (Multiple respondents mentioned it)
- IEC 60601 series Medical electrical equipment: This series of standards sets forth safety requirements for various aspects of medical electrical equipment. (Multiple respondents mentioned it, with some highlighting specific parts like IEC 60601-1)
- ISO 14971:2019 Medical devices Application of risk management to medical devices: This standard outlines a risk management process for medical devices. (Multiple respondents mentioned it)

Additional Considerations:

- ISO 9001:2015 Quality management systems Requirements: While ISO 9001 is a general quality management standard, it can be a foundational principle for medical device quality systems. (One respondent mentioned it)
- ISO 10993 series Biological evaluation of medical devices: This series addresses the biocompatibility (interaction with living tissue) of medical devices. (One respondent mentioned it)
- Other Standards: A few respondents mentioned specific standards like ISO 15288 (Systems and software engineering System life cycle processes) or IEC 62304 (Medical Device Software Software Life Cycle Processes) that may be relevant depending on the specific medical device being developed.

Structure and Application:

- Several respondents emphasized the importance of presenting the regulations and standards in a hierarchical manner, starting with foundational concepts and then progressing to more specific details.
- One respondent highlighted the need for the MDSE-KR to explain how these regulations apply within the context of ISO 13485, the core quality management system standard for medical devices.

Beyond Just Standards:

- A few respondents suggested including systems engineering fundamentals and common themes that apply across various regulations and standards.
- One respondent emphasized the need for a scalable systems engineering process tailored to medical devices, which could be useful for training purposes.

Overall, the survey results suggest that a comprehensive medical device systems engineering book should cover the following:

- Core regulations and standards, including ISO 13485, IEC 60601 series, and ISO 14971.
- Additional standards may be relevant depending on the specific device being developed.
- The MDSE-KR should explain how these regulations and standards are applied within the medical device development process.
- Foundational systems engineering principles should be integrated throughout the MDSE-KR
- The presentation of information should be structured and hierarchical, allowing readers to find information based on their level of understanding.

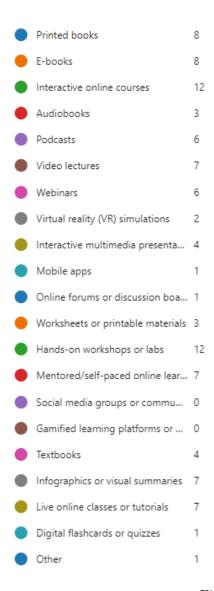
10.10 Question 10

What learning formats do you find most accessible and beneficial? Please select all that apply from the following options:

Figure 10.10 is a bar graph of question 10 results.

The survey question results show the following preferences for learning formats among systems engineers working on medical devices:

• E-books (8 respondents) and Webinars (6 respondents) are the most popular options, likely due to their flexibility and accessibility. They allow engineers to learn at their own pace and convenience.



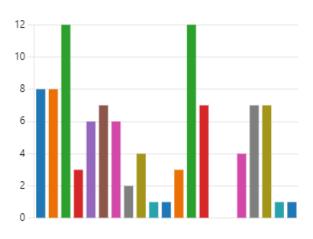


Figure 10.10: Question 10 results

- Interactive online courses (12 respondents) are also relatively popular, providing a more structured learning experience with opportunities for interactivity.
- Printed books (8 respondents) remain a valuable resource, offering in-depth information and a reference point for future needs.

Here's a look at some of the less frequent selections:

- Audiobooks (3 respondents) and Podcasts (6 respondents) can be helpful for consuming information while multitasking or commuting.
- Video lectures (7 respondents) can be informative, but may require dedicated viewing time.
- Mobile apps (1 respondent) may be useful for on-the-go learning but may lack depth on complex topics.
- Online forums or discussion boards (1 respondent) and Social media groups or communities (0 respondents) can be helpful for staying updated on the latest trends and connecting with other professionals, but may not be the most structured way to acquire in-depth knowledge.
- Hands-on workshops or labs (12 respondents) were selected by a significant number of respondents, highlighting the importance of practical learning for systems engineers.
- Mentored/self-paced online learning (7 respondents) can provide personalized guidance and flexibility.

Note

Respondents could select all that apply, so many engineers likely utilize a combination of these formats to maximize their learning and stay up-to-date in medical device systems engineering.

11 Stakeholders

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Caution

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Tip

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Figure 11.1 depicts a SysML block definition diagram (bdd) centered on a block named "Knowledge Repository" which represents the MDSE-KR. The diagram showcases various stakeholders that have an interest in the system.

There are three categories of stakeholders (Sterman and Sterman 2000), which are as follows:

- **Customer**, which represents the set of roles that will benefit from the medical device systems engineering knowledge repository system.
- External, which represents the set of roles that have an interest in the system that will limit or restrict the system in some way.
- Supplier, which represents the set of roles that are interested in developing and delivering the system.

Here's a breakdown of the stakeholder that have interest in the "Knowledge Repository" block:

- **Government:** This block signifies government entities with an interest in the knowledge repository. This could include regulatory bodies that oversee the medical device industry.
- Non-profit organizations: This block represents non-profit organizations that may have a stake in the knowledge repository. This could include organizations such as AAMI (Association for the Advancement of Medical Instrumentation) that focus on patient safety or medical device innovation.

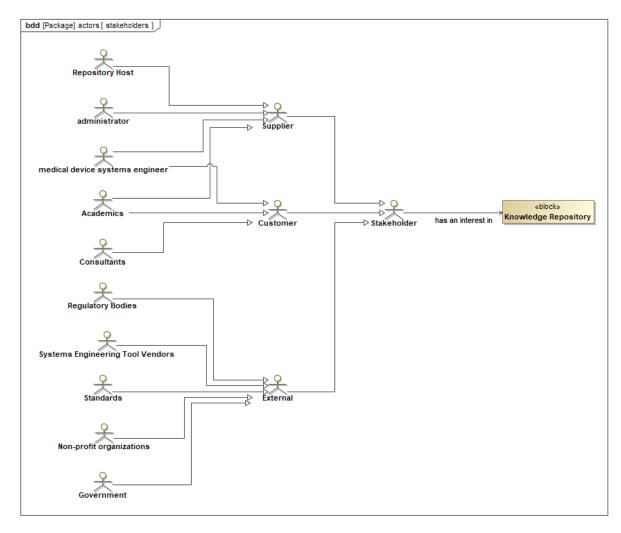


Figure 11.1: MDSE-KR Stakeholders View

- Standards organizations: This block signifies standards organizations that set requirements for medical devices. These standards organizations would likely have an interest in ensuring that the knowledge repository includes information on relevant standards.
- Systems Engineering Tool Vendors: This block represents vendors that develop systems engineering tools. These vendors may have an interest in the knowledge repository as a way to improve the capabilities of their tools.
- **Regulatory Bodies:** This block signifies regulatory bodies that govern the medical device industry. These regulatory bodies would likely have an interest in ensuring that the knowledge repository includes information on relevant regulations.
- Consultants: This block represents consultants who provide services to the medical device industry. These consultants may have an interest in the knowledge repository as a way to stay up-to-date on the latest developments in medical device systems engineering.
- Medical Device Systems Engineers: This block signifies medical device systems engineers who design and develop medical devices. These engineers would likely be the primary users of the knowledge repository.
- Academics: This block represents academic institutions that conduct research in medical device systems engineering. These institutions may have an interest in the knowledge repository as a way to share their research findings.
- Repository Host: This block signifies the organization or entity that hosts the knowledge repository. This could be a government agency, a non-profit organization, or a commercial entity.
- Administrator: This block signifies the person or team responsible for administering the knowledge repository. This could include tasks such as adding new content, maintaining the repository software, and ensuring security.

Overall, the SysML block definition diagram provides a useful high-level overview of the stakeholders who have an interest in the medical device systems engineering knowledge repository. This information is helpful for understanding the needs of these stakeholders and for planning the development and maintenance of the knowledge repository.

12 Goals and Objectives

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Section 12.1 provides the list of active, passive and sponsor stakeholders of the Medical Device Systems Engineering Knowledge Repository (MDSE-KR) system. Section 12.2 provides the list of stakeholder expectations that are classified as either capability or characteristic. Section 12.3 extracts which stakeholder expectations are considered sacred. Section 12.4 provides the system objectives. Section 12.5 explains the concept of operations of the system.

12.1 Stakeholders

Table 12.1: Stakeholders

ID	Stakeholder	Description	Type [active, passive, sponsor]
STH	OMedical Device Systems Engineer	Oversees the systems engineering of a medical device during its lifecycle, from initial concept and development, through regulatory approval and market launch, to ongoing sustaining and improvement. Primary user of the MDSE-KR.	active

ID Stakeholder	Description	Type [active, passive, sponsor]
STH0R02ulatory Compliance Officer	Also referred to as a Quality Regulatory Compliance Officer (QRCO), is a role that ensures a company's medical devices are developed, manufactured, and marketed according to all applicable regulations.	passive
STH0Q03ality Assurance Professional	Ensures medical devices meet quality standards from design to production.	passive
STH0R04earch and Devel- opment Team	Group responsible for creating new and innovative medical devices. This team typically consists of a variety of specialists, including engineers, scientists, and researchers.	sponsor
STH0005nical Specialist	Serves as a bridge between the manufacturer and healthcare providers. Typically has a background in healthcare and technology.	passive
STH0 D06 duct Manager	Manages the lifecycle of a medical device, from initial concept and development, through regulatory approval and market launch, to ongoing management and improvement.	passive
STH0H07lthcare Professionals and Patients	Users and end users of medical devices	passive
	orsThe administrator of the Medical Device Systems Engineering Knowledge Repository.	active

12.2 Stakeholders expectations

Stakeholder expectations were elicited from the stakeholders and documented in Table 12.3. The stakeholders were interviewed and/or surveyed to record their expectations. Not all stakeholders were addressed directly, this was case of the medical device regulatory bodies. Published medical device regulations were consulted to determine what are the expectations of the Regulatory Bodies.

Table 12.2: Stakeholders expectations

ID	_	Expectation Description	Source	Validation
	Title		Stakeholder	Method
STK	0 901 K1	Access to comprehensive and up-to-date	Medical	Demonstration
	Knowledge	knowledge related to medical device	Device	
	Access	systems engineering.	Systems	
CITILIA MEDILIA			Engineers	.
STK0 ©02 K2		Access to regulatory standards, guidelines,	Regulatory	Demonstration
	Regulatory	and documentation relevant to medical	Compliance	
~	Information	device systems engineering.	Officers	-
STKO©OBK3		Information on quality management	Quality	Demonstration
	Quality	systems, validation, verification, and	Assurance	
	Manage-	testing methodologies for medical devices.	Professionals	
~	ment			-
STK	0 9 014K4	Access to research papers, patents, and	Research and	Demonstration
	Research	emerging technologies in medical device	Development	
	and	systems engineering.	Teams	
~	Innovation			-
STK	0 9015 K5	Knowledge of clinical requirements,	Clinical	Demonstration
	Clinical Re-	usability considerations, and human factors	Specialists	
	quirements	engineering in medical device design.	-	-
STK	0 9016 K6	Insights into market trends, customer	Product	Demonstration
	Market	needs, and competitive analysis for medical	Managers	
OPT I	Insights	devices.	TT 1.1	
STK	0 007 K7 Safe	Safe and effective medical devices that	Healthcare	Analysis
	and	meet their clinical needs and preferences.	Professionals	
	Effective		and Patients	
ODT 7	Devices		A 1	D
STK	0 6018 K8	Oversight and management of the	Administrators	Demonstration
	Repository	knowledge repository, including resource	and Decision	
	Manage-	allocation and performance monitoring.	Makers	
OTT 7	ment		3 (f 1 · 1	т
STK(0 6019 K9	Variety of content type such as articles,	Medical	Inspection
	Content	videos, interactive content.	Device	
	Type		Systems	
			Engineers	

12.3 Sacred expectations

Table 12.3 shows the stakeholder expectations determines as "sacred".

Table 12.3: Sacred stakeholder expectations

12.4 Objectives

Table 12.4 provides the list of the system objectives.

Table 12.4: Objectives

ID Objective

- OBJ00Design a system that will compile and synthesize knowledge and best practices related to systems engineering in medical device development.
- OBJ00®2 ovide a comprehensive resource that educates professionals and students in the field of systems engineering about the unique challenges and considerations specific to medical devices.
- OBJ00© fer practical guidance and tools for applying systems engineering principles throughout the entire lifecycle of medical device development.
- OBJ00 Poster a deeper understanding of the regulatory requirements and standards governing medical devices and how they intersect with systems engineering processes.

12.5 Concept of Operations

This section defines the system context for the MDSE-KR. The analysis employs a SysML block definition diagram.

A context diagram is a diagram that defines the boundary between the system, or part of a system, and its environment, showing the entities that interact with it. ("System Context Diagram" 2019)

The context diagram shows the system's inputs and outputs and sets a baseline for developing the internal architecture (Larson et al. 2009). Context is what surrounds the system. It contains entities that are "just on the outside of the system" but are relevant to it (Crawley, Cameron, and Selva 2015).

Figure 12.1 is a SysML diagram of the system context for the Medical Device Systems Engineering Knowledge Repository. It depicts the system and its interaction with external entities.

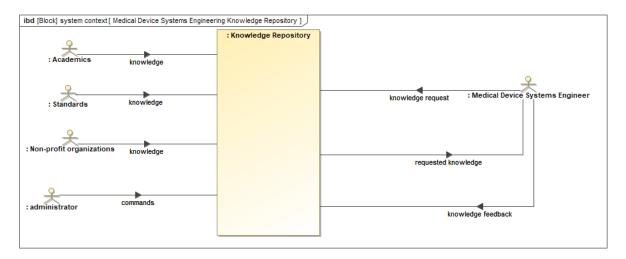


Figure 12.1: Medical Device System Context Diagram

The following is a breakdown of the system context diagram:

Blocks:

- **Knowledge Repository:** This is the central block of the system, which stores medical device systems engineering knowledge.
- Medical Device Systems Engineer: This block represents the users of the system who can request knowledge from the repository.
- Administrator: This block represents the system administrator who can manage the knowledge repository, including adding, updating, and deleting knowledge.
- Standards Organizations: This block represents external organizations that provide medical device systems engineering standards and regulations.
- Academics: This block represents academic institutions that contribute medical device systems engineering knowledge to the repository.
- Non-Profit Organizations: This block represents non-profit organizations that contribute medical device systems engineering knowledge to the repository.

Flows:

- **Knowledge:** This flow shows the knowledge that is stored in the repository. It goes in two directions, indicating that knowledge can be added to the repository and retrieved from it.
- **Knowledge Request:** This flow shows the request for knowledge from a medical device systems engineer to the knowledge repository.

- **Commands:** This flow shows the commands issued by the administrator to manage the knowledge repository.
- Knowledge Feedback: This flow shows the feedback provided by a medical device systems engineer on the knowledge retrieved from the repository. This feedback loop allows for improvement of the knowledge repository over time.

Part III System Modeling

13 Operational Analysis

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"What the system users must achieve".

The Operational Analysis perspective analyses the issue of operational users (actors), by identifying stakeholders that have to interact with the system, their goals, activities, constraints and the interaction conditions between them. This perspective allows to model the required high-level operational capabilities and perform an operational needs analysis without even defining the system-of-interest, in fact the system may not even mentioned in this section (Cronin, n.d.b).

13.0.1 Knowledge Repository

Figure 13.1 is a SysML block definition diagram that shows how the Medical Device Knowledge Repository (MDSE-KR) is decomposed.

The core element of the system is the **Knowledge Repository** block. This block represents a database or information storage system that houses the medical device systems engineering knowledge. The system stores multiple Content Section elements, indicated by the notation "[1..*]". This multiplicity signifies that the repository must contain at least one content section element, and the number of content section elements can be limitless. The content would likely encompasses details about regulatory, risk management, requirements management, and other relevant medical device systems engineering information.

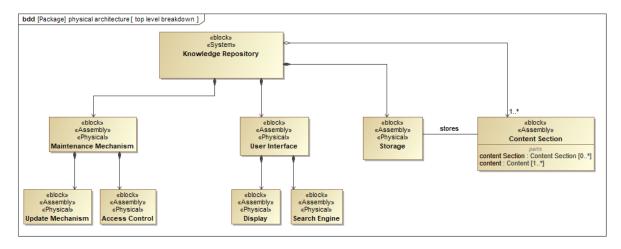


Figure 13.1: Medical Device Systems Engineering Knowledge Repository System Decomposition

The knowledge repository also includes a **Search Engine** component. This component plays a critical role in facilitating efficient retrieval of information from the knowledge repository. Users can leverage the search engine to locate specific knowledge items based on their needs.

The knowledge repository possesses the following key components:

- Maintenance Mechanism: This component maintains the accuracy and completeness of the knowledge over time. The specific mechanisms for maintenance are not explicitly shown in the diagram but could involve processes for adding, updating, and removing content.
- Storage: This content refers to the physical infrastructure responsible for storing the content. While the specific technology is not depicted, it likely involves a database server, physical medium or cloud-based storage solution.
- User Interface: Users can provide input, such as search queries, through the user interface. The system, in turn, can deliver output, such as search results or retrieved information, through the same channel.

The SysML block definition diagram portrays a knowledge repository for medical device systems engineering. The repository stores and manages essential information related to medical device systems engineering. Authorized users, such as systems engineers and consultants, can access and search the repository using a search engine. An administrator maintains the knowledge repository and ensures its integrity through appropriate maintenance mechanisms. This system architecture facilitates knowledge sharing and access within the medical device industry.

13.1 System Use Cases

This section analyzes the knowledge repository system use cases and modeled with a SysML use case diagram. Figure 13.2 depicts a central block representing the knowledge repository itself, surrounded by actors and their associated use cases.

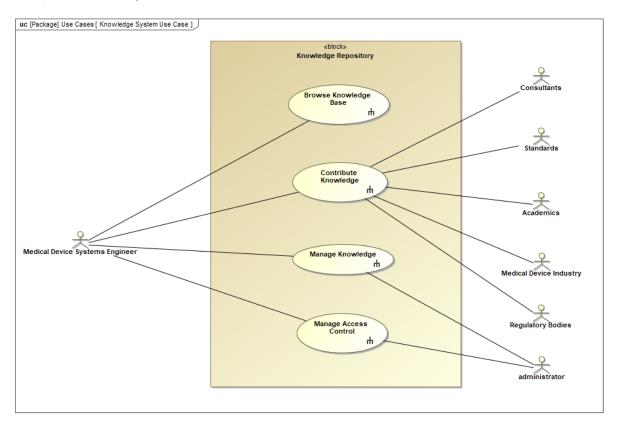


Figure 13.2: System Use Cases

13.1.1 Actors and their Roles

- Medical Device Systems Engineer: This primary actor interacts with the system for browsing, searching, contributing, and updating knowledge relevant to medical device engineering.
- Consultants: Similar to systems engineers, consultants utilize the system for various knowledge management tasks.
- Standards Bodies: This actor leverages the repository to access and potentially contribute knowledge related to medical device standards.
- Academics: This actor participates by searching for and potentially contributing knowledge that furthers the academic understanding of medical devices.

- **Regulatory Bodies:** Regulatory bodies interact with the system to access relevant knowledge for their oversight functions within the medical device industry.
- Administrator: This privileged actor plays a crucial role in managing access control, determining what information different actor types can view and update within the repository.

Use Cases and System Functionality:

- Browse Knowledge: This use case allows actors to explore the knowledge repository freely, potentially leading to serendipitous discovery of relevant information.
- Contribute Knowledge: This use case empowers qualified actors, such as engineers and consultants, to enrich the repository by adding new knowledge.
- Manage Knowledge: This use case enables actors to maintain the accuracy and relevance of the repository by allowing them to add and update content.
- Manage Access Control (Administrator): This restricted use case allows administrators to define and enforce access permissions, ensuring the integrity and security of the knowledge repository.

13.1.2 Browse Knowledge Use Case

13.1.2.1 Medical Device Systems Engineer Perspective

Figure 13.3 is a diagram of the use case Browse Knowledge from the perspective of the Medical Device Systems Engineer. This use case signifies the core function where the Medical Device Systems Engineer (MDSE) can navigate and explore the MDSE-KR.

The system allows for optional extensions to this functionality through:

- Search Knowledge Base: This allows the MDSE to look for specific information within the repository using keywords.
- Filter Knowledge Base: This enables the MDSE to filter the knowledge base based on pre-defined categories (e.g., standards, design principles, risk management) to narrow down the search results.

13.1.3 Contribute Knowledge Use Case

13.1.4 Manage Knowledge Use Case

Figure 13.4 is a SysML use case diagram that focuses on the responsibilities of the Knowledge Repository Administrator. The primary use case, "Manage Knowledge Base Content," is decomposed into its constituent functions: adding, editing, and deleting entries. This highlights the Administrator's role in maintaining the knowledge base.

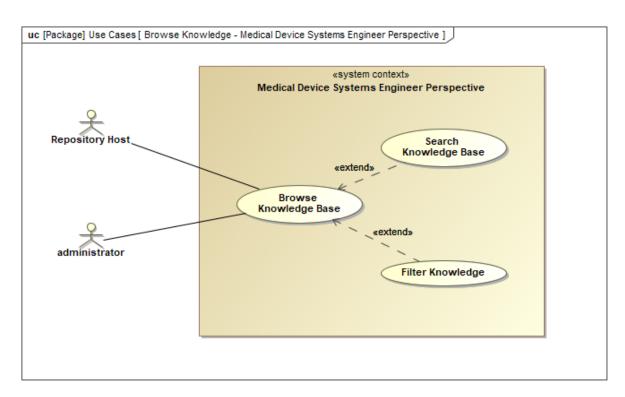


Figure 13.3: Browse Knowledge Use Case from the perspective of the Medical Device Systems Engineer

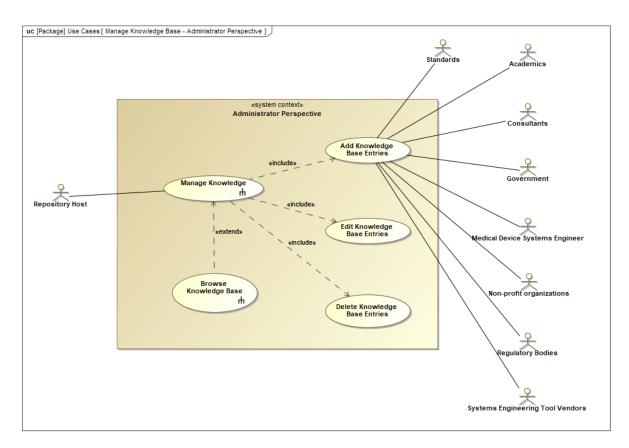


Figure 13.4: Manage Knowledge Base Content Use Case from the perspective of the Administrator

The SysML use case diagram depicts the core functionalities of the Knowledge Repository Administrator. The primary use case, "Manage Knowledge Base Content," represents the Administrator's responsibility for maintaining the knowledge base. The breakdown of this use case into its constituent parts (Add, Edit, Delete) provides clarity on the specific actions the Administrator can perform.

Here's a further breakdown of the functionalities:

- Add Knowledge Base Entries: This allows the Administrator to incorporate new information, articles, or resources into the knowledge base.
- Edit Knowledge Base Entries: This empowers the Administrator to update existing content within the knowledge base to ensure accuracy and reflect changes.
- **Delete Knowledge Base Entries:** This grants the Administrator the ability to remove outdated or irrelevant information from the knowledge base.

The optional "Browse Knowledge Base" use case acknowledges that the Administrator might need to browse the repository for reference.

13.1.5 Manage Access Control Use Case

13.1.6 Collaboration and Knowledge Sharing

The presence of diverse actors and their associated use cases highlights the collaborative nature of the knowledge repository system. The system fosters knowledge sharing within the medical device industry, allowing engineers, consultants, and regulatory bodies to access and contribute valuable information. Academics and standards bodies can also benefit by leveraging the repository for research and standard development purposes.

The SysML use case diagram demonstrates a well-defined knowledge repository system designed to facilitate knowledge sharing and management within the medical device industry. The diverse set of actors and their associated use cases emphasize the system's potential to serve a wide range of stakeholders. Future analysis could explore the system's internal structure, including its knowledge representation and retrieval mechanisms, to provide a more comprehensive understanding of its functionality.

13.2 Operational Scenarios

The operational scenarios are created to demonstrate the use cases can be satisfied (validation).

13.2.1 Main System Operational Scenario

This section analyzes a SysML sequence diagram representing the interaction between a medical device systems engineer and a knowledge repository system. Figure 13.5 depicts the knowledge retrieval process crucial for informed systems engineering within the medical device development domain.

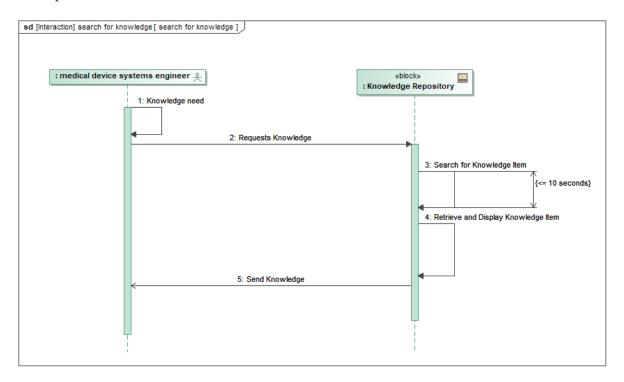


Figure 13.5: System Main Function Sequence Diagram

Actors and Interactions:

The sequence diagram focuses on two primary actors:

- Medical Device Systems Engineer: This actor represents the user of the system, an engineer seeking knowledge pertinent to medical device design or development.
- **Knowledge Repository:** This block represents the system component housing the relevant knowledge for medical device systems engineering.

The interaction commences with the activation of the **Medical Device Systems Engineer**. This signifies the engineer encountering a **knowledge need**, prompting them to initiate a search within the knowledge repository. The engineer transmits a request to the knowledge repository, likely specifying the desired knowledge domain or specific keywords related to their need.

Knowledge Retrieval Process:

Upon receiving the request, the knowledge repository executes a **Search for Knowledge Item** operation. This operation signifies the system's internal process of identifying relevant knowledge within its storage. The diagram incorporates a time constraint, indicating that the search should be completed within 10 seconds or less. This emphasizes the system's prioritization of search efficiency, ensuring timely knowledge retrieval for the engineer.

Following a successful search, the knowledge repository retrieves the identified knowledge item. This retrieved item could encompass various formats such as technical references, design guidelines, or regulatory guidelines relevant to medical devices. Finally, the knowledge repository transmits the retrieved knowledge item back to the engineer, enabling them to analyze the information and utilize it to address their specific knowledge need.

Significance for Medical Device Development:

This SysML sequence diagram offers a simplified yet insightful representation of a critical interaction within the medical device development process. Efficient access to relevant knowledge empowers engineers to make informed decisions concerning design, development, and regulatory compliance. The time constraint on the search operation underscores the importance of a well-structured and indexed knowledge repository, facilitating rapid retrieval of necessary information.

Further Considerations:

While this diagram provides a foundational understanding of the knowledge search process, further exploration could involve:

- Investigating alternative interaction scenarios, such as browsing by category or utilizing advanced search functionalities.
- Analyzing potential error conditions during the search process and the system's response mechanisms.
- Considering the knowledge repository's internal structure and indexing methods for efficient retrieval.

By delving deeper into these aspects, a more comprehensive understanding of the knowledge retrieval system and its impact on informed decision-making within the medical device development domain can be achieved.

13.2.2 Browse Knowledge Operational Scenarios

13.2.2.1 Browse Knowledge Base (Actor: Medical Device Systems Engineer)

Figure 13.6 depicts the interaction between a Medical Device Systems Engineer (MDSE) and a Knowledge Repository system during the browsing of knowledge base entries.

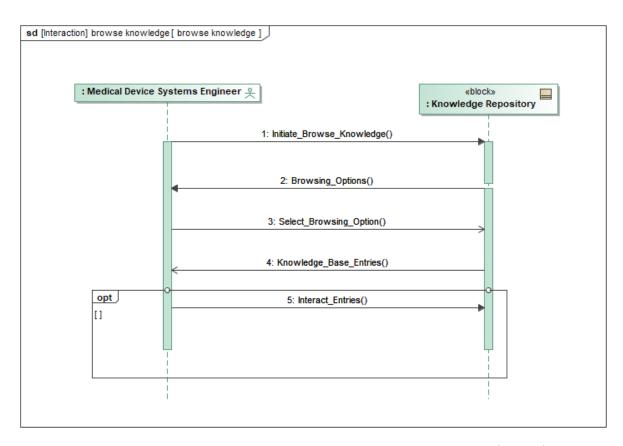


Figure 13.6: SysML Sequence Diagram: Browse Knowledge Base (MDSE)

The message sequence is the following:

- 1. MDSE Activates System: The MDSE initiates the interaction by activating the Knowledge Repository system, likely by launching the application or visiting a website.
- 2. System Provides Browse Options: The Knowledge Repository system responds by presenting the MDSE with browse options. These options might include browsing by category, topic, or keyword search.
- 3. MDSE Selects Browse Option: The MDSE selects a desired browse option. In this specific diagram, the option chosen is to browse by category.
- 4. System Sends Category List: The Knowledge Repository system sends a list of available categories to the MDSE.
- 5. MDSE Selects Category: The MDSE selects a category of interest from the list provided by the system.
- 6. System Sends Knowledge Base Entries: The Knowledge Repository system retrieves knowledge base entries matching the selected category and sends them to the MDSE.
- 7. MDSE Reviews Entries: The MDSE reviews the list of knowledge base entries provided by the system. This might involve reading titles, descriptions, or summaries to determine if the entries are relevant to the MDSE's needs.
- 8. (Optional) MDSE Selects Entry: If an entry is of particular interest, the MDSE might select it for further exploration (e.g., clicking on an article title to view its details).

The diagram highlights the key interactions:

- The system offers various browse options, allowing the MDSE to navigate the knowledge base efficiently based on their needs.
- Filtering by category provides a structured approach to exploring the knowledge base.
- The ability to review entry details empowers the MDSE to assess the relevance of each entry before potentially diving deeper.

13.2.2.2 Search Knowledge Base (Actor: Medical Device Systems Engineer)

Figure 13.7 is a SysML sequence diagram that illustrates the interaction when the MDSE utilizes the optional "Search Knowledge Base" functionality.

The MDSE activates the system and initiates the "Search Knowledge Base" use case. The Knowledge Base System prompts the MDSE to enter search keywords, after which the MDSE enters the keywords. The system then searches the knowledge base based on the entered keywords and displays the search results to the MDSE. Optionally, the MDSE can interact with the displayed search results.

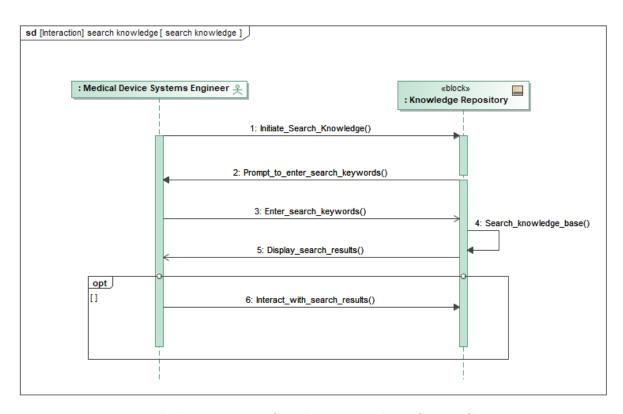


Figure 13.7: Knowledge Repository Search Functionality - SysML Sequence Diagram

Here's a breakdown of the interaction:

- 1. The diagram starts with the engineer initiating the search for knowledge (Initiate_Search_Knowledge())
- 2. The system prompts the engineer to enter search keywords (Prompt_to_enter_search_keywords()).
- 3. The engineer enters the search keywords (Enter_search_keywords())
- 4. The system utilizes the entered keywords to search the knowledge base (Search_knowledge_base())
- 5. Once the search is complete, the system displays the search results (Display_search_results())
- 6. Optionally, the engineer can interact with the search results (Interact_with_search_results()) which likely involves further refining the search or selecting specific results for detailed viewing.

13.2.2.3 Filter Knowledge Base by Category (Actor: Medical Device Systems Engineer)

Figure 13.8 is a SysML sequence diagram that captures the step-by-step interaction between the MDSE and the Knowledge Base System during the process of filtering knowledge base entries by category. It begins with the MDSE activating the system and initiating the filtering use case. The Knowledge Base System then presents a list of available categories, allowing the MDSE to make a selection. Upon selecting a category, the system retrieves and displays the corresponding knowledge base entries. Finally, the MDSE has the option to interact with the displayed entries as needed.

Messages:

- 1. MDSE activates the system and initiates the "Filter Knowledge Base by Category" use case:
 - The MDSE triggers the filtering process by activating the system, indicating the intent to filter the knowledge base entries based on a specific category.
- 2. Knowledge Base System presents a list of available categories to the MDSE:
 - Upon activation, the Knowledge Base System responds by presenting a list of available categories to the MDSE.
 - This message indicates the system's readiness to receive input from the MDSE regarding the desired category for filtering.
- 3. MDSE selects a category from the list:
 - The MDSE selects a category from the presented list, specifying the criteria for filtering the knowledge base entries.

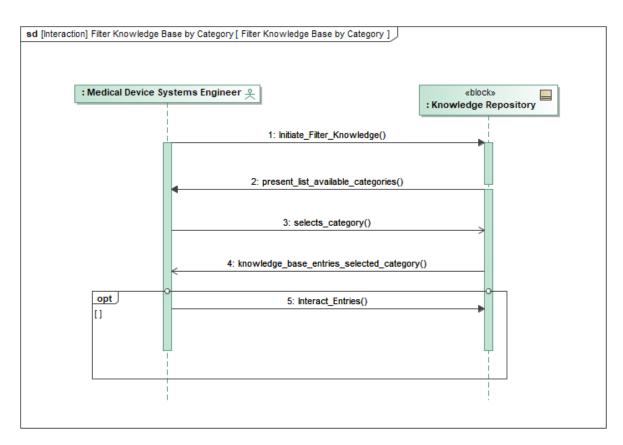


Figure 13.8: Sequence Diagram: Filter Knowledge Base by Category (Actor: Medical Device Systems Engineer)

• This interaction allows the MDSE to narrow down the search scope to retrieve relevant information.

4. Knowledge Base System retrieves and displays knowledge base entries belonging to the selected category:

- Upon receiving the selected category from the MDSE, the Knowledge Base System retrieves and displays the knowledge base entries that correspond to the specified category.
- This message signifies the system's action of processing the MDSE's request and presenting the filtered results accordingly.

5. MDSE (Optional): MDSE can interact with the displayed entries:

- Optionally, the MDSE can interact with the displayed knowledge base entries to further analyze, review, or utilize the information.
- This interaction provides flexibility to the MDSE in exploring the filtered results based on their specific requirements or preferences.

13.2.3 Contribute Knowledge Operational Scenario

13.2.4 Manage Knowledge Operational Scenario

13.2.4.1 Update Content

Figure 13.9 is a SysML sequence diagram that focuses on the use case, "Manage Knowledge," identified in Figure 13.4 from the Administrator Perspective. It illustrates the interaction between the Administrator and the MDSE-KR System for adding a new content entry.

Elements:

- Actors:
 - MDSE-KR Administrator
- Lifelines: Vertical dashed lines representing the actors and the system.
- System: MDSE-KR System
- **Messages:** Arrows depicting the interaction flow between the Administrator and the System.

Message Sequence:

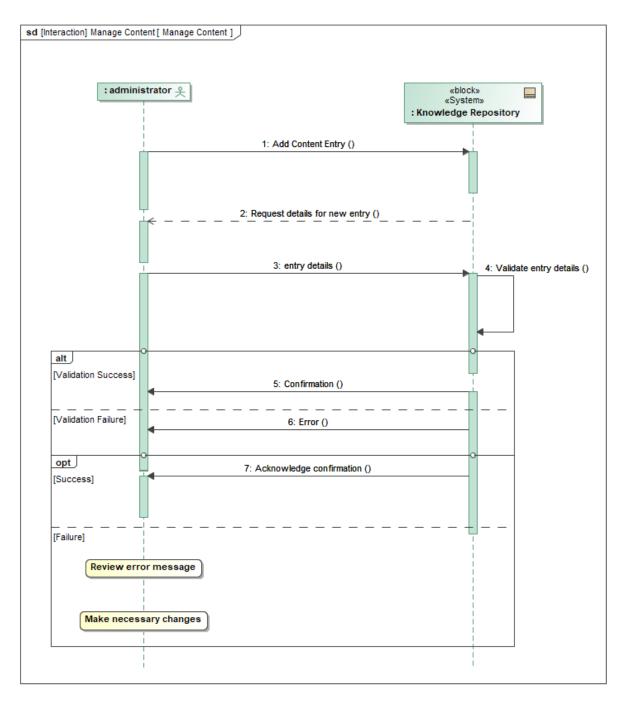


Figure 13.9: Update Content Sequence Diagram

- 1. **Administrator:** Activates the system by initiating the "Add Content Entry" functionality.
- 2. **Knowledge Repository:** Sends a message to the Administrator requesting details for the new entry. This might involve title, description, category selection, and potentially file upload options.
- 3. **Administrator:** Provides the required information for the new entry.
- 4. **Knowledge Repository:** Validates the information provided by the Administrator. This could involve checking for missing fields or ensuring compliance with formatting guidelines.
- 5. **Knowledge Repository (Success):** If validation is successful, the system stores the new entry in the knowledge base and sends a confirmation message to the Administrator.
- 6. **Knowledge Repository (Failure):** If validation fails, the system sends an error message to the Administrator explaining the issue and requesting corrections.
- 7. Administrator (Success): The Administrator acknowledges the confirmation message (optional).
- 8. Administrator (Failure): The Administrator reviews the error message, makes necessary changes to the entry details, and repeats steps 3-8.

13.2.5 Manage Access Control Operational Scenario

14 Physical Architecture

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"How the system will be built".

The Physical Analysis perspective defines the finalized architecture of the system, as it should be completed and integrated. It adds the functions required by the implementation and technical choices, and reveals the behavioral components that perform these functions. These behavioral components are then implemented using host implementation components that offer them the necessary material resource.

14.1 Top Level System Breakdown

Figure 14.1 is a SysML block definition diagram (BDD) for a physical architecture. It shows the breakdown of a system into it assemblies at a high level.

Here's a breakdown of the assemblies:

- Knowledge Repository: This block stores knowledge, the data that the system operates on.
- Search Engine: This block finds information within the knowledge repository. It takes a search query as input and provides results.
- Maintenance Mechanism: This block is responsible for maintaining the system. It includes an update mechanism and access control.

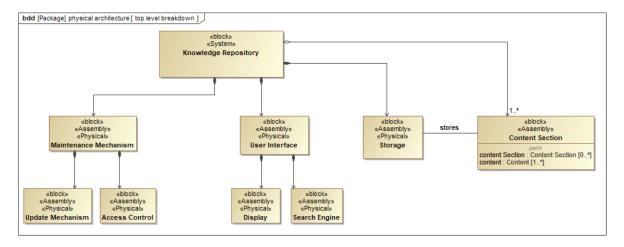


Figure 14.1: Top Level Physical Architecture

- Update Mechanism: This block updates the knowledge repository.
- Access Control: This block controls access to the system, by authenticating users.
- Storage: This block stores data, the knowledge repository or other system data.
- User Interface: This block allows users to interact with the system. It provides content to the user and can receive content from the user.
- **Display:** This block presents information to the user.
- Content Section: This block refers to the data that is presented by the user interface and displayed.

The diagram also shows the relationships between these blocks. For example, the search engine has a part relationship with the knowledge repository. This means that the search engine is a component of the knowledge repository. The user interface also has a content relationship with the content block. This means that the user interface displays content.

14.2 MDSE-KR Content and Metadata Structure

Figure 14.2 is SysML block definition diagram depicts the content structure of the MDSE-KR. It represents the various content types and their interrelationships.

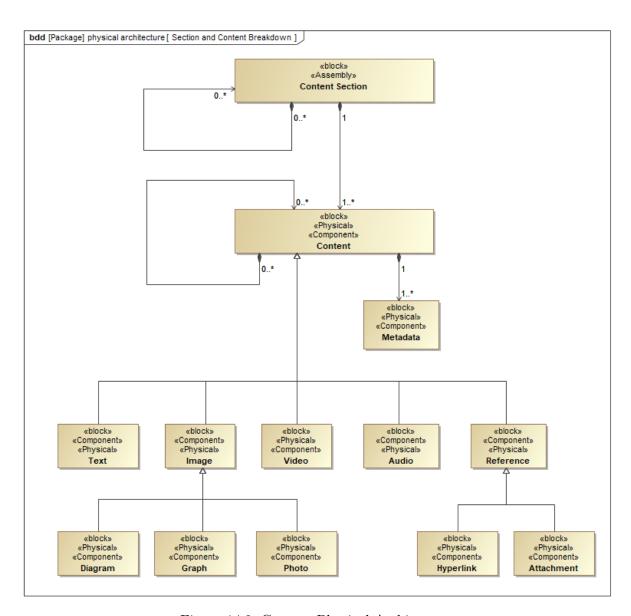


Figure 14.2: Content Physical Architecture

14.2.1 Content Breakdown:

The diagram is segregated into two primary sections:

- 1. **Content Section:** This section serves as the heart of the repository, encapsulating the actual knowledge pertaining to medical device systems engineering. It encompasses a diverse range of content formats to cater to various learning styles and information needs. Here's a breakdown of the content block types:
 - **Text:** This block represents core textual content, including articles, research papers, technical specifications, design documents, and user manuals.
 - Image: This block encompasses visual content such as diagrams, schematics, flowcharts, anatomical illustrations, and photographs of medical devices.
 - Video: This block signifies instructional videos, animations, demonstrations of medical device functionalities, and surgical procedures.
 - Audio: This block represents audio content, such as lectures, presentations, and interviews with medical device experts.
 - Reference: This block allows referencing other knowledge elements within the repository, fostering a network of interconnected information.
 - **Diagram:** This block specifically addresses technical diagrams beyond general schematics, potentially including block diagrams, system architecture diagrams, and system behavior diagrams.
 - **Graph:** This block incorporates visualizations of data related to medical devices, such as performance charts, reliability graphs, and risk assessment histograms.
 - **Photo:** This block focuses on high-resolution photographs of medical devices, their components, or specific functionalities.
 - Attachment: This block caters to non-standard content formats, including external documents (e.g., spreadsheets, simulation results), software code snippets, and design files.
 - Hyperlink: This block facilitates linking to external resources relevant to the medical device domain, such as online databases, regulatory guidelines, and manufacturer websites.
- 2. **Metadata:** This section complements the Content Section by providing additional information about the content pieces. It serves as a crucial indexing mechanism for efficient knowledge retrieval.

14.2.2 Relationship Representation:

The arrows connecting the blocks depict the relationships between different content types. These relationships are typically directed with cardinalities specifying the number of instances involved. Here's an interpretation of some key relationships:

- Content Section can have zero or more instances of each specific content type (Text, Image, Video, etc.). This flexibility accommodates diverse knowledge representation within the repository.
- A specific content type block (e.g., Text) can only belong to **one Content Section**. This ensures proper organization and avoids content duplication.
- Reference block establishes connections between content elements, enabling users to navigate the knowledge base and discover related information.

15 Functional Architecture

Caution

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This section details the functional architecture of the Medical Device Systems Engineering Knowledge Repository (MDSE-KR) utilizing SysML diagrams. The functional architecture establishes the foundation for further system design, detailing the essential functionalities to achieve the desired system behavior.

Figure 15.1 is a SysML activity diagram that shows how the MDSE-KR interacts with actors and knowledge sources to fulfill its core function of providing comprehensive and up-to-date knowledge for performing systems engineering on medical devices.

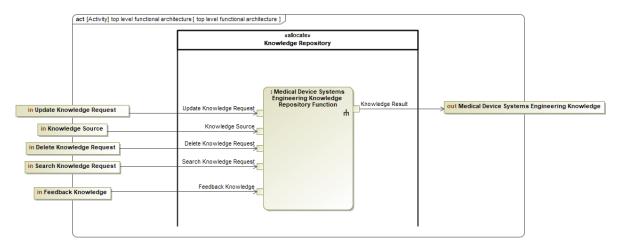


Figure 15.1: Functional Architecture Top Level Diagram

15.1 Actors

The functional architecture employs two primary actors:

- Systems Engineers: They are the primary users who interact with the system to retrieve knowledge on performing Systems Engineering (SE) for medical devices. This could involve searching for specific information, understanding best practices, or navigating relevant standards.
- **Administrator:** This role manages the knowledge repository, ensuring its accuracy and effectiveness. Responsibilities include:
 - Updating the knowledge base with new information from various sources.
 - Deleting outdated or irrelevant content.
 - Processing user feedback to identify areas for improvement.

15.2 Knowledge Source

The knowledge base acts as the repository for all information related to Medical Device Systems Engineering. Figure 15.1 highlights various sources that contribute to this knowledge pool. The sources can be but not limited to:

- Expert Systems Engineers: Their expertise in medical devices and SE practices serves as a valuable knowledge source.
- **Standards:** Regulatory bodies provide critical guidelines and best practices for medical device development.
- Academics: Research findings and publications from academic institutions contribute to the knowledge base.
- Consultants: Industry specialists can offer practical insights and solutions to specific challenges.
- **Regulations:** Regulatory requirements for medical devices must be considered and reflected in the knowledge repository.

15.3 Main System Function

The core function of the MDSE-KR revolves around processing knowledge requests from Systems Engineers. The activity diagram outlines four main request types:

- Search Knowledge Request: Systems Engineers utilize this function to search the repository for specific information related to medical device SE. The system retrieves relevant knowledge based on the search criteria and presents it to the user.
- Update Knowledge Request: The system allows users to submit updates to the knowledge base. This might involve providing new information, correcting existing entries, or suggesting improvements. The administrator reviews and integrates these updates into the repository after proper vetting.
- Delete Knowledge Request: Outdated or inaccurate information can be removed through this function. Systems Engineers might identify such discrepancies, or the administrator may find them during maintenance activities.
- Feedback Knowledge: The system facilitates user feedback submission. This feedback allows the administrator to gauge the system's effectiveness and identify areas for improvement. It can be used to prioritize updates, refine search algorithms, or enhance the overall user experience.

15.4 Internal System Functions

This section uses a SysML activity diagram to provide a comprehensive analysis of the functionalities within the Medical Device Systems Engineering Knowledge Repository (MDSE-KR).

Figure 15.2 is SysML activity diagram that shows how the MDSE-KR handles various knowledge requests initiated by Systems Engineers and the administrator.

Here's a breakdown of the three functions depicted in Figure 15.2 for each request type:

• Retrieve Knowledge Function:

- 1. Receive Search Request: The system receives a search query from a Systems Engineer seeking information related to medical device systems engineering.
- 2. Parse Search Criteria: The system analyzes the search query to identify keywords or filters used by the Systems Engineer to narrow down the search.
- 3. **Search Knowledge Repository:** The system utilizes the parsed search criteria to query the knowledge repository. This might involve searching by topic, keyword, regulatory standard, or other relevant attributes.

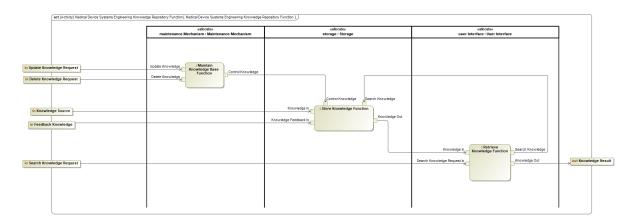


Figure 15.2: Internal Functional Architecture

- 4. **Deliver Search Results:** The system retrieves relevant information from the knowledge repository based on the search criteria and presents it to the Systems Engineer in a user-friendly format.
- 5. Refine Search (Optional): The Systems Engineer might have the flexibility to refine their search based on the initial results. This could involve applying additional filters or modifying keywords to achieve a more precise information retrieval.

• Maintain Knowledge Base Function

- Process Update Knowledge Request:

- 1. **Receive Update Request:** The system receives a request to update the knowledge repository, likely initiated by the administrator. This request might involve adding new information, correcting existing entries, or removing outdated content.
- 2. Validate Update Request: The system verifies the user's permission to edit the knowledge base and performs checks to ensure the update request is consistent and free of errors or inconsistencies.
- 3. Review Update Request (Optional): Depending on the system configuration, an additional step might involve routing the update request to an administrator for review and approval before integrating it into the knowledge repository.
- 4. **Update Knowledge Repository:** Once validated (and potentially approved), the system incorporates the update into the knowledge repository, ensuring the information remains current and accurate.

- Process Delete Knowledge Request:

- 1. **Receive Delete Request:** The system receives a request to delete information from the knowledge repository. This request might originate from a Systems Engineer who identified inaccurate information or from the administrator during maintenance activities.
- 2. Validate Delete Request: The system verifies the user's permission to delete information and assesses potential consequences of the deletion on other parts of the knowledge repository. This step helps avoid unintended disruptions to the knowledge base.
- 3. **Delete Knowledge:** If the deletion is deemed appropriate, the system removes the specified information from the knowledge repository, ensuring the information repository remains accurate and relevant.

• Store Knowledge Function:

- Intake Data: This function handles the initial intake of new knowledge intended for the MDSE-KR. It might involve functionalities such as:
 - 1. Receive new information from various sources (expert engineers, standards documents, academic publications, etc.).
 - 2. Parse and format the received information to ensure consistency with the existing knowledge base structure.
 - 3. Assign relevant metadata (e.g., author, source, date) to the new knowledge for future reference and traceability.
- Validate Knowledge: Before integrating new information, the "Store Knowledge Function" might perform some level of validation to ensure its quality and accuracy. This could involve:
 - 1. Check for factual inconsistencies with existing knowledge in the repository.
 - 2. Verify the credibility of the source from which the information originated.
 - 3. Allow for user review or approval (administrator or designated expert) for particularly complex or critical information.
- Integrate Knowledge: Once validated, the function would likely integrate the new knowledge into the MDSE-KR. This might involve:
 - 1. Store the information in an appropriate format within the knowledge repository.
 - 2. Establish connections or links between the new knowledge and existing related information within the repository for improved searchability and user experience.

3. Update relevant indexes or search algorithms to ensure the newly stored knowledge can be effectively retrieved by users.

- Process Feedback Knowledge:

- Receive Feedback: The system receives user feedback submitted by a Systems Engineer. This feedback can be positive, negative, or offer suggestions for improvement.
- 2. **Process Feedback:** The system analyzes the feedback to understand its nature and categorize it accordingly. This might involve sentiment analysis techniques to classify the feedback as positive, negative, or containing suggestions.
- 3. **Store Feedback:** The system stores the feedback in a designated location for future reference. This allows for historical analysis of user experiences and facilitates continuous improvement of the MDSE-KR.
- 4. Analyze Feedback (Optional): The administrator may periodically review user feedback to identify trends, prioritize knowledge base updates based on user needs, or implement improvements to the system's functionalities based on user suggestions.

15.5 Allocation Matrix

Figure 15.3 is SysML allocation matrix that illustrates how elements in one part of a system relate to elements in another part. In the context of the MDSE-KR, the matrix shows how the system's functionalities (rows) are allocated to specific physical components (columns).

The cells in the allocation matrix will contain an arrow symbol to indicate that a function (row) is allocated to a specific component (column). This signifies that the component is responsible for implementing that particular functionality.

The SysML allocation matrix provides insights for:

- System Design and Development: It ensures all functionalities are assigned to specific components, avoiding gaps or overlaps in responsibility.
- Verification and Validation: It helps verify if each component implements its allocated functions correctly and validates if the overall system meets its requirements.
- Communication and Traceability: It facilitates communication between stakeholders by clearly showing how system functions are realized by physical components. It also allows for traceability of requirements to specific parts of the system design.

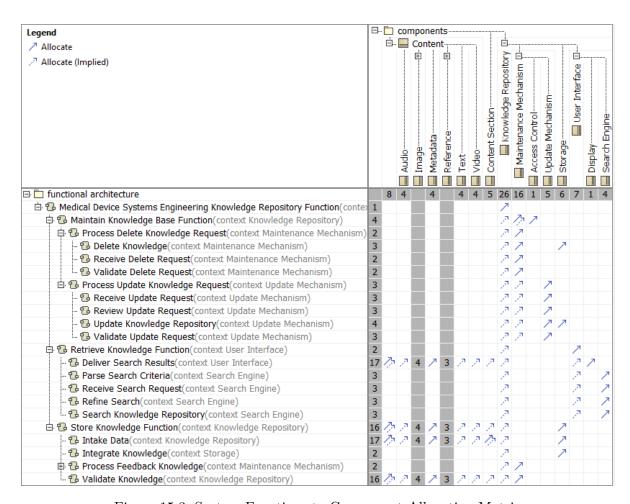


Figure 15.3: System Functions to Component Allocation Matrix

16 System Requirements

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Table 16.1 is the Medical Device Systems Engineering Knowledge Repository (MDSE-KR) System Requirements. The requirements were modeled as a SysML requirements table and exported as an HTML file that was embedded to this report.

Table 16.1: System Requirements

17 MDSE-KR Content Configuration Concepts

This section provided some proposed configurations for the MDSEE-KR content sections. The proposals were mainly derived from the data presented in the Sources and Survey Results sections of this report. The relationship of the elements called content section and content and its types were modeled in the Physical Architecture section of this report.

17.1 Concept 1: Emphasis on practical application and regulatory compliance

The following content section configuration was designed to provide a comprehensive understanding of systems engineering as applied to the medical device industry, emphasizing practical application and regulatory compliance.

• Introduction to Medical Device Systems Engineering

- Overview of systems engineering principles
- Importance of systems thinking in medical device development
- Regulatory landscape for medical devices

• Medical Device Development Process

- Overview of the Medical Device Development Life Cycle (MDLC)
- Role of systems engineering at each stage
- Case studies showcasing successful applications

Risk Management and Regulatory Considerations

- Identifying and assessing risks in the development process
- Integration of risk management with regulatory requirements
- Compliance with ISO standards and FDA regulations

Systems Integration and Interdisciplinary Collaboration

- Strategies for effective cross-functional collaboration
- Role of systems engineering in integration challenges
- Communication and documentation best practices

17.2 Concept 2: Focused on Education and Preparation

Considering the goal of educating and preparing systems engineers for the medical device field, the following are some content section breakdowns.

17.2.1 Structure 1: Foundational Knowledge to Advanced Applications

Systems Engineering Fundamentals

- Introduction to Systems Engineering Concepts (Systems Thinking, Stakeholders, Boundaries)
- Understanding the V-Model and Systems Development Lifecycle
- Applying Requirements Engineering Principles (FRCs, DRCs, Traceability)
- Introduction to Modeling and Simulation Techniques (e.g., UML, SysML)
- Risk Management Fundamentals (FMEA, HACCP, Hazard Identification)
- Project Management Essentials for Systems Engineers (Planning, Scheduling, Risk Management)

Medical Device Specific Knowledge

- Overview of the Medical Device Development Lifecycle (Concept to Market)
- Essential Regulatory Affairs for Medical Devices (ISO 13485, IEC 60601 Series)
- Introduction to Human Factors and Usability Engineering (HFMEA Principles)
- Design for Manufacturability and Assembly (DFMA) Considerations

Advanced Topics and Applications

- Model-Based Systems Engineering (MBSE) for Medical Devices (Benefits, Methodologies)
- Software Considerations in Medical Device Systems (Safety, Integration)
- Cybersecurity for Medical Devices (Risk Management, Secure Design Practices)
- Interoperability and Integration of Medical Devices (Standards, Communication Protocols)

17.2.2 Structure 2: Learning Path Approach

Getting Started with Medical Device Systems Engineering

- Core Systems Engineering Methodologies (Requirements Engineering, Risk Management)
- Essential Medical Device Knowledge (Lifecycle Phases, Regulatory Landscape)
- Building Effective Collaboration and Communication Skills (Cross-Functional Teams)

Deep Dive into Medical Device Systems Engineering

- Advanced Systems Engineering Techniques (Model-Based Systems Engineering, Traceability Matrices)
- Risk Management in Medical Devices (FMEA Applications, Mitigation Strategies)
- Design Considerations for Medical Devices (Human Factors Principles, DFMA Techniques)

Mastering Medical Device Systems Engineering

- Analyzing Case Studies and Best Practices in Medical Device Development
- Exploring Emerging Technologies in Medical Devices (AI, Machine Learning)
- Identifying Continuous Learning Resources and Strategies (Professional Development)

17.2.3 Structure 3: Competency-Based Learning

Core Competencies for Medical Device Systems Engineers

- Applying Systems Engineering Fundamentals (V-Model, Requirements Engineering)
- Demonstrating Knowledge of Medical Device Regulations and Standards (ISO 13485, IEC 60601)
- Implementing Risk Management and Safety Practices (FMEA, Hazard Analysis)
- Mastering Design and Verification & Validation Processes (DFMA, Testing Strategies)
- Effectively Collaborating and Communicating with Stakeholders (Written & Verbal Communication)

Learning Resources by Competency

- Curated Articles, Tutorials, and E-books Aligned with Each Competency
- Recommended Online Courses and Training Modules for Skill Development

• Real-World Case Studies and Examples Illustrating Competency Application

Self-Assessment Tools and Skill Development Activities

- Interactive Quizzes and Knowledge Checks to Assess Understanding
- Practical Exercises and Project Templates to Apply Learned Concepts
- Resources for Identifying and Filling Skill Gaps (Self-Assessment Tools, Training Recommendations)

These content section configurations prioritize building a strong foundation in systems engineering principles and then apply them to the specific context of medical devices. They also emphasize providing learning resources and opportunities for skill development to prepare systems engineers for success in this field.

18 Conclusions

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The following are the conclusions of this report:

18.1 How Medical Device Systems Engineering differ to other industries

- Comparative Analysis: The report provided a detailed comparative analysis of systems engineering practices across the Medical Device, Aerospace, Automotive, and Consumer Electronics industries, highlighting the unique challenges and approaches of each.
- Industry-Specific Practices: It emphasizes the importance of safety and regulatory compliance in the Medical Device industry, contrasting it with the performance, reliability, and cost considerations in other sectors.
- Stakeholder Considerations: The report discussed how systems engineering in the Medical Device industry must cater to a broader range of stakeholders, including patients, doctors, and regulatory bodies, which influences the development process.
- Risk Management Focus: A key conclusion is the critical focus on risk management in the Medical Device industry, where patient safety is paramount, necessitating stringent control processes and regulatory oversight.

18.2 Problem

- Systems Engineering in Medical Devices: The field of medical device systems engineering is crucial due to the complexity of devices and stringent regulatory requirements, yet there is a scarcity of resources and literature dedicated to this discipline.
- Understanding Gap: There is a lack of clarity among non-systems engineers and disagreement among systems engineers about the value and definition of medical device systems engineering, leading to challenges in its adoption and implementation.
- Causal Loop Analysis: A causal loop diagram illustrates that investment in systems engineering can lead to reduced unsuccessful medical devices, which in turn increases profits and resources for further systems engineering efforts.
- Industry Comparison: Systems engineering is more prevalent in industries like aerospace, automotive, and IT, while the medical device industry lags behind in adopting these practices, as evidenced by fewer publications and specialized literature.

18.3 Analysis of User Need Sources

- Source Evaluation: The MDSE-KR system design emphasized the importance of selecting credible and verifiable sources, such as job descriptions, standards, and publications, to design a comprehensive knowledge repository for medical device systems engineering.
- Medical Device Trends: The FDA's classification and registration data reveal that Class III devices are the most registered, while implantable devices constitute a smaller percentage compared to non-implantable ones.
- Systems Engineering Education: Courses like TONEX's "Systems Engineering for Medical Device Development" provide essential knowledge and skills for professionals, highlighting the need for a deep understanding of systems engineering principles applied to medical device development.
- **Professional Insights**: Job profiles and survey results from systems engineers in the medical device industry underscore the necessity for strong engineering fundamentals, systems thinking, and regulatory knowledge to succeed in this field.
- Survey Insights: The survey results from 22 respondents reveal that Systems Integration is the primary challenge in systems engineering for medical devices, followed by Interdisciplinary Collaboration and Safety and Efficacy.
- Tool Preferences: Systems engineers favor Requirement Management Software and Documentation Tools, indicating a significant portion of their time is dedicated to managing requirements and documenting processes.

- Methodology Adoption: Model-Based Approaches and Quality and Compliance methodologies like FMEA are highly valued for their structure and guidance, crucial for meeting safety and regulatory compliance in the medical device industry.
- Learning Resources: A diverse range of learning formats is utilized, with E-books, Webinars, and Interactive Online Courses being the most accessible and beneficial for systems engineers in the medical device field.

18.4 System Stakeholder Analysis

- Stakeholder Categories: The MDSE-KR system identified three main stakeholder categories: Customer, External, and Supplier, each with distinct interests and roles in the medical device systems engineering knowledge repository.
- Diverse Interests: Stakeholders range from government entities and non-profit organizations to systems engineering tool vendors and medical device systems engineers, highlighting the wide-ranging interest in the knowledge repository.
- Primary Users: Medical device systems engineers are likely the primary users, utilizing the repository to design and develop medical devices, while academics and consultants use it to share research and stay informed.
- Repository Management: The Repository Host and Administrator play crucial roles in hosting and maintaining the knowledge repository, ensuring it remains a valuable resource for all stakeholders.

18.5 Operational Analysis

- Operational Analysis: The Operational Analysis provided an in-depth analysis of operational users and their interactions with the system, focusing on high-level operational capabilities and needs without specifying the system-of-interest.
- Use Cases and Actors: The Use Cases outlines various roles of actors such as Medical Device Systems Engineers, Consultants, and Regulatory Bodies, highlighting their interactions with the knowledge repository.

18.6 Physical Architecture

• System Architecture: The physical architecture defined the finalized structure of the system, detailing the implementation functions and technical choices, along with the behavioral components that execute these functions.

- Component Breakdown: The system is broken down into assemblies such as Knowledge Repository, Search Engine, Maintenance Mechanism, Storage, User Interface, Display, and Content Section, each with specific responsibilities and relationships.
- Content and Metadata: The MDSE-KR content structure is depicted as various content types: Text, Image, Video, Audio, and their interrelationships, along with Metadata that serves as an indexing mechanism for knowledge retrieval.

18.7 Functional Architecture

- Functional Architecture Overview: The Medical Device Systems Engineering Knowledge Repository (MDSE-KR) is designed with a functional architecture that supports systems engineers and administrators in managing and retrieving medical device systems engineering knowledge.
- Actors and Knowledge Sources: Systems engineers are the primary users, while administrators ensure the accuracy and effectiveness of the knowledge repository. Expert systems engineers, standards, academics, consultants, and regulations serve as key knowledge sources.
- Core System Functions: The MDSE-KR processes knowledge requests, including searching, updating, deleting, and providing feedback, to maintain a comprehensive and up-to-date knowledge base for medical device systems engineering.
- Internal and Feedback Mechanisms: Detailed SysML activity diagrams illustrated the internal system functions for handling knowledge requests, while feedback mechanisms allow continuous improvement of the MDSE-KR based on user input.

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A Medical Device Systems Engineering Survey **Template**

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The following survey template was used to elicitate knowledge needs from systems engineers who work with medical devices. The survey was deployed as a Microsoft Form at the following link: https://forms.office.com/r/UKeWtta0gv

1.	Please identify the primary challenges you have encountered in the systems engineering
	process for medical devices. Select all that apply from the following options:
_	
Ш	Regulatory Compliance
	Safety and Efficacy
	Interdisciplinary Collaboration
	Systems Integration
	Cybersecurity
	Usability and Human Factors
	Lifecycle Management
	Cost Constraints
	Global Market Access
	Emerging Technologies
	Other:
2.	What tools do you find indispensable in your daily tasks as a systems engineer? Please
	select all that apply from the following options:

☐ CAD software (e.g., SolidWorks, Altium, Autodesk Inventor, CATIA)

scription Languages)
Engineering tools (e.g., LabView, compilers, IDEs, debuggers, test automation software,
instrumentation software)
Data analysis and visualization tools (e.g., Minitab, MatLab, R, Python, Tableau)
Simulation tools (e.g., Simulink, ANSYS, COMSOL, SPICE)
Requirement management software (e.g., Cockpit, IBM DOORS, Jama)
Version control systems (e.g., Git, AccuRev, SVN)
Regulatory compliance software (e.g., MasterControl, Greenlight Guru)
Risk management tools (e.g., FMEA software)
Documentation tools (e.g., Microsoft Office, OneNote, Markdown, Wiki, Html)
Project management software (e.g., Jira, Microsoft Project)
Quality management systems (e.g., ISO 13485-compliant software) Collaboration tools (e.g., Slack, Microsoft Teams, SharePoint)
Other:
Other.
Could you please elaborate on why you find the selected tools valuable in your day-to-day
work as a systems engineer? Feel free to provide specific examples or experiences that
illustrate their importance.
Which methodologies do you consider most beneficial in your daily tasks as a systems
engineer working with medical devices? Please select all that apply from the following
options:
A 11 NG (1 1 / A 11 TZ 1)
Agile Methods (e.g., Agile, Kanban) Traditional Development Models (e.g., V-Model, Waterfall, Spiral Model)
Traditional Development Models (e.g., v-Model, wateriall, Spiral Model)
Model-Based Approaches (e.g., Model-Based Systems Engineering, Prototyping)
Model-Based Approaches (e.g., Model-Based Systems Engineering, Prototyping) Quality and Compliance (e.g., Design for Six Sigma, ISO 13485, IEC 62304)
Model-Based Approaches (e.g., Model-Based Systems Engineering, Prototyping) Quality and Compliance (e.g., Design for Six Sigma, ISO 13485, IEC 62304) Risk Management (e.g., ISO 14971, FMEA)
Model-Based Approaches (e.g., Model-Based Systems Engineering, Prototyping) Quality and Compliance (e.g., Design for Six Sigma, ISO 13485, IEC 62304) Risk Management (e.g., ISO 14971, FMEA) Verification and Validation Processes
Model-Based Approaches (e.g., Model-Based Systems Engineering, Prototyping) Quality and Compliance (e.g., Design for Six Sigma, ISO 13485, IEC 62304) Risk Management (e.g., ISO 14971, FMEA) Verification and Validation Processes Change Control Processes
Model-Based Approaches (e.g., Model-Based Systems Engineering, Prototyping) Quality and Compliance (e.g., Design for Six Sigma, ISO 13485, IEC 62304) Risk Management (e.g., ISO 14971, FMEA) Verification and Validation Processes Change Control Processes Configuration Management
Model-Based Approaches (e.g., Model-Based Systems Engineering, Prototyping) Quality and Compliance (e.g., Design for Six Sigma, ISO 13485, IEC 62304) Risk Management (e.g., ISO 14971, FMEA) Verification and Validation Processes Change Control Processes Configuration Management Lean and Continuous Improvement (e.g., Continuous Integration/Continuous Deploy-
Model-Based Approaches (e.g., Model-Based Systems Engineering, Prototyping) Quality and Compliance (e.g., Design for Six Sigma, ISO 13485, IEC 62304) Risk Management (e.g., ISO 14971, FMEA) Verification and Validation Processes Change Control Processes Configuration Management Lean and Continuous Improvement (e.g., Continuous Integration/Continuous Deployment, Value Stream Mapping)
Model-Based Approaches (e.g., Model-Based Systems Engineering, Prototyping) Quality and Compliance (e.g., Design for Six Sigma, ISO 13485, IEC 62304) Risk Management (e.g., ISO 14971, FMEA) Verification and Validation Processes Change Control Processes Configuration Management Lean and Continuous Improvement (e.g., Continuous Integration/Continuous Deploy-
Model-Based Approaches (e.g., Model-Based Systems Engineering, Prototyping) Quality and Compliance (e.g., Design for Six Sigma, ISO 13485, IEC 62304) Risk Management (e.g., ISO 14971, FMEA) Verification and Validation Processes Change Control Processes Configuration Management Lean and Continuous Improvement (e.g., Continuous Integration/Continuous Deployment, Value Stream Mapping) Human Factors and Usability (e.g., Human Factors Engineering, IEC 62366, Usability
Model-Based Approaches (e.g., Model-Based Systems Engineering, Prototyping) Quality and Compliance (e.g., Design for Six Sigma, ISO 13485, IEC 62304) Risk Management (e.g., ISO 14971, FMEA) Verification and Validation Processes Change Control Processes Configuration Management Lean and Continuous Improvement (e.g., Continuous Integration/Continuous Deployment, Value Stream Mapping) Human Factors and Usability (e.g., Human Factors Engineering, IEC 62366, Usability Engineering)
Model-Based Approaches (e.g., Model-Based Systems Engineering, Prototyping) Quality and Compliance (e.g., Design for Six Sigma, ISO 13485, IEC 62304) Risk Management (e.g., ISO 14971, FMEA) Verification and Validation Processes Change Control Processes Configuration Management Lean and Continuous Improvement (e.g., Continuous Integration/Continuous Deployment, Value Stream Mapping) Human Factors and Usability (e.g., Human Factors Engineering, IEC 62366, Usability Engineering) Regulatory Compliance (Regulatory Compliance Frameworks: FDA, CE Mark; Design Control, System Safety Engineering: IEC 60601 series) Engineering Practices (e.g., Requirements Management, Reliability Engineering)
Model-Based Approaches (e.g., Model-Based Systems Engineering, Prototyping) Quality and Compliance (e.g., Design for Six Sigma, ISO 13485, IEC 62304) Risk Management (e.g., ISO 14971, FMEA) Verification and Validation Processes Change Control Processes Configuration Management Lean and Continuous Improvement (e.g., Continuous Integration/Continuous Deployment, Value Stream Mapping) Human Factors and Usability (e.g., Human Factors Engineering, IEC 62366, Usability Engineering) Regulatory Compliance (Regulatory Compliance Frameworks: FDA, CE Mark; Design Control, System Safety Engineering: IEC 60601 series) Engineering Practices (e.g., Requirements Management, Reliability Engineering) Cross-disciplinary Collaboration
Model-Based Approaches (e.g., Model-Based Systems Engineering, Prototyping) Quality and Compliance (e.g., Design for Six Sigma, ISO 13485, IEC 62304) Risk Management (e.g., ISO 14971, FMEA) Verification and Validation Processes Change Control Processes Configuration Management Lean and Continuous Improvement (e.g., Continuous Integration/Continuous Deployment, Value Stream Mapping) Human Factors and Usability (e.g., Human Factors Engineering, IEC 62366, Usability Engineering) Regulatory Compliance (Regulatory Compliance Frameworks: FDA, CE Mark; Design Control, System Safety Engineering: IEC 60601 series) Engineering Practices (e.g., Requirements Management, Reliability Engineering) Cross-disciplinary Collaboration Innovative Design Approaches (e.g., Design Thinking Methods, Theory Inventive Prob-
Model-Based Approaches (e.g., Model-Based Systems Engineering, Prototyping) Quality and Compliance (e.g., Design for Six Sigma, ISO 13485, IEC 62304) Risk Management (e.g., ISO 14971, FMEA) Verification and Validation Processes Change Control Processes Configuration Management Lean and Continuous Improvement (e.g., Continuous Integration/Continuous Deployment, Value Stream Mapping) Human Factors and Usability (e.g., Human Factors Engineering, IEC 62366, Usability Engineering) Regulatory Compliance (Regulatory Compliance Frameworks: FDA, CE Mark; Design Control, System Safety Engineering: IEC 60601 series) Engineering Practices (e.g., Requirements Management, Reliability Engineering) Cross-disciplinary Collaboration

	comes or benefits you've experienced by employing these methodologies. Additionally, if applicable, mention any alternative methodologies that were considered but not chosen, and the rationale behind your selection.
6.	Which job roles do you primarily engage with in your daily activities?
	Validation Engineers Supply Chain/Logistics Engineers Research and Development Scientists Systems Engineers Compliance Engineers
	Regulatory Affairs Specialists Project Managers Technical Support Engineers Electrical Engineers
	Process Engineers Design Engineers Mechanical Engineers Biomedical Engineers
	Clinical Engineers Product Development Engineers Quality Assurance/Quality Control Specialists Software Engineers Risk Management Specialists Marketing/Sales Field Service Engineers Manufacturing Engineers Other:
7.	Please indicate which job roles, in your opinion, possess a good understanding of the deliverables and artifacts produced by systems engineers? Software Engineers
	Validation Engineers Electrical Engineers Biomedical Engineers Marketing/Sales Compliance Engineers Process Engineers Regulatory Affairs Specialists Field Service Engineers
	Design Engineers Quality Assurance/Quality Control Specialists

5. Could you please provide insights into why you find the selected methodologies valuable in your day-to-day work as a systems engineer for medical devices? Describe the out-

	Supply Chain/Logistics Engineers		
	Product Development Engineers		
	Project Managers		
	Clinical Engineers		
_	Risk Management Specialists		
	The state of the s		
	Systems Engineers		
	Research and Development Scientists		
	Mechanical Engineers		
	Manufacturing Engineers		
Ш	Other:		
8.	Could you share examples of books, articles, or papers that have resonated with you as a systems engineer working with medical devices? Please provide one or more titles and if possible, briefly explain how they impacted your work or perspective. Your insights will help us better understand valuable resources in this field.		
9.	In your opinion, what regulations or standards should be covered in a comprehensive medical device systems engineering book? Please provide your suggestions below.		
10.	0. What learning formats do you find most accessible and beneficial? Please select all apply from the following options:		
	Printed books		
	E-books		
	Interactive online courses		
	Audiobooks		
	Podcasts		
	Video lectures		
	Webinars		
	Virtual reality (VR) simulations		
	Interactive multimedia presentations		
	Mobile apps		
	Online forums or discussion boards		
	Worksheets or printable materials		
	Hands-on workshops or labs		
	Mentored/self-paced online learning platforms		
	Social media groups or communities for learning		
	Gamified learning platforms or apps		
	Textbooks		
	Infographics or visual summaries		
	Live online classes or tutorials		
	Digital flashcards or quizzes		
	Other:		

11. Would you be open to further contact if there were follow-up questions?
\square Yes
□ No
12. Email

B Standards

\lambda Caution

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Table B.1 shows the list of important standards and regulations relevant to medical device systems engineering.

Table B.1: Reference Standards and Regulations

Reference	Title
21 CFR 820	CFR - Code of Federal Regulations Title 21
21 USC 321	Chapter 9-Federal Food, Drug, and Cosmetic Act Subchapter II-Definition
EN 45502-1	Implants for surgery – Active Implantable Medical Devices – Part 1: General requirements for safety, marking and for information to be provided by the manufacturer
ISO 9001:2015	Quality management systems - Requirements
ISO 10993-1:2018	Biological evaluation of medical devices, Part 1: Evaluation and testing within a risk management process
IEC 13485	Medical devices — Quality management systems — Requirements for regulatory purposes
ISO 14971	Application of Risk Management to Medical Devices
IEC 15288	Systems and software engineering — System life cycle processes
IEC 19514	Information technology - Object management group systems modeling language (OMG SysML)
IEC 60068-2-82	Environmental Testing – Part 2-82: Tests – Test Tx: Whisker Test Methods for Electronic and Electric Components

IEC 60601-1	Medical electrical equipment – Part 1: General requirements for
IEC coco1 1 0	basic safety and essential performance
IEC 60601-1-2	Medical electrical equipment – Part 1-2: General requirements for
	basic safety and essential performance – Collateral Standard:
IDC /TD coco1 4.9	Electromagnetic disturbances – Requirements and tests
IEC/TR 60601-4-2	Medical electrical equipment - Part 4-2: Guidance and
	interpretation - Electromagnetic immunity: performance of
	medical electrical equipment and medical electrical systems
IEC 60812:2018	Failure modes and effects analysis (FMEA and FMECA)
IEC 61025	Fault Tree Analysis
IEC 62304	Medical Device Software - Software Life Cycle Processes
IEC 62353	Medical electrical equipment – Recurrent test and test after repair
	of medical electrical equipment
IEC 62366-1	Medical devices – Part 1: Application of usability engineering to
	medical devices
IEC DTR 60601-4-2	Guidance and interpretation – Electromagnetic immunity:
	performance of medical electrical equipment and medical electrical
	systems
ISO 14971	Medical devices - Application of risk management to medical
	devices
JEDEC/IPC JP002	Current Tin Whisker Theory and Mitigations Practices Guideline
2011/65/EU	Directive 2011/65/EU of the European Parliament and of the
, ,	Council of 8 June 2011 on the restriction of the use of certain
	hazardous substances in electrical and electronic equipment
2016/679	Regulation (EU) 2016/679 of the European Parliament and of the
	Council of 27 April 2016 on the protection of natural persons with
	regard to the processing of personal data and on the free
	movement of such data, and repealing Directive 95/46/EC
	(General Data Protection Regulation)
	(Conorm Dava 1 1000001011 1008ulau1011)

C Terminology



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Table C.1: Definitions

Term	Definition
510(k)	Premarket Notification
AAMI	Association for the Advancement of Medical Instrumentation
AI	Artificial Intelligence
bdd	Block Definition Diagram
CAPA	Corrective and Preventive Action
CDRH	Center for Devices and Radiological Health
CE	An acronym for the French "Conformite Europeenne" ("CE Marking," n.d.)
Cer-	
tifi-	
cate	
CFR	Code of Federal Regulations
FDA	Food and Drug Administration
FMEA	Failure Modes and Effects Analysis
GSPR	General Safety and Performance Requirements
HACCP	Hazard Analysis Critical Control Point (Nutrition and Applied 2024b)
HFE	Human Factors Engineering
HIPAA	Health Insurance Portability and Accountability Act
ICD-	International Classification of Diseases
10	

Term	Definition	
IEC	International Electrotechnical Commission	
IDE	Investigational Device Exemption	
INCOSEInternational Council on Systems Engineering		
IoT	Internet of Things	
ISO	International Organization for Standardization	
IVD	In Vitro Diagnostic	
MDD	Medical Device Directive (replaced by MDR)	
MDLC	Medical Device Development Life Cycle	
MDR	Medical Device Regulation (EU)	
MDSE	Medical Device Systems Engineer	
MDSE-	Medical Device Systems Engineering Knowledge Repository	
KR		
Medical	Section 201(h) of the FD&C Act ("21 USC 321: Definitions; Generally," n.d.b)	
device	provides that the term "device" means:	
	an instrument, apparatus, implement, machine, contrivance, implant, in vitro	
	reagent, or other similar or related article, including any component, part, or	
	accessory, which is—	
	(1) recognized in the official National Formulary, or the United States	
	Pharmacopeia, or any supplement to them,	
	(2) intended for use in the diagnosis of disease or other conditions, or in the cure,	
	mitigation, treatment, or prevention of disease, in man or other animals, or	
	(3) intended to affect the structure or any function of the body of man or other	
	animals, and	
	which does not achieve its primary intended purposes through chemical action	
	within or on the body of man or other animals and which is not dependent upon	
M 10D	being metabolized for the achievement of its primary intended purposes.	
MedSE	Medical Device Systems Engineering	
PMA	Premarket Approval	
	Pharmaceuticals and Medical Devices Agency	
	Quality Assurance/Quality Control	
QMS	Quality Management System	
QRCO	Quality Regulatory Compliance Officer Ouglity System Regulations (Health and Radialarical 2024b)	
QSR $ SaMD$	Quality System Regulations (Health and Radiological 2024b) Software as a Medical Device	
SiMD	Software in a Medical Device	
STEM	Science, Technology, Engineering, and Math	
SysML	Systems Modeling Language	
TRIZ	Russian acronym for "Theory of Inventive Problem Solving" ("TRIZ" 2024)	
UDI	Unique Device Identification	
V&V	Verification and Validation	
<u>v & v</u>	vermeanon and vandation	

D Risks

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The following business risks were identified for medical device companies that can be mitigated with medical device systems engineering. The risks were consulted from the Boston Scientific ("Boston Scientific SEC Filings," n.d.b) and Abbot ("SEC Filings | Abbott Laboratories" 2024) 10-k forms submitted to the U.s. Securities and Exchange Comission (SEC):

- Labor shortages such as qualified systems engineers for medical device industry cost of direct labor,
- The impact of disruptions in the supply of the materials and components used in manufacturing our products or the sterilization of our products,
- The performance of, and physician and patient confidence in medical products and technologies,
- The impact and outcome of ongoing and future clinical trials and market studies,
- Variations in clinical results, reliability or product performance,
- Ability to acquire or develop, launch and supply new or next-generation products and technologies worldwide and in line with commercialization strategies in a timely and successful manner,
- Ability to attract and retain talent, including key personnel associated with acquisitions,
- The impact of enhanced requirements to obtain and maintain regulatory approval in the U.S. and around the world, including EU MDR and the associated timing and cost of product approval,

Regulatory Compliance, Litigation and Data Protection

- Risks associated with our regulatory compliance and quality systems and activities in the U.S., the EU and around the world, including meeting regulatory standards applicable to manufacturing and quality processes,
- The effect of global legal, regulatory or market responses to climate change and sustainability matters, including increased compliance burdens and costs to meet regulatory obligations,
- Ability to minimize or avoid future field actions or FDA warning letters relating to our products and processes and the ongoing inherent risk of potential physician advisories related to our or our competitors' products,
- Ability to secure information systems that support business operations and protect data integrity and products from a cyber-attack or other breach that may have a material adverse effect on our business, reputation or results of operations

Innovation and Certain Growth Initiatives

- The timing, size and nature of strategic growth initiatives and market opportunities, including with respect to internal research and development platforms and externally available research and development platforms and technologies and the ultimate cost and success of those initiatives and opportunities,
- Ability to identify and prioritize our internal research and development project portfolio
 and our external investment portfolio on profitable net sales growth opportunities as well
 as to maintain the estimated timing and costs of such projects and expected revenue levels
 for the resulting products and technologies,
- Ability to develop, manufacture and market new products and technologies successfully
 and in a timely manner and the ability of competitors and other third parties to develop
 products or technologies that render products or technologies noncompetitive or obsolete,
- Ability to execute appropriate decisions to discontinue, write-down or reduce the funding of any research and development projects, including projects from in-process research and development from acquisitions, in growth adjacencies or otherwise,
- Dependence on acquisitions, alliances or investments to introduce new products or technologies and to enter new or adjacent growth markets and ability to fund them or to fund contingent payments with respect to those acquisitions, alliances and investments.

E Medical Device Systems Engineer Job Descriptions

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E.1 Job Description #1

You'll have the chance to be a critical contributor on our Electrophysiology Systems Engineering team focused on delivering the future in Advanced Mapping technologies. This role will involve a range of responsibilities including but not limited to collaborating and leading teams in the development and analysis of system performance and system integration for our next generation products. In this role you will be a key member of a product development team to bring systems from concept to launch.

E.1.1 Responsibilities

- Contribute to the technical and business strategy at the core team level for major systemlevel programs.
- Utilize multidisciplinary engineering knowledge and experience to design, develop, and troubleshoot new products specific for cardiac mapping and ablation.
- Provide system engineering leadership and take ownership for overall project success for new products from concept phase through launch.
- Work with Product Marketing, Clinical Engineering, and Key Opinion Leaders to develop design input requirements from user and business needs.

- Communicate to Sr. Management including technical presentations, status updates, and program reviews.
- Lead project-level system architecture and system behavior definition activities utilizing use case modeling and other appropriate tools.
- Lead cross-functional working groups to solve complex problems, mitigate risks, and develop strategies to overcome challenges.
- Plan, manage, and report on overall systems integration activities including root cause analysis and solution generation.
- Provide input into the technology and product roadmaps.
- Be a strong team player and lead cross-functional teams to resolve issues and meet budget and schedule requirements.
- Create a positive, collaborative culture amongst the technical teams while working to solve challenging engineering problems.
- Mentor junior engineers.
- Ensure compliance with procedural and documentation requirements, FDA, ISO and other regulatory bodies.

E.1.2 Required Qualifications:

- Bachelor's degree in Electrical Engineering, Biomedical Engineering, or related field with 10+ years of experience in developing highly complex electrical hardware, software, and signal-processing based systems.
- Demonstrated ability to leverage and/or engage others to accomplish project goals.
- Demonstrated ability to solve complex engineering problems and mentor other engineers.
- Strong verbal and written communications with ability to effectively communicate at multiple levels in the organization.
- Ability to work within a team and as an individual contributor in a fast-paced, changing environment.
- Ability to multitask, prioritize and meet deadlines in timely manner.
- Strong organizational skills, as well as attention to detail.

E.1.3 Preferred Qualifications

- Masters degree in Engineering and/or Science (could substitute for 2 years of engineering experience).
- 3+ years of experience as a Systems Engineer.
- Medical device experience, specifically supporting cardiac mapping and/or ablation systems
- Experience working in a broader enterprise/cross-division business unit model.
- Detailed understanding of 60601 and other related electrical hardware regulations.
- Experience in managing one or more direct reports.

E.2 Job Description #2

As part of the Engineering Organization, the Reliability Architect is primarily responsible for supporting the ongoing execution by helping establish Service Level Objectives of the different Engineering teams to achieve the business Reliability goals, You will refine performance targets, provide the strategic vision and reliability roadmap, lead design improvements, generate observability metrics targeting business and technical audiences, and enforce reliability best practices. You will maintain the Surgery DFR process and drive the quality of the different business releases. This role is instrumental in ensuring that our products perform as specified and do not fail in the install Base. A high level of quality is expected from our products.

E.2.1 Responsibilities

- Identify process and infrastructure gaps to increase operational reliability.
- Responds to production Install Base incidents and determine how we can prevent them in the future.
- Partner with other Engineering team leads to bring best practices and enforce the DFR process.
- Train the organization on the Surgery DFR process.
- Triage testing data to work with the Software and Hardware teams to address issues. Ensure reliability growth to fulfill the reliability goals of the final product.
- Facilitate Technical discussions during the Development phase to address the resolution of issues.
- Participate in the review of Hardware test plans definition and Technical Reviews to promote good reliability practices.
- Build and support Automated Testing Infrastructure.
- Develop an adequate System level understanding of all the Surgery platforms and products.
- Supports the monitoring of software performance over the development of the products.
- Partner with other SREs to have a common strategy to implement the DFR process in the different programs.
- Create team mechanism(s) to follow up on the activities of the other SREs to look for reliability progress, potential needs, or issues.
- Define the adequate SLOs of the Software and Hardware Teams.
- Develops Technical papers to define the necessary statistical methodologies to implement the DFR process.
- Define a common strategy for the System level reliability technical reviews and ensure the proper flow down to the other Engineering reviews.
- Work with the Functional Engineering Managers to define the resources and timelines required to execute the defined SLOs.
- Participate with the GE HealthCare Reliability Central Team, defining and promoting good reliability practices.

- Provides necessary information to Upper Management to make decisions around quality during the development and conclusion of the programs.
- Work with global Surgery reliability leads to the exchange of data or work in initiatives.
- Develops new automated testing strategies customized by the program; this will include the ability to adapt the infrastructure to new statistical approaches.
- Triage Install Base information such as service replacements to identify the opportunities for improvements. Additionally Supports the Service team in the understanding of Install Base issues.
- Participate with the Complaint Handling Unit team in triaging information to understand the baseline of the new products and the level of effectiveness of the active projections.

E.2.2 Required Qualifications

- Bachelor's degree in Systems Engineering, Reliability or Science in STEM degree.
- Minimum 6 years of experience in product development or research development environment.
- Experience in data and trending analysis.
- Experience in reliability statistical methodologies.

E.2.3 Preferred Qualifications:

- Master's degree is a plus.
- Experience in Medical or other Regulated Industries.
- Reliability Certification.
- Demonstrated Strong problem-solving skills.
- Demonstrated ability to set and meet tight deadlines and function well under pressure.
- Ability to work in a dynamic and fast-paced environment.

E.3 Job Description #3

The Principal Systems Engineer provides technical leadership, direction, and expertise in the design and development of instruments, software, or automation used in clinical laboratories to perform diagnostic tests. The Principal Systems Engineer works with project leads and teams to ensure that user, customer, and business needs are correctly translated into system and component level architectures, then selects technologies and designs module and system functions to create design specifications that can be implemented in a robust and verifiable manner. This role may also be responsible for supervision or mentoring of engineers.

E.3.1 Responsibilities

- Create and determine hardware and software architectures and workflows at system and component levels.
- Define and detail component functions, interfaces, signal, data, and information flows.
- Actively engage with key stakeholders to comprehend the spectrum of available technology options and collaborate on their integration and application to products.
- Evaluate and select technologies needed to meet design goals.
- Communicate pros and cons of technology and design options and reasons for selection.
- Champion introduction, learning, and implementation of new technologies.
- Conduct creative analyses and high-level decision making.
- Communicate and document designs and lead design and technical reviews.
- Collaborate with cross-functional teams responsible for the design and development of clinical diagnostic products to meet product design goals while maintaining compliance with the quality system requirements.
- Lead system development decisions affecting product development issues.
- Lead the process to identify problems, investigate alternatives, and collaborate on the ideation and confirmation of potential solutions.
- Serve as the technical lead on preparing reports and analysis and interpretation of data and results as related to system/software/hardware development and improvement.
- Actively participate with research and technology efforts to ensure alignment with strategic priorities.
- Prepare reports and analysis of results related to product performance improvements.
- Report status of assigned projects through the preparation of detailed reports and documentation that summarize progress and performance results.
- Interpret results of experiments and trials and recommend alternative approaches.
- Create, review, and approve design history file documentation.
- Present information and updates at project or departmental meetings.
- Work within established project timeframes.
- Manage external vendors to meet part and assembly design specifications.
- Apply excellent attention to detail and meticulous record keeping.
- Apply excellent analytical, problem solving, organizational, and decision-making skills.
- Ability to work collaboratively with scientists, engineers, and software programmers.
- Uphold company mission and values through accountability, innovation, integrity, quality, and teamwork.
- Support and comply with the company's Quality Management System policies and procedures.
- Maintain regular and reliable attendance.
- Ability to act with an inclusion mindset and model these behaviors for the organization.
- Ability to work nights and/or weekends, as needed.
- Provides technical leadership, guidance, training, and mentoring.
- Ability to work on a mobile device, tablet, or in front of a computer screen and/or

- perform typing for approximately 90% of a typical working day.
- Ability to comply with any applicable personal protective equipment requirements.
- Ability to travel 5% of working time away from work location, may include overnight/weekend travel.
- Ability and means to travel between Exact Sciences locations.

E.3.2 Required Qualifications

- Ph.D. in Engineering or field as outlined in the essential duties; or Master's Degree in Engineering or field as outlined in the essential duties and 4 years of experience in lieu of a Ph.D.; or
- Bachelor's Degree in Engineering or field as outlined in the essential duties and 8 years of experience in lieu of a Ph.D.
- 10+ years of experience working in a biotech/IVD/medical device related setting.
- Demonstrated ability to work in a senior role with a well-established IVD or medical device company.
- Demonstrated ability to work with CFR 21 part 820 and ISO 13485 compliance for software and instrumentation development.
- Demonstrated ability to contribute to the development of successful medical device products.
- Demonstrated ability to work with assembly, integration, troubleshooting, and testing custom equipment and instrumentation.
- Advanced knowledge of engineering software tools used in a specific engineering discipline.
- Demonstrated ability to perform the Essential Duties of the position with or without accommodation.

E.4 Job Description #4

In this position the Systems Engineer will be the primary technical lead and decision maker for a variety of medical device projects from the early concept phase to design, realization, test, and production. This is a dynamic role that adapts to the needs of clients, the user, and technical challenges as projects progress.

The ideal candidate for this role will thrive on solving challenging problems, have the ability to strategize a creative path forward, and communicate technical information effectively to several audiences. An individual with strong experience with cross-functional, technical team leadership in an Engineering arena with an emphasis on creating, documenting, and communicating system architecture and requirements while actively driving the technical direction of a product team. This individual should be well-versed in translating client needs into technical

descriptions that can be built and verified, and possess the ability to then distill the technical implementation into real-world implications to the business, clients, and the users. The ideal candidate would be willing to lean in and strategically guide the customer towards a well-balanced product within a business context.

E.4.1 Responsibilities

- Organize the technical approach, architecture, requirements, and the technical team to communicate and execute product development strategies to the client and across our internal teams to realize well designed medical products that positively impact patient outcomes.
- Create work proposals for new clients detailing technical approach, scope and work estimates
- Assess client project inputs to generate requirements, system architecture and design documentation.
- Conducts analysis, review, and/or evaluation of design alternatives across various technologies and multiple disciplines.
- Assigned to substantial tasks on major projects of high complexity (assignments may be broad in nature and require creativity and ingenuity).
- Works to influence organizational direction while leading other engineers while leading a multidisciplinary, integrated team.

E.4.2 Required Qualifications

- Bachelor's or Master's degree in Software, Electrical, Biomedical or Mechanical Engineering.
- 6+ years of experience in developing electronic-based devices or complex electromechanical systems.
- Experienced with requirements writing and multidisciplinary, technical team leadership
- Proficient at quickly solving high-complexity system-level problems.
- Experience in interpreting and applying technical regulatory requirements.
- Strong interpersonal, communication (both written and oral) & analytical skills coupled with excellent interpersonal skills with multiple disciplines & clients.
- Strong emphasis on the ability to work independently, while also functioning as a team player.

E.5 Job Description #5

The Principal System Engineer position is a key technical leadership role at BMT and will integrate inputs and outputs to support the definition and development of complex software

systems involving software services and multiple electro-mechanical medical device products. As design owner of a product solution, you are responsible for ensuring that your solution is built in accordance with customer, business, and regulatory requirements. This is done by effectively translating product requirements to design outputs, managing technical risks of the product, and following the technology roadmap. This position typically overlaps many technical and human-centered disciplines, including industrial engineering, functional engineering, human factors, marketing, regulatory affairs, quality assurance, and project management; a strong candidate will demonstrate a keen ability to facilitate cross-functional collaboration. The engineer is a key leader in development and management of support activities such as technical planning, systems integration, verification and validation, cost and risk, life-cycle management, and effectiveness for total systems.

E.5.1 Responsibilities

- Ensure the logical and systematic translation of user and project needs into a comprehensive set of system and sub-system requirements in collaboration with the technical design leaders.
- Take technical ownership of the product throughout its lifecycle and provide effective technical leadership to the product and engineering teams.
- Resolve technical challenges by providing technical guidance to the product and engineering team through rigorous trade-off analysis to create robust and effective solutions.
- Facilitate cross-functional technical decision-making and optimize the balance between technical and schedule risk with the cost targets of the product lifecycle needs.
- Lead the integration of systems and devices, ensuring that the product meets the user and system requirements.
- Demonstrate the traceability of requirements through Validation and Verification.
- Lead the risk, hazard, and timeline analysis in to quantitatively evaluate design concepts & solutions
- Plan, coordinate, and manage system and cross-system design activities and interface directly with the product leadership team on project issues and status.
- Integrate sound design principles and standards into your programs including Design for Reliability, Manufacturing, and Service.
- Identify user groups, environments, use scenarios and critical tasks for task analysis, instructions, guides, user training and system verification
- Engage with the test teams to ensure plans for verification and validation activities are successful.
- Mentor other members of the organization on hospital connectivity and interoperability.
- Initiate and lead activities such as Failure Modes and Effects Analysis (FMEA) that identify design issues and lead the team in developing mitigations to address these issues.
- Help the team members in developing high-quality documentation for all phases of product development, including design specifications, verification test plans, project schedules, and change orders associated with medical devices.

- Partner with the functional technical leaders (Architects/Principals) to develop significant and impactful Intellectual Property to fuel the growth of the business.
- Perform work in adherence to the Quality Management System (QMS), including development and maintenance of documentation.
- Develops products that meet requirements regulated by FDA, EU regulatory body, Pharmaceuticals and Medical Devices Agency (PMDA) and other governing bodies as defined by product management.
- Commit to fostering and driving an environment and work output based on continuous improvement.

E.5.2 Required Qualifications

- Bachelors' degree in Engineering, or other scientific discipline, preferably computer, software, or control engineering.
- 10+ years of engineering experience.
- 3-5 years new product development and exposure to systems engineering roles.
- 2+ years of working with development of software products.
- Demonstrated experience with Enterprise Architecture and Systems Engineering.
- Technical Risk Management & Mitigation for Cloud-hosted solutions in Medical Device "connected" domain.
- Knowledge of network concepts and use, including firewalls, VLANs, routing, VPNs, etc.
- Experience with hospital system connectivity, including PACS, HIS/RIS, EMR.
- Experience interfacing with Hospital IT customers, Radiologists, and imaging technicians.
- Experience with network authentication solutions.
- Demonstrated experience with risk management and systems engineering processes.
- Demonstrated ability to clearly and accurately translate needs and requirements.
- Ability to grow productive, trusting, and open relationships with a wide variety of constituencies.
- Excellent communication, influencing skills and ability to gain buy-in for initiatives.
- High degree of organizational skills and high attention to detail.
- Ability to handle multiple tasks and prioritize effectively.
- Ability to work both independently and as part of a team.
- Ability to develop protocols, conduct system tests and write reports.
- Strong initiative and passion about new technologies with high energy.

E.5.3 Preferred Qualifications

- Graduate degree in Engineering (Software or Systems) or another scientific discipline.
- 5+ years of research and development experience.
- Familiarity with Medical Device Interoperability.

- Experience with IHE profiles relating to IT infrastructure and device communication.
- Experience with Active Directory integration.
- Understanding of IT system virtualization techniques.
- Experience with Hybrid & Cloud Services, Cloud-hosted Data & Deployments.
- Experience with hybrid cloud deployments.
- Experience working with physicians and customers in a medical device product development role.
- Experience with product concept development, customer interaction, systems engineering, verification of engineering requirements, and validation of customer needs/design requirements.
- Experience with risk management and systems engineering processes.
- Ability to translate needs and requirements clearly and accurately.
- Awareness and working knowledge of system-level constraints in all disciplines, including mechanical, electrical, human factors and software.
- Voice-of-customer experience and fluency with clinical radiology terminology.

E.6 Job Description #6

We are recruiting a Senior Systems Engineer to join our team where we are focused on helping people with heart failure manage their health and ultimately change and save lives. The engineer will be primarily working on the CardioMEMS HF portfolio, which remotely monitors changes in pulmonary artery (PA) pressure, an early indicator of the onset of worsening heart failure, to aid physicians in preventing worsening heart failure, lower heart failure mortality rates, and improve quality of life for our heart failure patients. The role is responsible for executing product development and systems engineering tasks for a wide range of CardioMEMS products including implantable sensors, external reader systems used by clinicians and patients, mobile application software, and cloud-based web applications. This person will participate and lead tasks in development of new programs and next generation products, including system design and architecture, requirements definition and management, design documentation, and system testing, verification, and validation.

E.6.1 Responsibilities

- Plans, develops, and executes system verification based on established system requirements.
- Drives review and optimization of project-wide and cross-project verification efforts to
 ensure adequate coverage, minimize duplication, and increase transparency and understanding of system verification versus sub-system verification versus other types of
 testing.
- Contributes to and supports gathering, analyzing, and reviewing system level and subsystem requirements.

- Clearly documents test procedures and related material. Effectively documents test results, prepares test reports.
- Participates in broad cross-functional reviews of work output. Presents at design reviews, documents and resolves associated issues.
- Participates in risk management activities.
- Identifies tools, fixturing, and other resources necessary for system verification. Contributes to development, documentation, and validation of tools and fixtures.
- Applies industry best practices and applicable regulations to work area.
- Gathers information, frames problems, provides status and progress, and adjusts/measures success within scope of responsibility to improve development efforts. Applies skills to planning product development and testing work; capturing requirements, designing solutions, defining behaviors, investigating issues, evaluating trade-offs, and validating output under direction of another engineer for complex projects and independently for smaller projects.
- Participates and supports implementation, development, enhancements, and modifications to existing and new products.
- Debugs, troubleshoots, and isolates problems, as well as offers strategic solutions, analysis, and advice regarding identified issues. Conducts root-cause analysis of failures and product issues.
- Develops and applies an expert understanding of designated systems as well as serves as
 a subject matter expert for the development team regarding behaviors, implementation,
 customer needs, clinical applications, and system and sub-system verification methodologies.
- Communicates effectively with cross-functional teams and project management. Keeps leadership informed of progress and issues.
- Support all Company initiatives as identified by management and in support of Quality Management Systems (QMS), and other regulatory requirements.
- Complies with U.S. Food and Drug Administration (FDA) regulations, other regulatory requirements, Company policies, operating procedures, processes, and task assignments.

E.6.2 Required Qualifications

- Bachler's Degree in Engineering (Mechanical, Computer, Electrical, or Software), Computer Science, or related discipline.
- 7+ years of in a similar position, including systems engineering and integration experience (integrating all system components, electrical, mechanical, software), system architecture, requirement/user need gathering, end-to-end (ideation to commercialization) technical product development experience, and/or system-level verification.

E.6.3 Preferred Qualifications

- Advanced degree in Engineering (Mechanical, Computer, Electrical, or Software), Computer Science, or related discipline.
- Experience and expertise with systems consisting of hardware, software, mobile app, and cloud components.
- Experience and expertise with systems with RF, electromagnetics, ASICs, Bluetooth, and NFC technologies.
- Class III implantable medical device experience, specifically supporting heart failure and/or cardiovascular systems and experience with biologic sensors (flow, pressure, EKG, etc).
- Strong knowledge of a development process consistent with ISO, FDA design control standards or requirements, and risk management practices.
- Demonstrated ability to effectively integrate information from varied disciplines including Clinical Medicine, Engineering, Marketing and Regulatory Affairs.
- Ability to work within a team and as an individual contributor and leader in a fast-paced, changing environment.

E.7 Job Description #7

As a Senior Principal Systems Engineer on our Exploratory and Innovation team you join a talented and diverse group of engineers and scientists in the identification and early-stage development of new novel approaches to the treatment of kidney disease.

E.7.1 Responsibilities

- Partner with our commercial and medical teams to identify and prioritize user needs, lead development of concepts to address those needs as well as the testing and analysis to demonstrate feasibility of the most concepts.
- Directly contribute to the identification of unmet user needs and new approaches to addressing user needs through direct interaction with our customers and patients.
- Lead Brainstorming sessions and ideation workshops to generate new ideas and concepts for innovative products, technologies, and solutions.
- Work within the R&D organization to define and implement innovation strategies, multigenerational product plans, and technology roadmaps to enable successful delivery of innovation to the marketplace.
- Bring rigorous critical thinking to ensure that key "killer" questions are addressed early in exploratory through best-in-class application of modeling, analysis, and empirical methods.

- Foster collaboration and partnerships with internal teams, external research organizations, academia, startups, and industry partners to accelerate innovation and leverage complementary expertise and resources.
- Identify and protect intellectual property through patent filings and strategic partnerships to create and safeguard innovation.

E.7.2 Required Qualifications

- Graduate or Post-Graduate in Biomedical, Chemical, Mechanical, Electrical Engineering or related discipline. An advanced technical degree preferred.
- Experience should include 8-10 years of relevant technical experience, including 5 years of leadership experience. Prior experience in the Renal Care domain is a plus.
- Must possess a strong knowledge of engineering disciplines and solid knowledge of related disciplines, Electro/Mechanical, Systems, Fluid Mechanics, Sensing, Algorithm Development, etc.
- A demonstrated track record in electromechanical system development and commercialization, preferably medical devices.
- Recognized team player with proven facilitative leadership skills in a cross-functional global team environment. Proven performance in a matrix environment with ability to influence and align stakeholders.
- Experience in leading small to medium cross functional teams with diverse backgrounds including engineering, clinical, sciences, and commercial.
- Strong technical and problem-solving skills. Proven ability to make sound decisions, think critically and break down complex problems through application of first engineering principles.
- Solid interpersonal skills. Ability to interact externally and internally to support business and innovation strategy.
- Solid communication, presentation, and interpersonal skills, with the ability to influence and engage stakeholders at all levels.
- Creative thinking, curiosity, and passions for exploring new ideas and pushing the boundaries of innovation.

E.8 Job Description #8

This position is responsible for maintaining and enhancing the technical excellence of research and development work, including new product development, product sustaining, and manufacturing support. The primary role of the Principal Systems Engineer is to act as Technical Leader on development programs, leading all aspects of the technical execution of projects, assuming responsibility for technical project deliverables and working with Program Managers to assure successful project outcomes. The Principal System Engineer will also work with the engineering management team to ensure appropriate technological expertise.

Principal Systems Engineers will provide input to Program Managers and direction to other technical personnel and will assume appropriate level of responsibility for technical work to facilitate the development or manufacturing of world class products or assemblies.

E.8.1 Responsibilities

- Understand and communicate best practices of Systems Engineering.
- Experience with combined hardware, software system architecture. Ability to determine appropriate system architecture and include necessary safety mitigations.
- Provide expertise across functional groups to define product implementations and solve
 problems with the ability to clearly communicate key product risk/benefit trade-offs.
 Provide support across multiple projects and teams to define system implementation
 strategies.
- Develop testable product and interface requirements that include support for necessary features and performance, and include considerations for human factors, product safety testing, regulatory submissions, product packaging, environmental conditions, manufacturing and service. Support the development of requirement templates for use across projects. Use of JAMA for requirements management a plus.
- Frequent use and application of medical device technical standards, including but not limited to IEC 60601 family of standards, IEC 62304, and FDA guidance's. Monitor the regulatory environment to be able to communicate updates.
- Develop and review risk analysis' including and specifically design failure modes and effects analysis (FMEAs), and hazard analysis compliant with ISO 14971. Support the development and training of risk analysis methods.
- Conducts analysis, review, and/or evaluation of design alternatives across various technologies and disciplines. Develop strategies for assisting multiple projects.
- Support and direct system integration activities. Direct and develop plans to solve integration issues.
- Support testing activities including design verification. Direct and provide options for issue resolution.
- Prepares and reviews design documentation and manufacturing documentation. Lead design reviews. Assist with review and development of documentation templates, particularly for compliance with standards.
- Support medical device builds including prototypes, animal and human use devices, and production equivalent verification builds.
- Support design and manufacturing transfer into production. Assist with improving transfer processes.
- Familiarity with the product development process including the use of established procedures. Assist and review product development process updates.
- Ability to work and direct internal technical teams while coordinating with external customer teams. Must be able to communicate tradeoffs between risks, benefits, and

- performance while considering impact on budgets and schedules. Must be able to provide budget estimates for ongoing projects.
- Provides mentorship and direction to less-experienced engineers.
- Provides marketing and sales support by communicating with potential clients including articulating the technical and development process. Provide task and development estimates in support of projects proposals.
- Propose and develop process improvement initiatives.
- Work with Engineering Managers to identify and obtain necessary technical expertise, training and resources to support a diverse range of new product development and support efforts.
- Participate in medical device industry events and organizations to maintain awareness of developments and best-in-class practices in the industry.

E.8.2 Qualifications

- Master's degree in an engineering, technical or scientific discipline or equivalent experience
- 10+ years experience in developing software and/or electronic-based medical devices.
- In depth knowledge of FDA QSR's, ISO13485, and IEC601 for medical devices.
- Experience in interpreting and applying technical regulatory requirements to medical devices.
- Strong mentoring skills.
- Strong interpersonal, communication (both written and oral) & analytical skills.
- Excellent interpersonal skills with multiple disciplines & clients.
- Ability to work independently, but also function as a team player.