

Heart & Breath Sound Amplifier

Drew Birrenkott, Caleb Durante, Jared Ness, Bradley Wendorff
University of Wisconsin - Madison, BME 201

Scott Springman, M.D. - Client
Willis Tompkins, Ph.D. - Advisor

Problem Statement

- Increase stethoscope functionality three fold
 - Convert sound waves to filterable, amplifiable signal
 - Increase stethoscope reach so client can adjust medication and monitor heart beat
 - Allow dual listening capabilities: headphones and speaker
 - Used in both surgical and educational settings

Design Constraints

- Use existing stethoscope design but add electronic functionality
- Preserve diagnostic information
- Transportable to multiple operating rooms
- Cannot create electrical interference
- Budget \$100 to \$300

Background: Stethoscope

- Most common basic medical diagnostic tool
- Operates acoustically
 - Heart beat, fluid flow cause diaphragm to vibrate
 - Diaphragm vibrates in bell causing acoustic noise to pass up tubing
 - Tube acts a low pass filter
 - Sound passes through earpieces to listener

- [1]

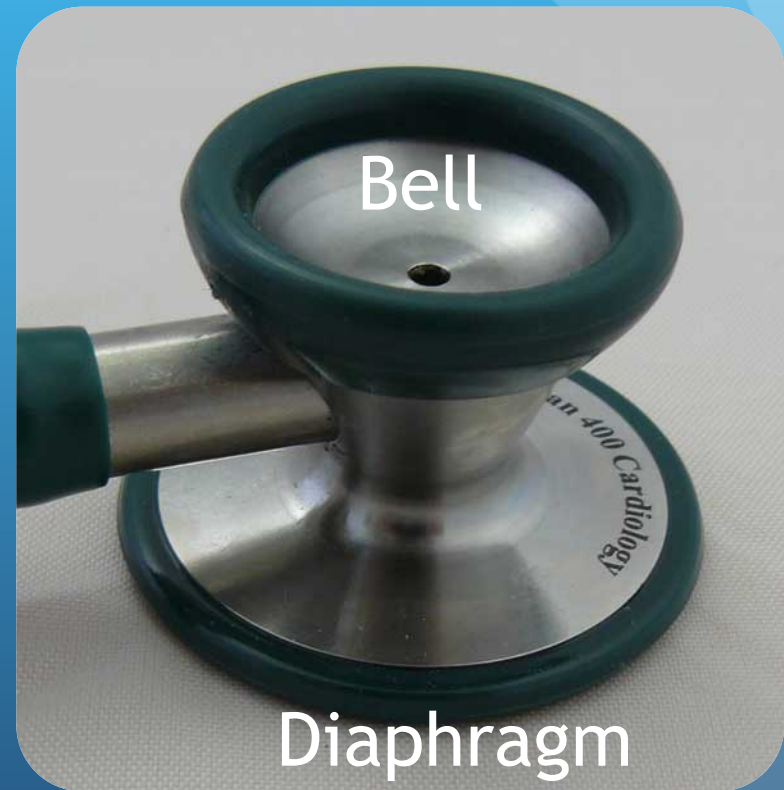


Figure 1: Stethoscope Head [2]

Background: Competition

MSRP\$496.00

- 3M Littman 3200 Electronic Stethoscope
 - *Very expensive*
 - Doesn't increase stethoscope length
 - Not compatible with other heads (stethoscope, esophageal tube)
 - No external speaker

[3]



Figure 2: Littman Stethoscope
[3]

Design Matrix: Microphone Type

Microphone Type				
Factors	Weight	Rating (1-10)		
		Condenser Mic	Dynamic Mic	Piezo Mic
Cost	0.10	4	5	2
Sensitivity/Fidelity	0.40	9	4	3
Size	0.25	7	6	4
Simplicity/Circuit Requirements	0.25	4	8	8
TOTAL	1.00	6.75	5.60	4.40

Figure 3: Microphone Matrix

Design Matrix: Power Source

Power Source			
Factors	Weight	Rating (1-10)	
		Batteries	External Power
Life	0.30	2	9
Life-Cycle Cost	0.15	3	4
Portability	0.35	9	2
Client Preference	0.20	7	5
TOTAL	1.00	5.60	5.00

Figure 4: Power Matrix

Design Matrix: Microphone Location

Microphone Location			
Factors	Weight	Rating (1-10)	
		Inside Tubing	Inside Diaphragm
Fidelity	0.35	7	4
Stability/Portability	0.10	4	7
Aesthetics	0.05	5	8
Multifunctionality	0.10	8	2
Safety	0.40	8	2
TOTAL	1.00	7.10	3.50

Figure 5: Location Matrix

Microphone Tube Coupling

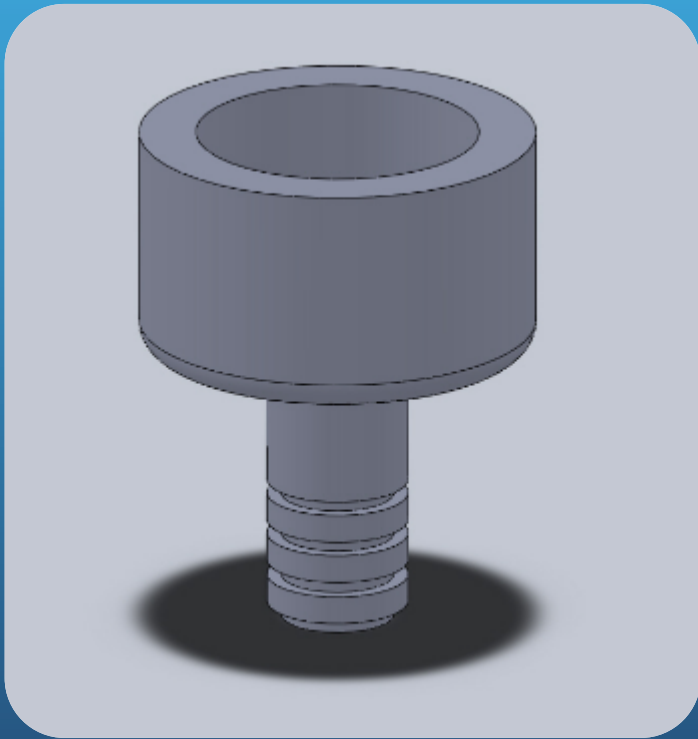


Figure 6: Coupling Model

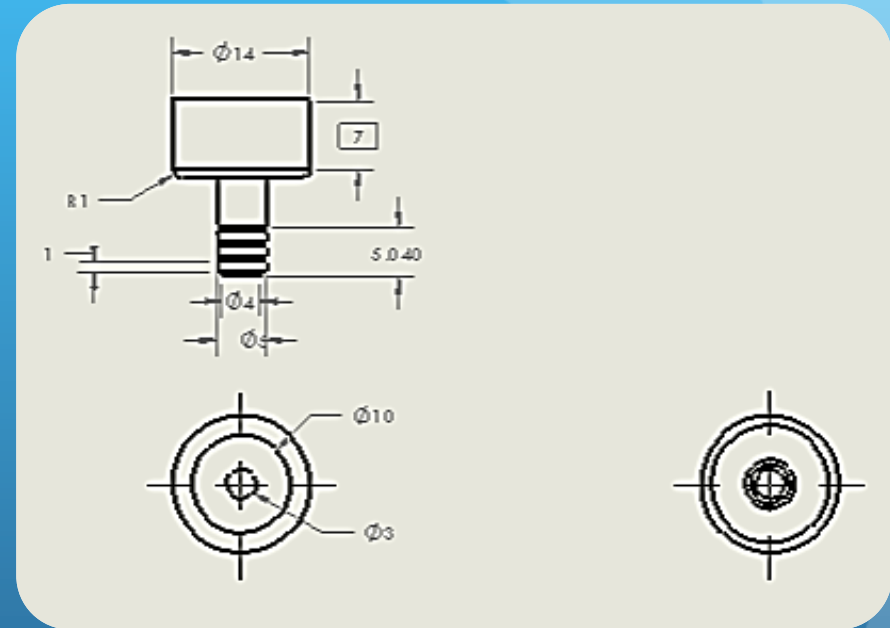


Figure 7: Coupling Schematic

General Setup: Block Diagram

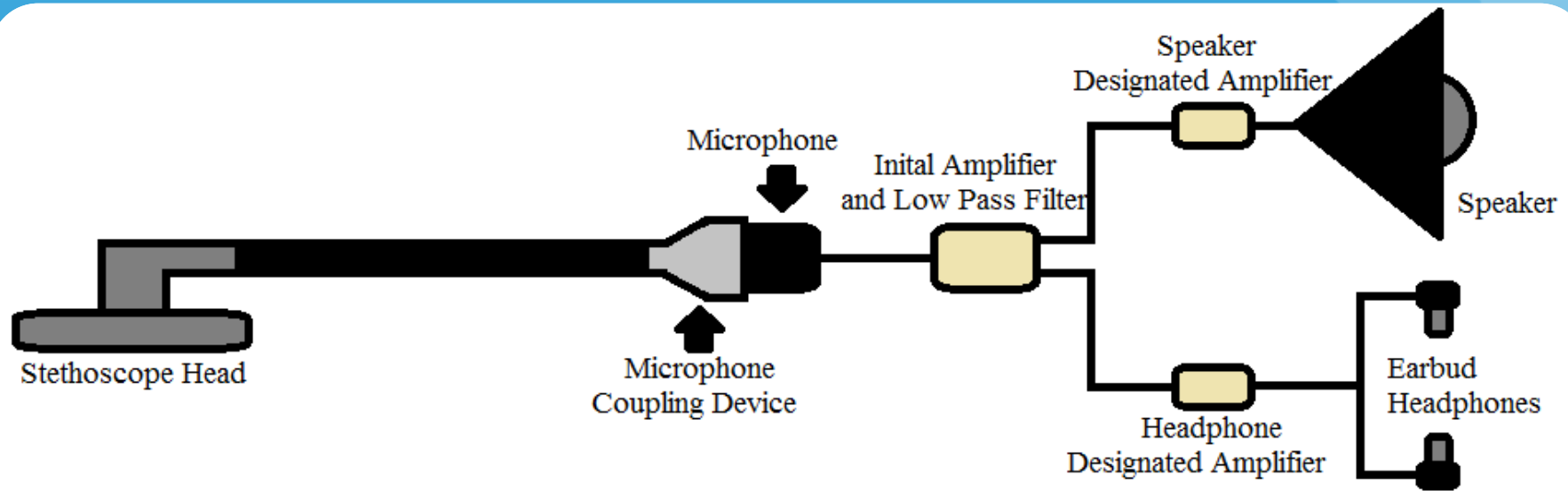
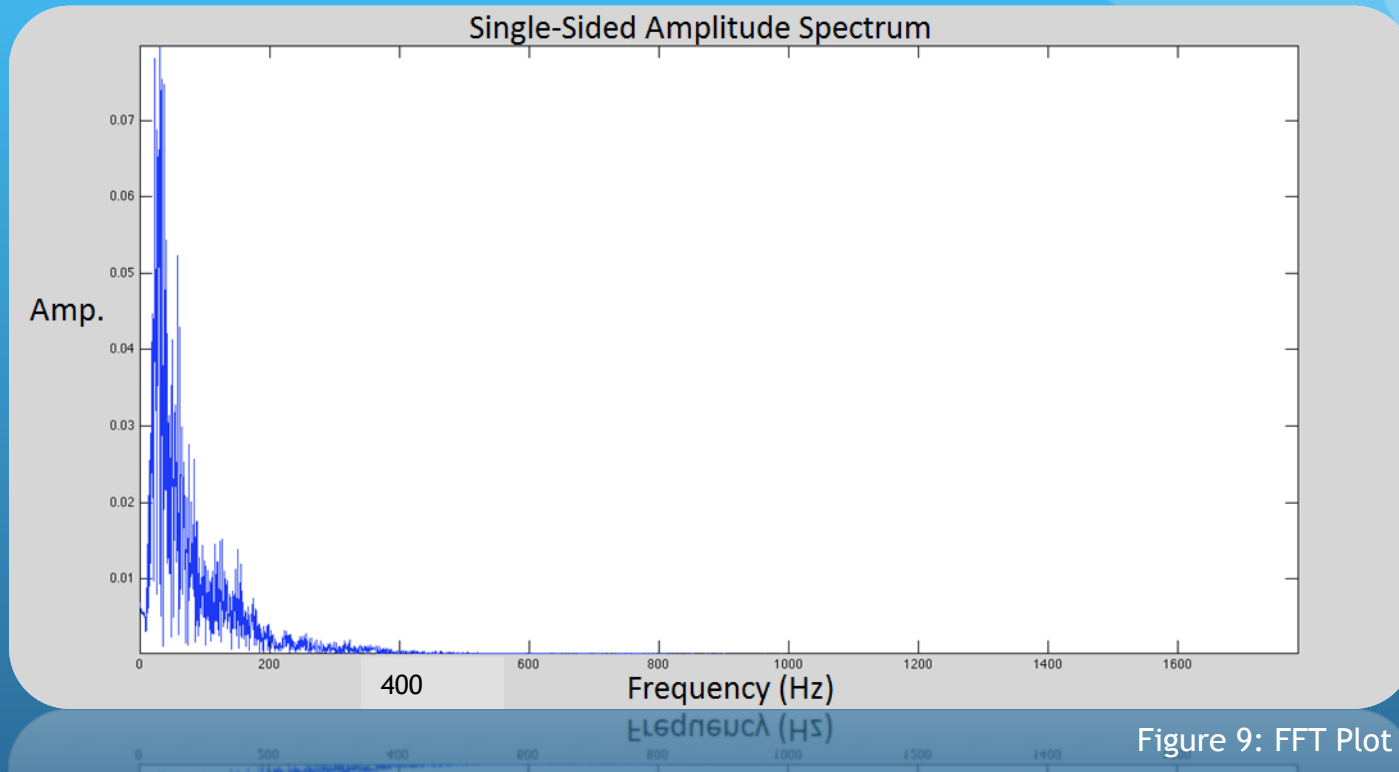


Figure 8: Operational Block Diagram

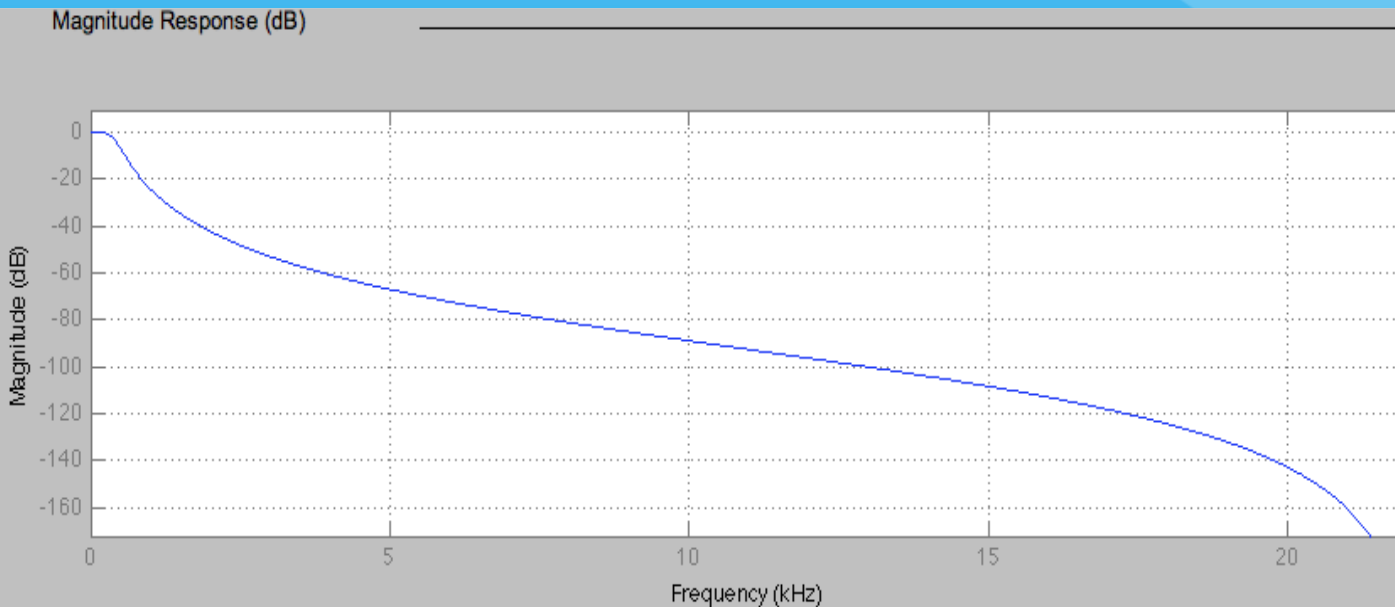
Sample Recording/Signal Processing



- FFT Plot
 - Locate and identify frequencies of interest (approximately 0-400 Hz)
 - Heart Sounds: <300Hz [4]

Filtering

Figure 10: Low-pass Filter



- After picked up by microphone, signal passes through active low-pass Butterworth filter
- Third-order filter [5]
 - Better isolation of pass band
 - less excess noise

Heartbeat Recordings



Unfiltered
Heartbeat



Filtered
Heartbeat

Filter Circuit

$$A_v = 1 + \frac{R_2}{R_1}$$

$$f_c = \frac{1}{2\pi \sqrt{R_3 R_4 C_1 C_2}}$$

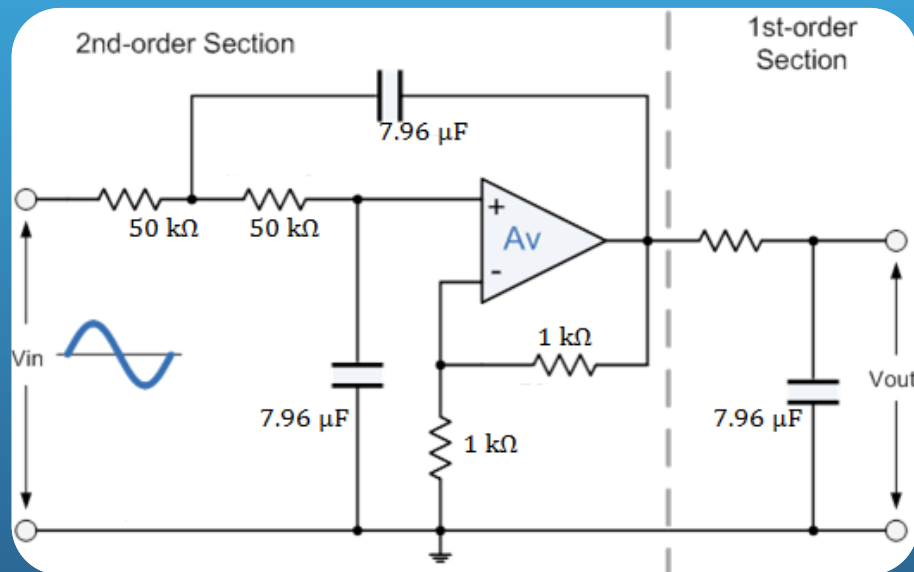


Figure 11: Analog filter circuit [5]

Gain (A): TBD

Corner Frequency:
400Hz

Design Specifications

- Amplify heart to minimum of 60 dB
- Circuitry housing no larger than 15cm x 15cm x 15 cm cube
- Weight under 3kg
- Device reach at least 3 meters
- Maintain Frequencies of 300Hz and lower

Future Work

- Determine desired gain factor for circuit
- Select Op Amp, Resistors, and Capacitors accordingly
- Select low-profile speaker for application
- Test apparatus on patient with irregularity of heart function (i.e. murmur, stuck valve, etc.)
- Determine if apparatus preserves diagnostic information
- Rework filter accordingly

Acknowledgements

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- Professor Willis Tompkins
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References

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- [4] Jin, F., Satter, F., Goh, D.Y.T. 2009. A filter bank-based source extraction algorithm for heart sound removal in respiratory sounds. *Computers in Biology and Medicine* 39: 768-777.
- [5] Electronics-Tutorials. 2011. “Butterworth Low Pass Filter.” http://www.electronics-tutorials.ws/filter/filter_8.html (accessed March 2, 2011).