

# INTEGRATED MEDICAL MODEL OVERVIEW

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## **Presentation Overview**



- Brief History
- Core Questions
- Concept and Implementation
- Application
- Verification, Validation & Certification (V,V&C)
- Future Endeavors

## Integrated Medical Model Project



- Simulation for medical resource planning
- Useful to quantify risk!
- Utilizes space flight community knowledge

#### **IMM Framework**



**Scenario Definition (DRM)** 

**iMED** Database

**Integrated Medical Model** 

Probabilistic Risk Analysis / Monte Carlo Simulation



- Medical Events
- Crew Impairment
- Loss of Crew Life
- Evacuation
- Resources consumed



Resource Optimization!

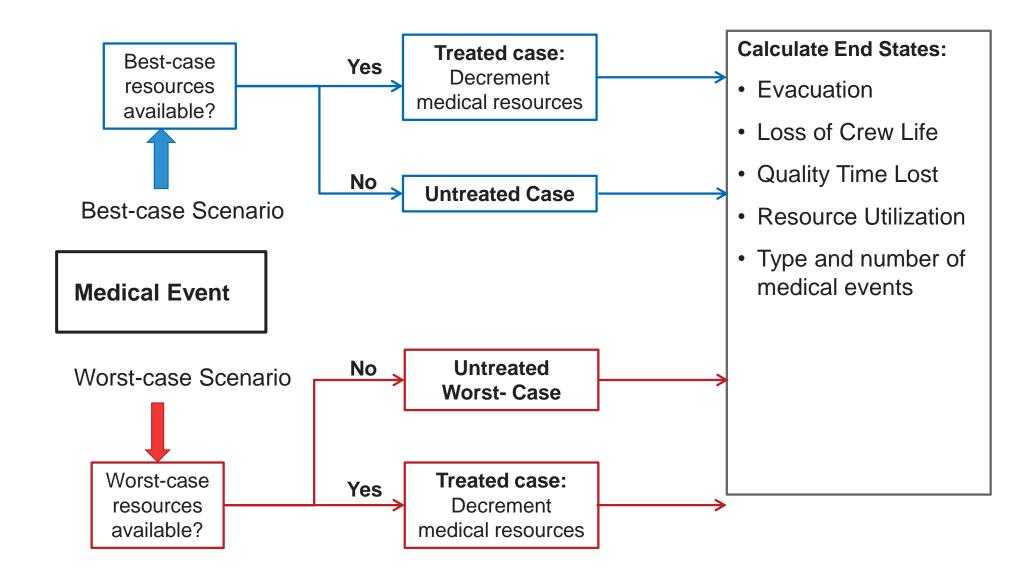
#### **Core Questions**



- What medical conditions will occur most?
- What medical resources will be used?
- What is the probability of evacuation?
- What is the probability of loss of crew life?
- What is the range of crew impairment?
- What are the optimal medical resources?

## Methodology





## Methodology

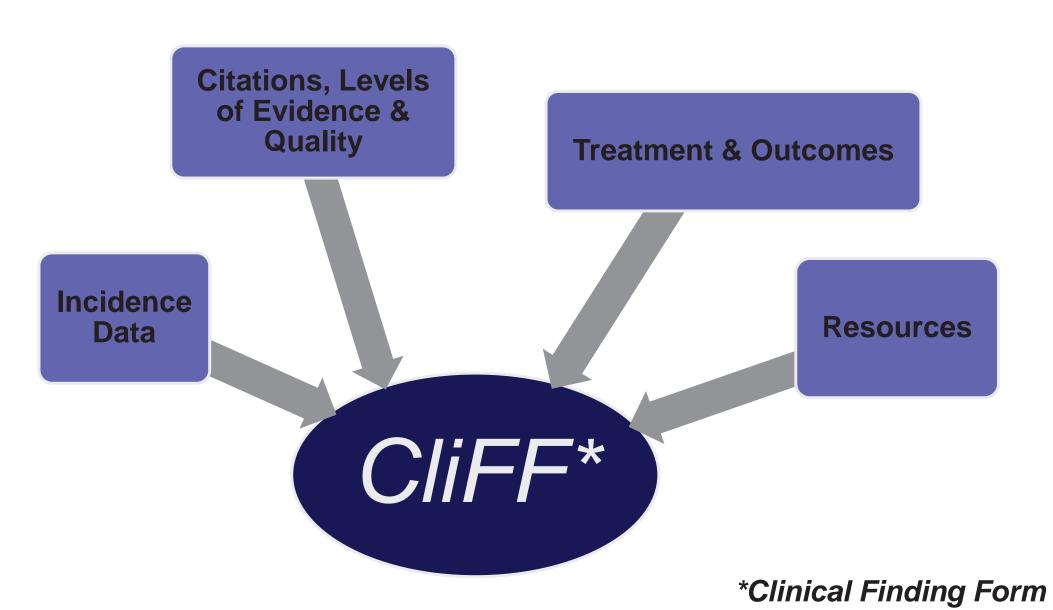


## **Assumptions and limitations**

- -no mistakes are made
- -all treatments 100% reliable
- -only SAS and EVA are dependent
- -no crew carry on items
- -other

### **iMed Database**





#### **Data Sources**



- ISS Expeditions 1 thru 13
- STS-01 thru STS-114
- US Crew Apollo, Skylab, Mir
- Analog, terrestrial data
- Bayesian Analyses
- Independent Predictive Models

#### **Levels of Evidence**





### **Space Flight Data**

2

3

4

5

Good

**Space flight Anecdotal** space flight engineering

**Validated** external models

**Terrestrial Analog** 

ISS Medical **Check List** 

Non-**Validated Models** 

**AMA Impairment Guides** 

Clinical **Practice Guidelines** 

Standards of Care

**Terrestrial Data** 

**Expert Opinion** 

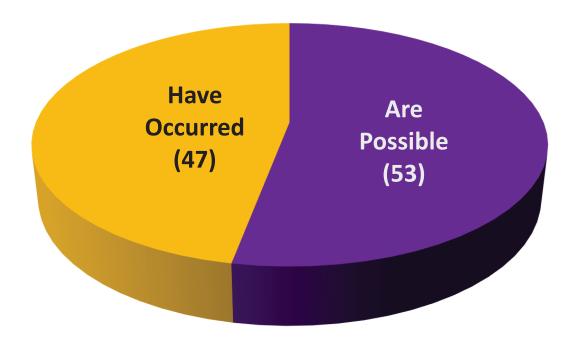
### **The IMM Medical Condition List**



#### Provides a list of relevant conditions...

- that can result in impairment
- and may be mitigated

#### The 100 IMM Conditions



### The IMM Medical Conditions



- 1. Abdominal Injury
- Abdominal Wall Hernia
- Abnormal Uterine Bleeding
- **Acute Arthritis**
- Acute Cholecvstitis / **Biliary Colic**
- 6. Acute Compartment Syndrome
- 7. Acute Diverticulitis
- Acute Glaucoma
- Acute Pancreatitis
- 10. Acute Prostatitis
- 11. Acute Radiation Syndrome 36. Dental: Filling Loss
- 12. Acute Sinusitis
- 13. Allergic Reaction (mild to moderate)
- 14. Altitude Sickness
- 15. Angina/ Myocardial Infarction
- 16. Anaphylaxis
- 17. Ankle Sprain/Strain
- 18. Anxiety
- 19. Appendicitis
- 20. Atrial Fibrillation/ Flutter
- 21. Back Injury
- 22. Back Pain (SAS)
- 23. Barotrauma (sinus block)
- 24. Behavioral Emergency
- 25. Burns secondary to Fire

- 26. Cardiogenic Shock secondary 51. Headache (CO2 induced) to Infarction
- 27. Chest Injury
- 28. Choking/Obstructed Airway
- 29. Constipation (SAS)
- 30. Decompression Sickness Secondary to EVA
- 31. Dental: Exposed Pulp
- 32. Dental Caries
- 33. Dental: Abscess
- 34. Dental: Avulsion (Tooth Loss)
- 35. Dental: Crown Loss
- 37. Dental: Toothache
- 38. Depression
- 39. Diarrhea
- 40. Elbow Dislocation
- 41. Elbow Sprain/Strain
- 42. Eye Abrasion (foreign body)
- 43. Eye Chemical Burn
- 44. Eye Corneal Ulcer
- 45. Eye Infection
- 46. Eye Penetration (foreign body) 70. Nephrolithiasis
- 47. Finger Dislocation
- 48. Fingernail Delamination (EVA) 72. Nose bleed (SAS)
- 49. Gastroenteritis
- 50. Head Injury

- 52. Headache (Late)
- 53. Headache (SAS)
- 54. Hearing Loss
- 55. Hemorrhoids
- 56. Herpes Zoster
- 57. Hip Sprain/Strain
- 58. Hip/Proximal Femur Fracture
- 59. Hypertension
- 60. Indigestion
- 61 Influenza
- 62. Insomnia (SAS)
- 63. Knee Sprain/Strain
- 64. Late Insomnia
- 65. Lower Extremity Stress Fracture
- 66. Lumbar Spine Fracture
- 67. Medication Overdose / Reaction
- 68. Mouth Ulcer
- 69. Nasal Congestion (SAS)
- 71. Neurogenic Shock
- 73. Otitis Externa
- 74. Otitis Media
- 75. Paresthesias

- 76. Pharyngitis
- 77. Respiratory Infection
- 78. Retinal Detachment
- 79. Seizures
- 80. Sepsis
- 81. Shoulder Dislocation
- 82. Shoulder Sprain/Strain
- 83. Skin Abrasion
- 84. Skin Infection
- 85. Skin Laceration
- 86. Skin Rash
- 87. Small Bowel Obstruction
- 88. Smoke Inhalation
- 89. Space Motion Sickness (SAS)
- 90. Stroke (CVA)
- 91. Sudden Cardiac Arrest
- 92. Toxic Exposure: Ammonia
- 93. Traumatic Hypovolemic Shock
- 94. Urinary Incontinence (SAS)
- 95. Urinary Retention (SAS)
- 96. Urinary Tract Infection
- 97. Vaginal Yeast Infection
- 98. VIIIP Visual Impairment/ Increased Intracranial Pressure (SAS)
- 99. Wrist Fracture
- 100.Wrist Sprain/Strain

## Activity



Support Type	FY 2011 Total	FY 2012 Total	FY 2013 Total	FY2014 Total (to date)	Total Support Requests	Recent Users
Science & Technology Planning	8	5	0	2	15 (23%)	- SK / Pharmacology - SK / Behavioral HIth
Exploration Mission Planning	5	9	6	5	25 (37%)	<ul><li>SF / ExMC</li><li>HMTA</li><li>GRC Fluids Branch</li></ul>
ISS Program Operations Support	5	11	8	3	27 (40%)	- SD /Flight Surgeons
Total Requests	18	25	14	10	67	
Average Per Quarter	4.50	6.25	3.50	3.33		

## 2014 – Utilization of the IMM



Requestor	Question	IMM Analysis	
SD2	Requirement for Oxygen / Ventilator for Commercial Crew Vehicles?	Probability of Oxygen / Ventilator use for ISS DRM	
SD2	Is 4-orbit Soyuz docking to ISS safe?	Probability of SMS during docking to ISS	
SK	Which medications should be tested for stability?	Most frequently used medications for Mars DRM	
HMTA	Loss of Crew Life (LOCL) Analysis	Probability of medical LOCL for EM-2 DRM	
ISS Program	Medical Inputs to ISS PRA	Probability of medical EVAC and LOCL for ISS DRM	

## Verification, Validation & Certification



## **iMED**

Internal Verification

Internal Validation

**External** Review

External Review Disposition

## **IMM**

Internal Verification

Internal Validation

**External** Review

External Review Disposition

- Version 3.0 in use since 2011
- Following NASA Standard 7009
- Service caution statements
  - current model V, V & C status
  - care in using IMM information

## Service Request Example



S-20130607-100. Ventilator and Oxygen Quantitative Risk Analysis What is the requirement for O<sup>2</sup>/Ventilator Capability for Commercial Vehicles?

- 1. Meet with customer to review goals, methods, & limitations
- 2. Run IMM to Compare outputs under different scenarios
- 3. Report results to customer

#### **Results:**

Outcome	Ventilator and Oxygen	Oxygen	No Oxygen No Ventilator
CHI (%)	90.56	90.44	90.45
Evac (%)	12.01	12.67	12.90
LOCL (%)	0.59	1.22	1.39

## **Way Forward**



- Version 4.0 FY2015 (Foy et al – IMM Enhanced Functionalities)
- Include a more event driven scheme
  - Dynamic PRA
    - Environmental and mission specific influences (countermeasures)
    - Enhanced "what if-able" scenario capability
  - Crew Medical Officer contribution to risk reduction
- IMM "Under the Hood" roadshow



# INTEGRATED MEDICAL MODEL OVERVIEW

Thank you!

**Questions?**