ESE 3400: Medical Devices Lab

Lec 6: September 21, 2022 Interface Circuits, Pt. 2

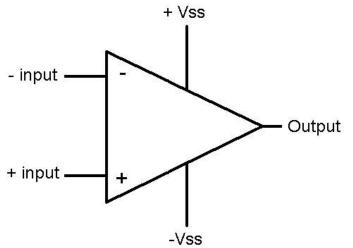




- Biopotential Amplifier
 - Non-idealites
- Instrumentation Amplifier
- Driven Right Leg System
- Lab 3 Circuit

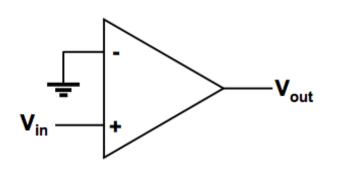


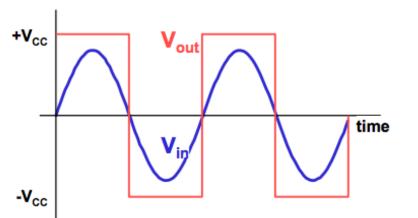
- Sensor outputs may (read: amost always) need amplification for any sort of acquisition and data analysis
- Use operational amplifier to do this
 - Amplifies differential input: $Out = A(V_{in+}-V_{in-})$, where A is large



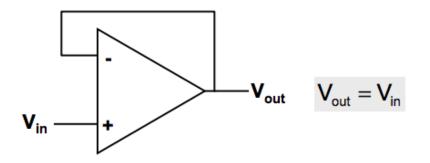


□ A) Voltage comparator



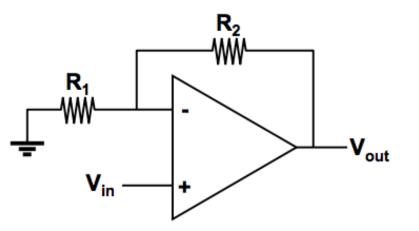


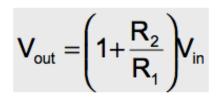
□ B) Voltage follower (Buffer)



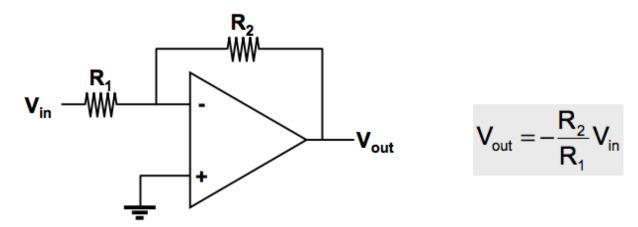


• C) Non-inverting amplifier

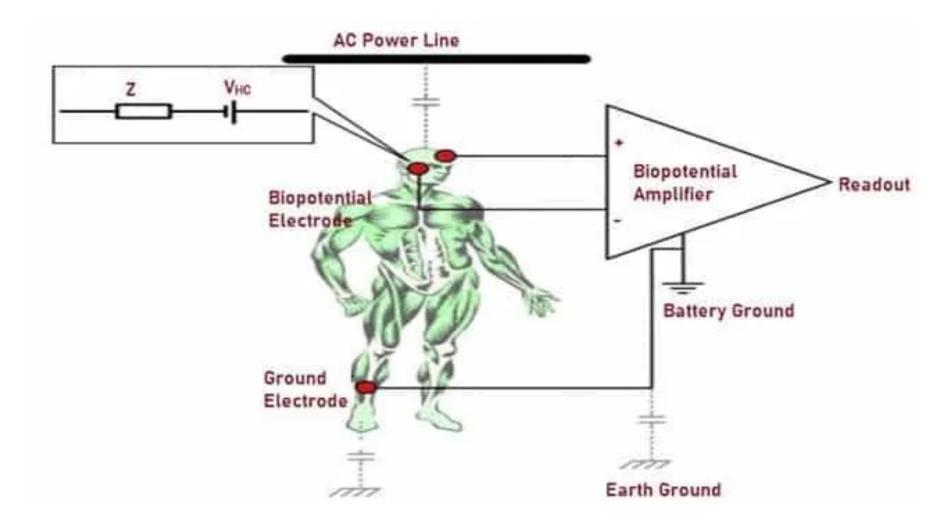




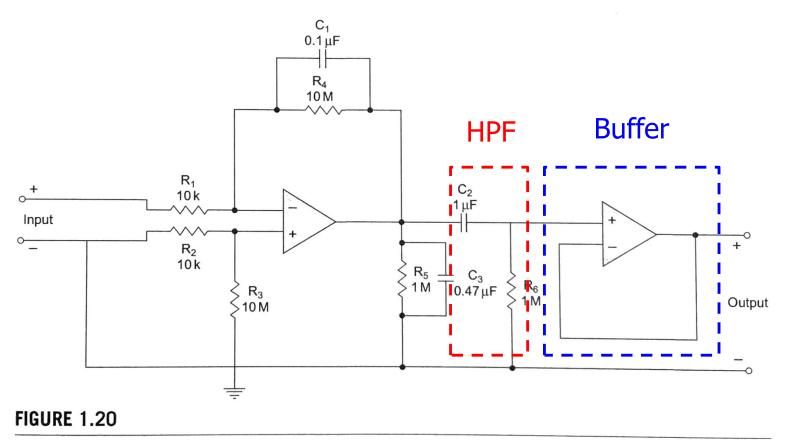
D) Inverting amplifier







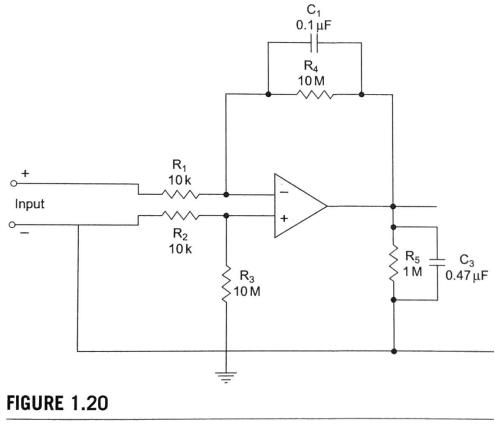




Differential biopotential amplifier.

Adapted from Prutchi and Norris (2005).

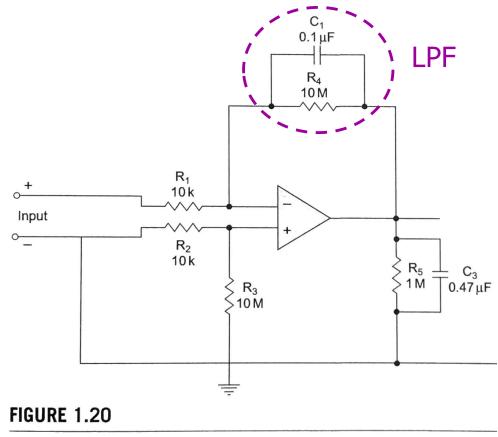




Differential biopotential amplifier.

Ac

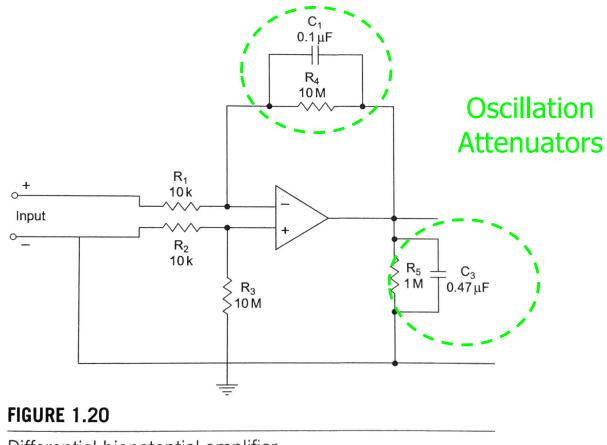




Differential biopotential amplifier.

Ac





Differential biopotential amplifier.

Ac

Biopotential Amplifier

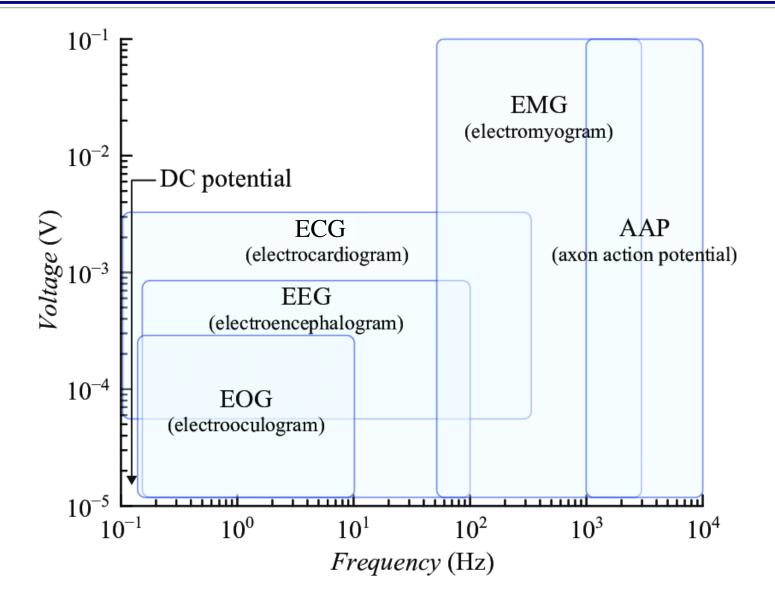
 Basic function to increase the amplitude of a weak electric signal of biological origin typically process voltages

- Typical bio-amp requirements
 - High input impedance greater than $10 \text{ M}\Omega$
 - Safety: protect the organism being studied
 - Careful design to prevent macro and microshocks
 - Isolation and protection circuitry to limit the current through the electrode to safe level

Biopotential Amplifier

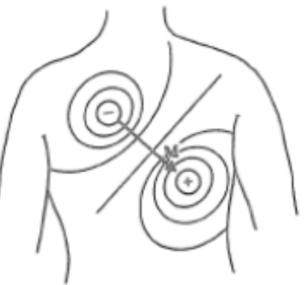
- □ Typical bio-amp requirements (con't)
 - Output impedance of the amplifier
 - should be low to drive any external load with minimal distortion
 - Gain greater than 1000
 - Biopotentials are typically less than a millivolt
 - Most are differential
 - High common mode rejection ratio
 - Biopotentials ride on a large offset signal
 - Rapid calibration of the amplifier in laboratory conditions
 - Adjustable gains
 - Often the change in scale is automatic





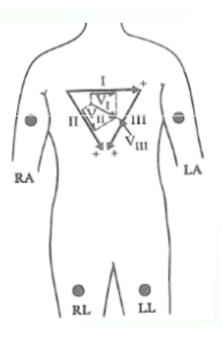
ECG Amplifiers

- Beating heart generates electric signal
 - monitored to understand heart functions
- Measurements are functions of
 - location at which the signal is detected
 - time-dependence of the signal amplitude
- Different pairs of electrodes at different locations yield different measurements
 - hence placement is standardized



ECG Leads

- □ In clinical electrocardiography
 - more than one lead must be recorded to describe the heart's electric activity fully
 - several leads are taken in the frontal plane and the transverse plane
 - frontal plane: parallel to the back when lying
 - transverse plane: parallel to the ground when standing
- Frontal plane lead placement called Eindhoven's triangle





- Frequency distortion
 - If filter specification does not match the frequency content of biopotential then the results is high and low frequency distortion
- Saturation of cutoff distortion
 - High electrode offset voltage can drive the amplifier to saturation causing peaks of waveform (QRS) to be cut off
- Ground loops
 - Can cause small currents to flow through patient's body
- Electric/magnetic field coupling
 - Open lead wires and long loops pick up EMI
- □ Interference from power lines (60Hz noise)

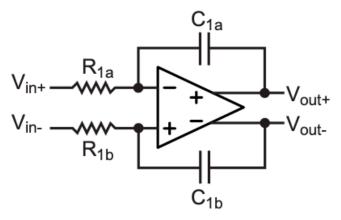
60Hz supply noise

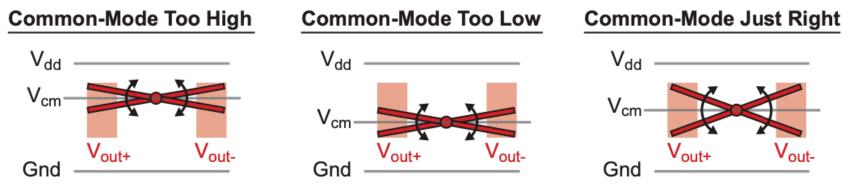
Coupled to ECG

Interference Reduction Techniques

- Common-mode voltages can be responsible for much of the interference in biopotential amplifiers.
 - Solution 1:
 - Amplifier with a very high common-mode rejection
 - Solution 2:
 - Eliminate the source of interference
- □ Ways to eliminate interference
 - Use shielding techniques
 - Electrostatic shielding: Place a grounded conducting plane between the source of the interference and measurement system
 - Very important for EEG measurement
 - Magnetic shield: Use high permeability materials (sheet steel)
 - Use twisted cables to reduce loops





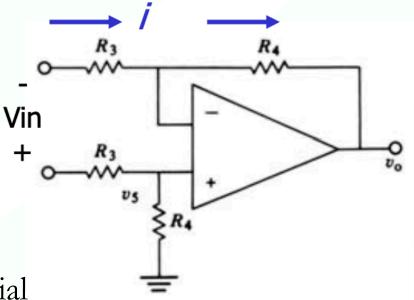




- One-amp differential amplifier
- Differential gain:

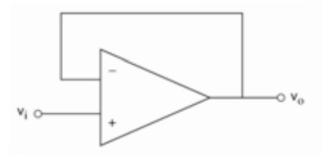
•
$$\frac{v_0}{v_i} = \frac{R_4}{R_3}$$
, where $R_4 \gg R_3$

- Characteristics
 - Good common mode rejection
 - Input resistance of the differential amplifier is lower than ideal opamp
 - Not good for many biomedical applications



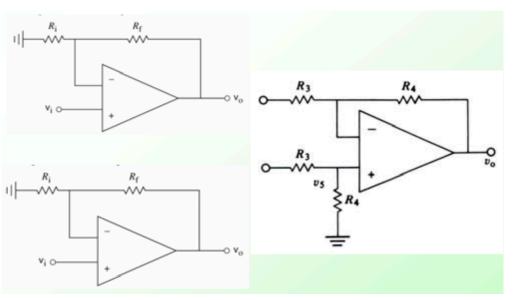


- How can we fix the low input impedance?
- Option 1: Add voltage follower at each input
 - Pros and cons?



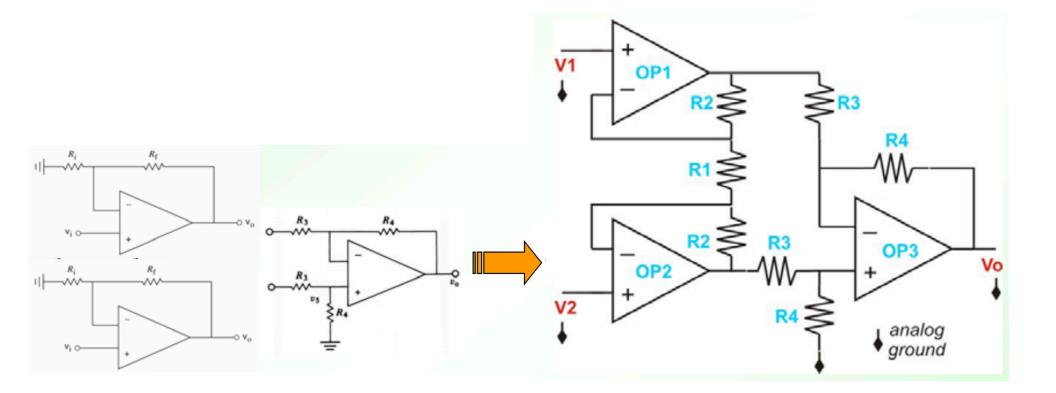
• Option 2: Add non-inverting amplifier at each input

Pros and cons?



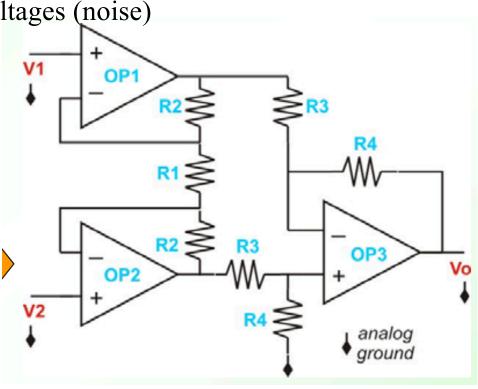


- Better option
 - Share R in input amps and eliminate ground connection

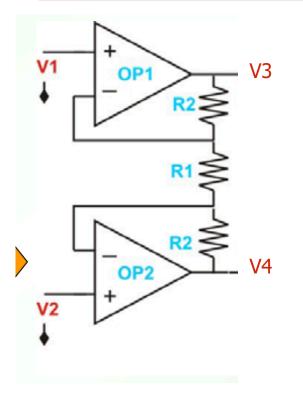


Instrumentation Amplifier

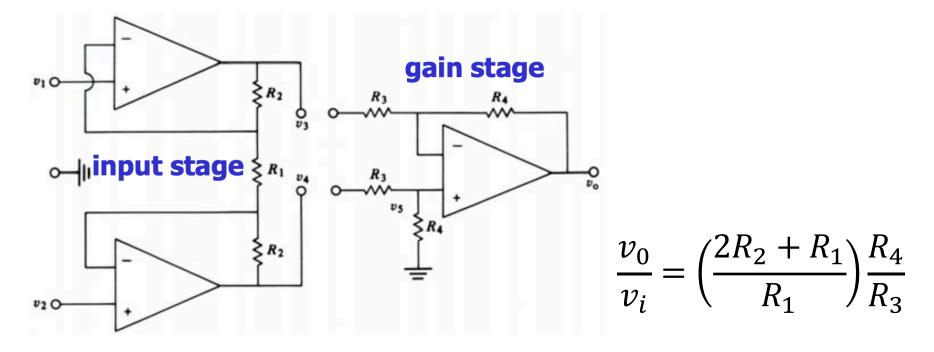
- This 3-op-amp circuit is called an instrumentation amplifier
- Input stage characteristics
 - low common-mode gain
 - -rejects common mode voltages (noise)
 - high input impedance
 - Input stage gain adjusted







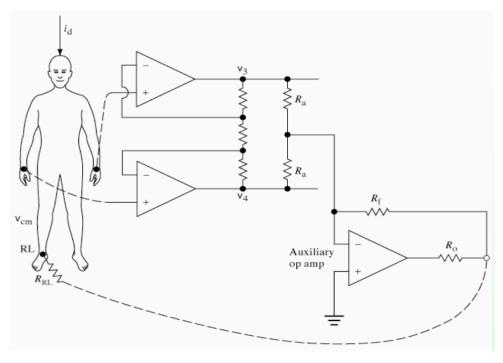




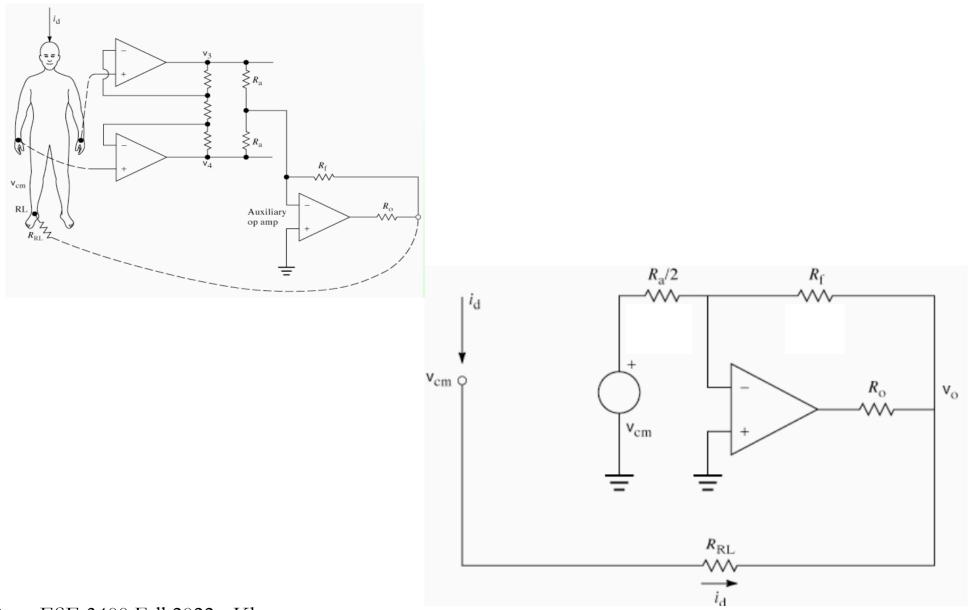
- Overall amplifier
 - Amplifies only the differential component
 - High common mode rejection ratio
 - High input impedance suitable for biopotential electrodes

Driven Right Leg System

- Motivation
 - Reduce interference in amplifier
 - Improve patient safety
- Approach
 - Patient right leg tied to output of an auxiliary amp rather than ground
 - Common mode voltage on body sensed by averaging resistors, Ra's & fed back to right leg
 - Provides negative feedback to reduce common mode voltage
 - If high voltage appears between patient and ground, auxiliary amp effectively un-grounds the patient to stop current flow

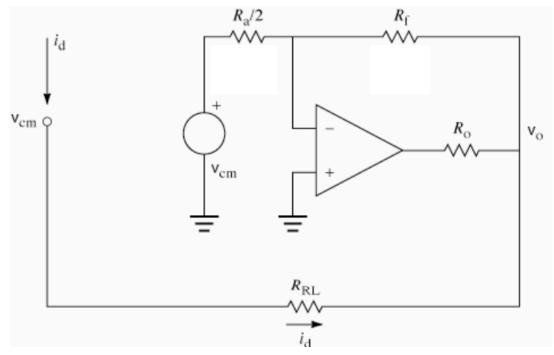


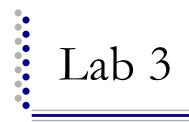
Driven Right Leg System Example

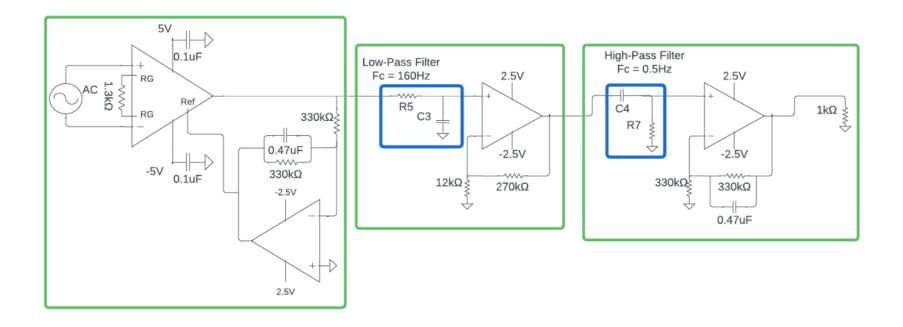


Driven Right Leg System Example

• **Problem:** Determine the common-mode voltage v_{cm} on the patient in the driven-right-leg circuit when a displacement current i_d flows to the patient from the power lines. Choose appropriate values for the resistances in the circuit so that the common-mode voltage is minimal. With a worst-case electrode resistance of $100k\Omega$, what is the v_{cm} when $i_d = 0.2uA$?









- Amplification
 - Use operational amplifier with differential signaling
- Instrumental Amplifier
 - Designed specifically for biopotential signals to compensate for non-idealities
 - Common-mode voltages responsible for much of the interference in biopotential amplifiers



- Finish Lab 3 and submit deliverables in Canvas by next lab day at midnight
 - New handout with SPICE tips