

Automated testing of an X-Ray medical device



Bryan Bakker

^{2nd}
UCAAT

User Conference on
Advanced Automated Testing

September 2014

bryan.bakker@sioux.eu

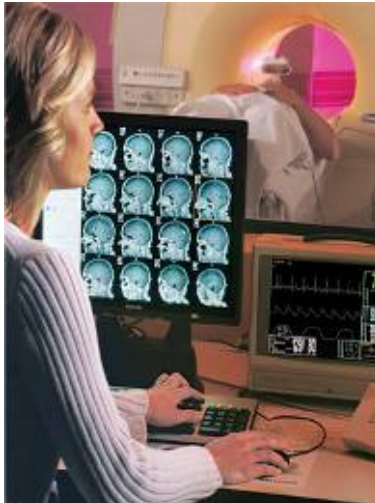


@Bryan_Bakker

- Sioux
- Intro – The need for action
- First increment – First success
- Next increment – Logfile interpretation
- ROI
- Results



- Test Expert
- Certifications: ISTQB, TMap, Prince2
- Member of ISTQB Expert Level on Test Automation
- Tutor of several test related courses
- Domains: medical systems, professional security systems, semi-industry, electron microscopy
- Specialties: test automation, integration testing, design for testability, reliability testing



MOSCOW



VIETNAM

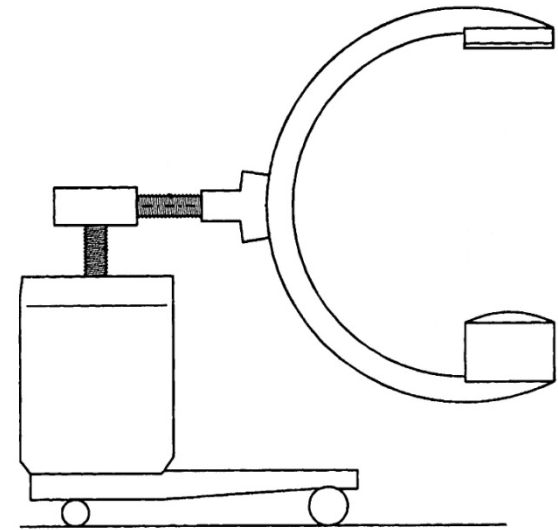


Medical Surgery Device:

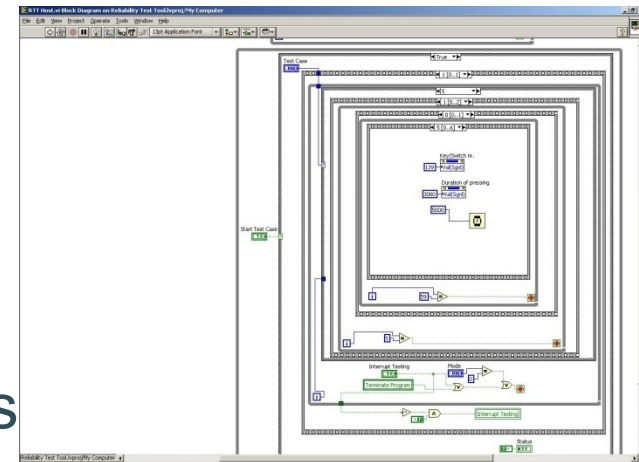
- X-ray exposure + acquisition during surgery activities
- Real-time image chain
- Mobile device (frequently off/on)
- Quality and testing considered important in organization

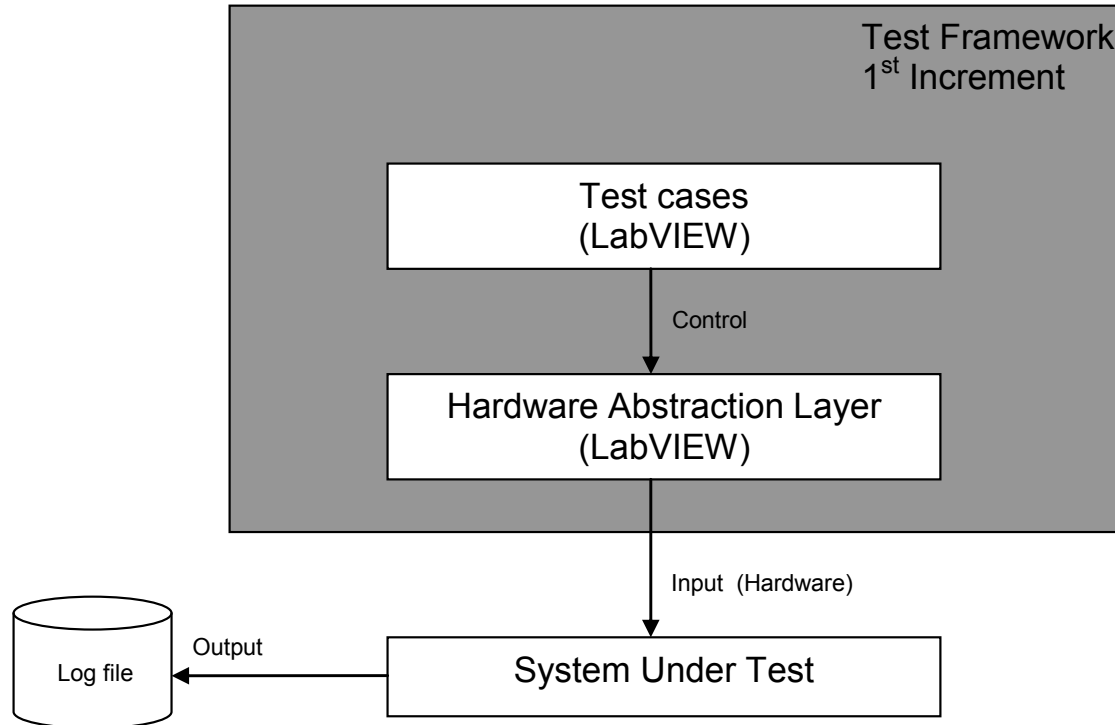
Reliability was an issue:

- “Frequent” startup failures
- Aborted acquisitions
- Always safe... but not reliable!



- Hardware interfaces used to invoke actions on SUT
 - Buttons on different keyboards
 - Handswitches
 - Footswitches
 - Different power-switches
- LabVIEW generates hardware signals
- Test cases defined in LabVIEW
- Only logfiles stored, no other verification performed
- No software changes needed for this approach



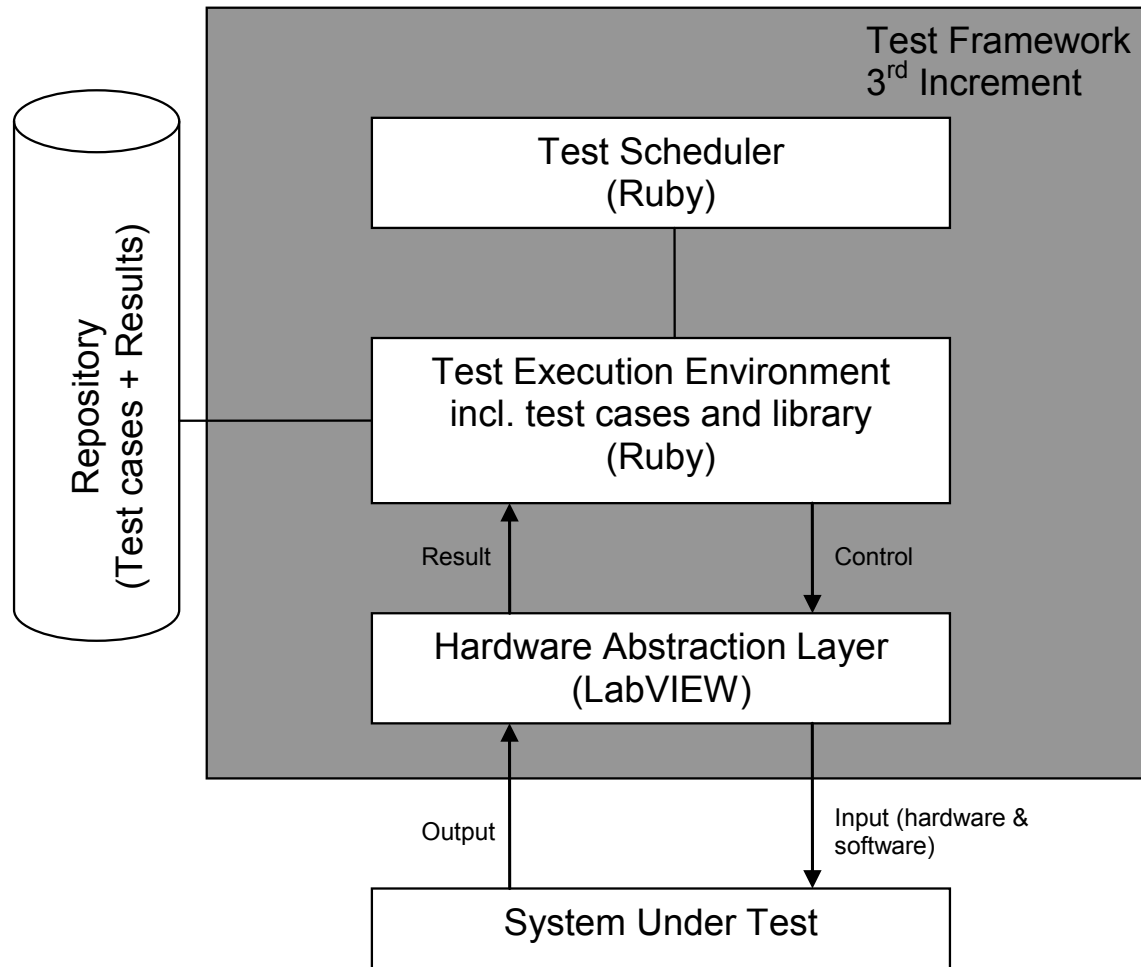


- Simple, but quick first results
- Multiple reliability issues found
- Work to do for the developers

Next increment Logfile interpretation

- Logfile scanned during test case execution
- Determine pass/fail criteria
- Detect system states and act upon:
 - Hot generator → extensive acquisition not possible
 - Execute other test cases (e.g. power-cycle), until
 - Generator has cooled down
- Log file analysis after test was still performed
- Still no software changes in the SUT, but existing interfaces were available now

Next increment Logfile interpretation



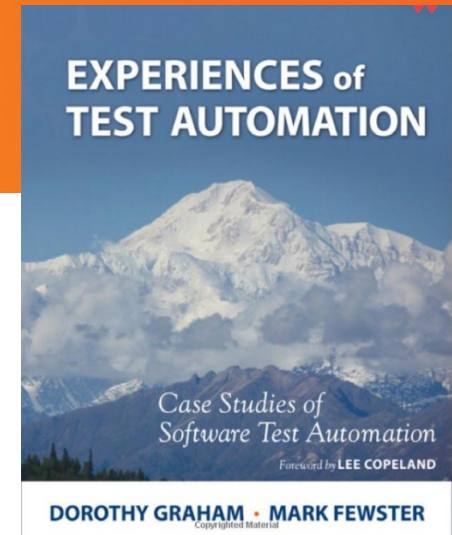
- >100 reliability hits identified
 - Which ones would have slipped through other tests?
 - Which ones would the customer complain about?
- “Independent” analysis of hits:
 - 8 would have been in system test, but not earlier
 - 7 would not have been found, but customer would complain (and fix would be necessary)

- ROI:
 $(8 \times X_1) + (7 \times X_2) - \text{costs} > 0$
- Costs (manhours + material) = 200K Euro
- X_1 : costs of defect found in system test: 10K Euro
- X_2 : costs of field defect: 200K Euro

- $80K + 1.4M - 200K \rightarrow$ **1.2M Euro saved**

- More money and time became available...
 - \rightarrow Implementing/executing more tests
 - \rightarrow More projects/products

- Numerous reliability hits identified + solved
- MTBF measured and predicted
- More testing hours on systems
- Customer satisfaction
- More projects wanted this approach
- Only 5 system test cycles remaining (was 15)



- This case study is described in detail:

Dorothy Graham & Mark Fewster
Experiences of Test Automation

Case studies of software test automation

ISBN 0321754069

Source of your development.



www.siox.eu



bryan.bakker@siox.eu



+31 (0)40 26 77 100