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Biomedical Engineering
UNIVERSITY OF WISCONSIN-MADISON

Reducing Whole Body Vibration in Neonatal Transport

Clients:

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Advisor:

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The Team

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Figure 1: Team Picture

The Clients

- Dr. Ryan McAdams, MD
 - Neonatology Division Chief
 - UW faculty member for the UW School of Medicine and Public Health
 - 24 years of experience in neonatal transport medicine
 - 10 years of experience with aeromedical transports in the Air Force
- Dr. Joshua Gollub, MD
 - Fellow at the University of Wisconsin School of Medicine and Public Health
 - Specializes in neonatal medicine



Figure 2: Team Members, Clients, and Med Flight team at the UW Hospital Helicopter Pad

Overview

- Problem Statement
- Background Research
- Competing Designs
- Product Design Specifications
- Competing Designs
- Preliminary Designs
- Design Matrix
- Conclusion and Future Work
- Acknowledgements
- References

Problem Statement

- The need to transport critically ill neonates is very common
- Transport vehicles induce vibrations, translational and rotational motion, and excessive sound [1]
 - Whole Body Vibrations (WBV)
 - Causes intraventricular hemorrhage (IVH), neurodevelopmental impairment, or death [2].
- No established vibration-reducing device.



Figure 3: Neonatal Transport via Med Flight [3]



Figure 4: Transport Via Ambulance [4]

Background

- Critically ill neonates
 - birth defects
 - pre-term (<37 weeks of gestation) [5]
 - VERY fragile
- Current transport setup consists of:
 - Incubator
 - Incubator control box
 - Support systems
 - Platform
 - Mattress
- Incubator Functions/ Compatibility:
 - Ventilators
 - Temperature control
 - Monitoring Equipment



Figure 5: Neonate in NICU [6]



Figure 6: Incubator Assembly [3]

Competing Designs

- Quasi-zero-stiffness (QZS) isolator [7]
 - Uses a pair of repelling permanent magnets
 - Magnets are in parallel connection to a coil spring
 - Targets low-frequency components of vibration
- Isolation device for shock reduction [8]
 - Pair of plates- one on stretcher and one on incubator
 - Springs/ gas springs in the gap between the plates

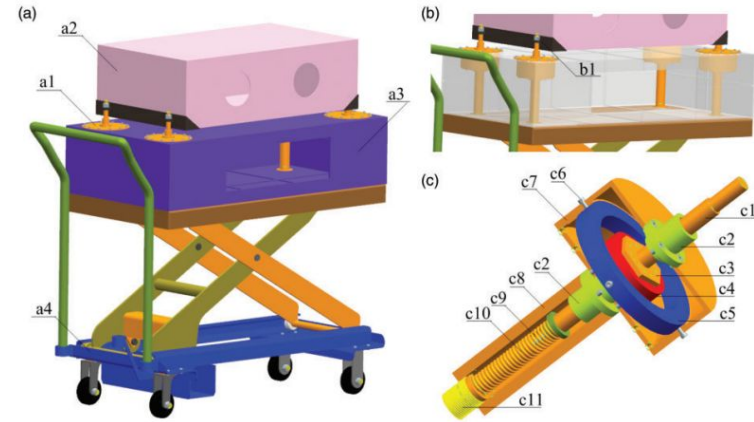


Figure 7: Quasi-zero-stiffness isolator design [9]

Product Design Specifications

Decrease vibrations to be below 0.87 m/s^2 [11]

- Allow for continuous treatment with no interference
- White or gray to be easily cleaned [10]

Should follow all medical safety standards

Reduce the volume of excessive sound levels to be below 45 decibels [12]

Allow the infant to maintain proper vital signs [13]

Functional for neonates ranging from 300g to 5500g (0.66-12lbs) [14]

Magnet-Induced Levitation

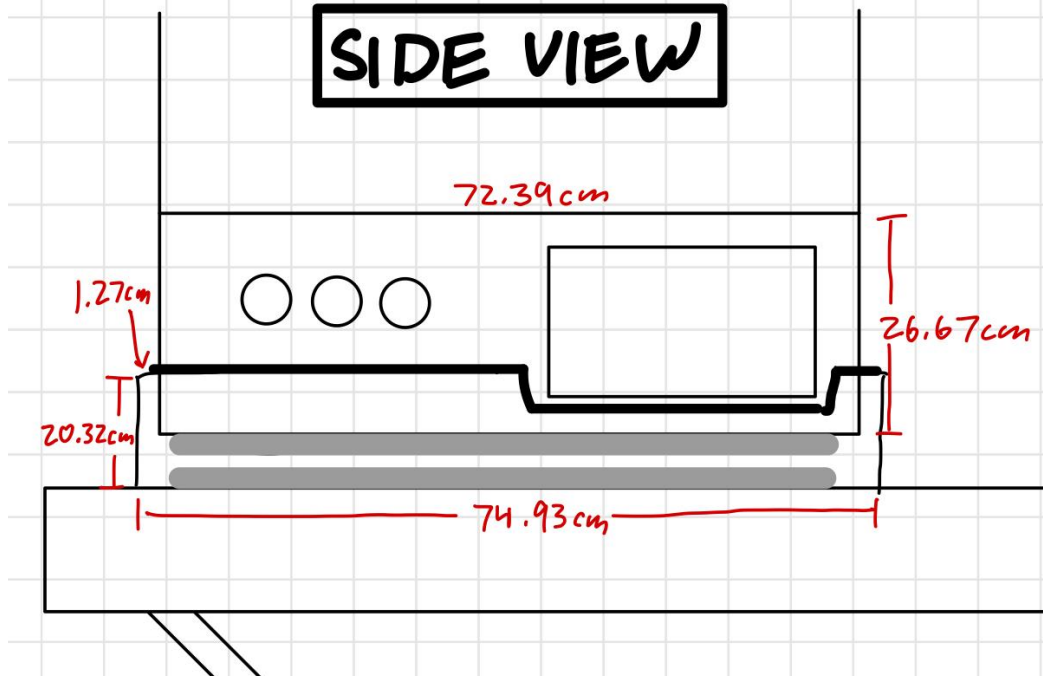


Figure 8: A side view of the magnet-induced levitation concept.

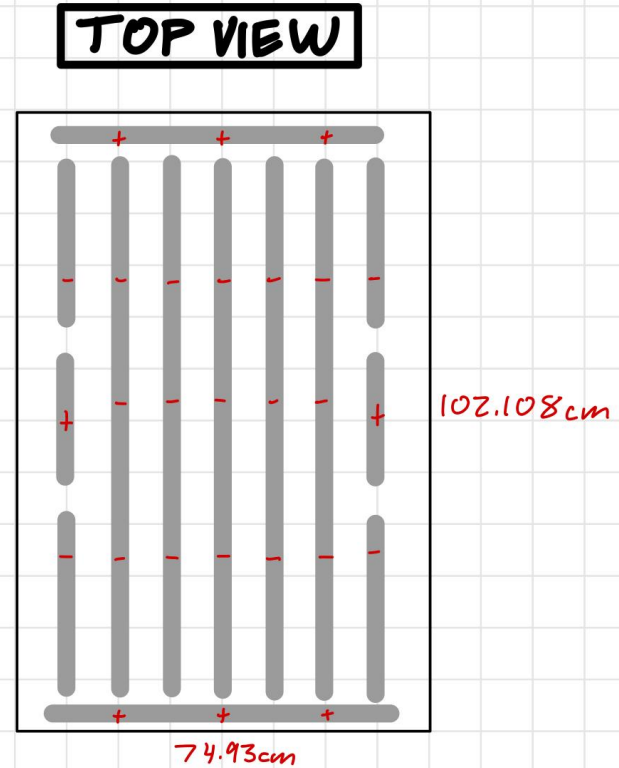


Figure 9: A cross-sectional top view of the magnet configuration.

Metal/Gel Composite Damping

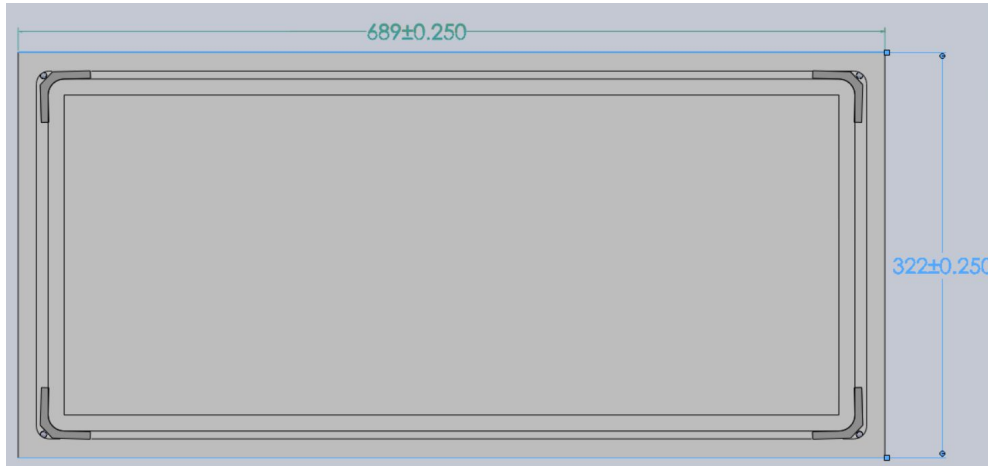


Figure 10: Top view of incubator trays with corner dampers

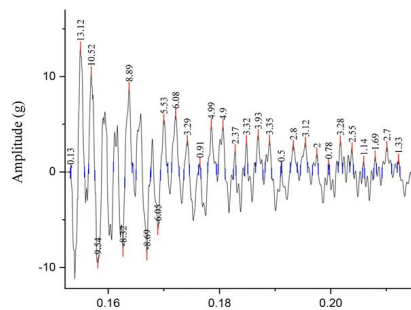


Figure 12a: Damping curve of solid steel [15]

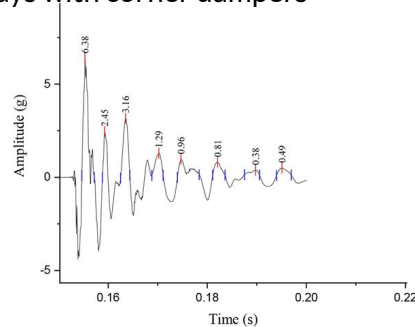


Figure 12b: Damping curve of layered damper [15]

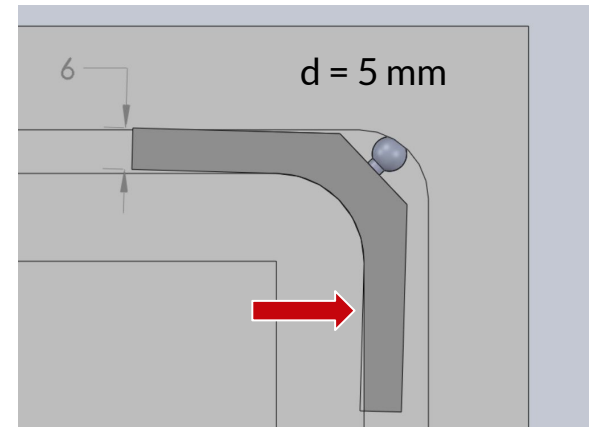


Figure 11: Close-up corner view of damper

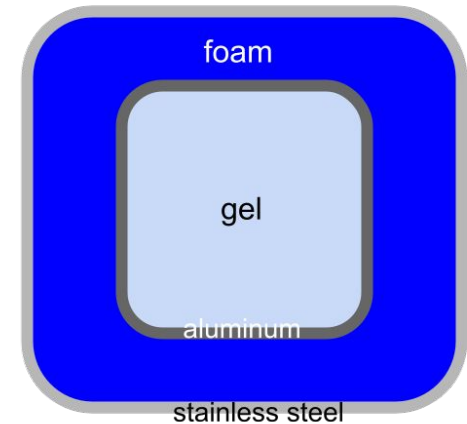


Figure 13: Cross section of damper material

Shock-Absorbing Mat

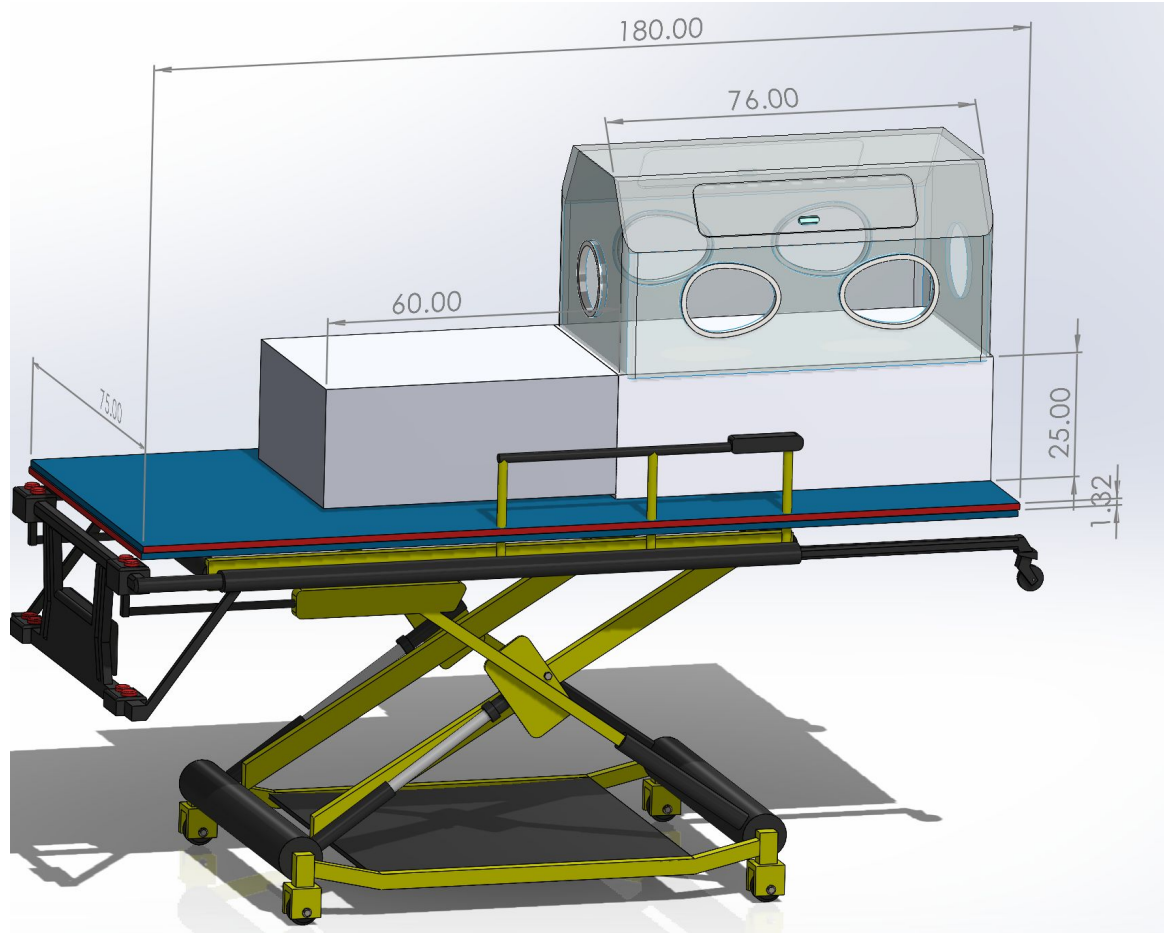
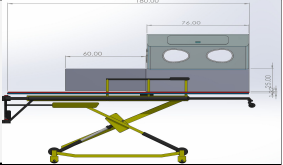


Figure 14: 3D Model of the Implementation of a 1.32 cm foam mat between the stretcher and transport monitoring systems.

Design Matrix

Table 1: Design matrix for the evaluation of 3 proposed designs.

Design Categories (Weight)	Magnet-Induced Levitation		Metal/Gel Composite Damper		Shock-Absorbing Mat(s)	
Safety (25)	3/5	15	4/5	20	5/5	25
Projected Performance (25)	3/5	15	5/5	25	2/5	10
Compatibility (20)	2/5	8	3/5	12	4/5	16
Ease of Fabrication (15)	1/5	3	2/5	6	5/5	15
Longevity (10)	3/5	6	3/5	6	4/5	8
Cost (5)	4/5	4	3/5	3	3/5	3
Total Points:	51		72		67	

Future Work

- Combining designs
 - Metal/Gel Damper
 - Head restraint [16]
 - Shock-Absorbing Mat
- Build prototype
 - Challenges: size of design, attachment to existing system
- System for measuring vibration → testing



Figure 15: Head restraint system [16]

Acknowledgements

- Dr. Ryan McAdams, MD
- Dr. Joshua Gollub, MD
- Dr. Justin Williams
- Dr. Heidi Kamrath, MD
- UW Health Staff
- BME Department

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Questions?