

*Testing in a Medical Device Context*  
*Limitations are few*

Ruud Cox, Improve Quality Services



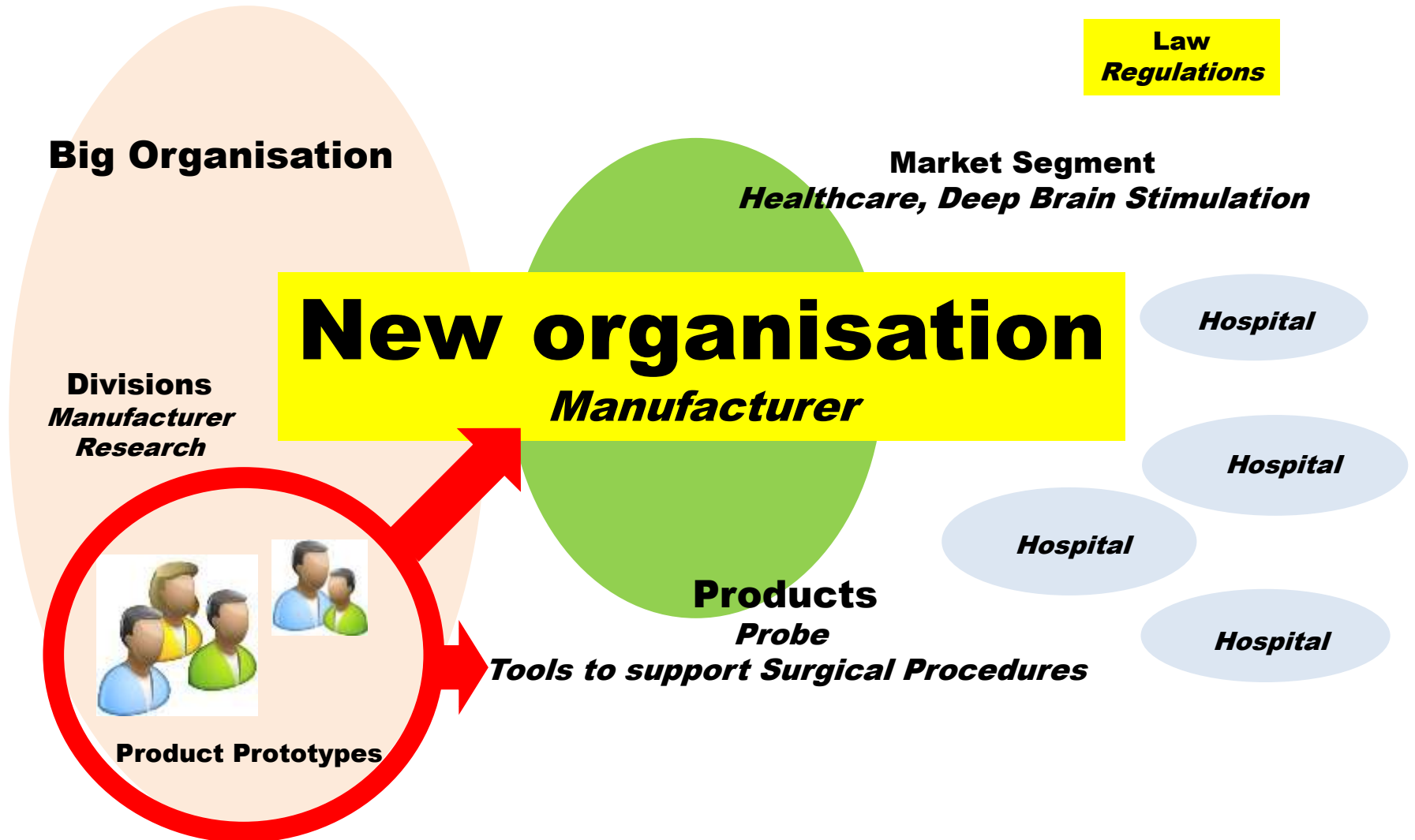
[www.eurostarconferences.com](http://www.eurostarconferences.com)



@esconfs  
#esconfs



# From Research to Manufacturing



# Deep Brain Stimulation



**A pacemaker for the brain**



**Almost no testing**

**Incomplete, overdue documentation**

**Mission**

# Organise Testing

**(Verification & Validation)**

Approach:

**Exploratory Testing**

**Learning, investigation, discovery**

followed by

**Scripted Testing** to demonstrate that the product conforms to specified requirements and to provide objective evidence for submission.

**Conformance, Compliance**

# Exploratory Testing

In the given situation, this was the best way to

- Learn more about the product
- Add value by providing feedback

Charters, Debriefs, Screen Recordings, Managed

**A big success**



# Regulations and Testing

Mission update

Verification only

**§820.3(aa) *Verification means confirmation by examination and provision of objective evidence that specified requirements have been fulfilled.***

**Testing is one of many possible verification activities**

# Objective Evidence

Check pressure.

Check that the pressure is OK.

Record the pressure here \_\_\_\_\_. Check that the pressure is between 50 and 75 psi.

**A check requires a decision rule  
i.e. specific, measurable requirements**

*Example from*

*Medical Device Software Verification, Validation and Compliance by David A. Vogel*

*ISBN 1596934220*



# Specified Requirements

- User Stories
  - Sometimes with acceptance criteria
- Traditional requirements
  - “The product shall...”
- User Stories and traditional requirements were not linked

**A real challenge!**

# Global Design



**System**

**Graphical User Interface**

**Business Logic**



**Component**



**Component**



**Component**



**Component**

# Component Testing

Software Interface

Testability

Exploratory Testing

Coverage/risk outline

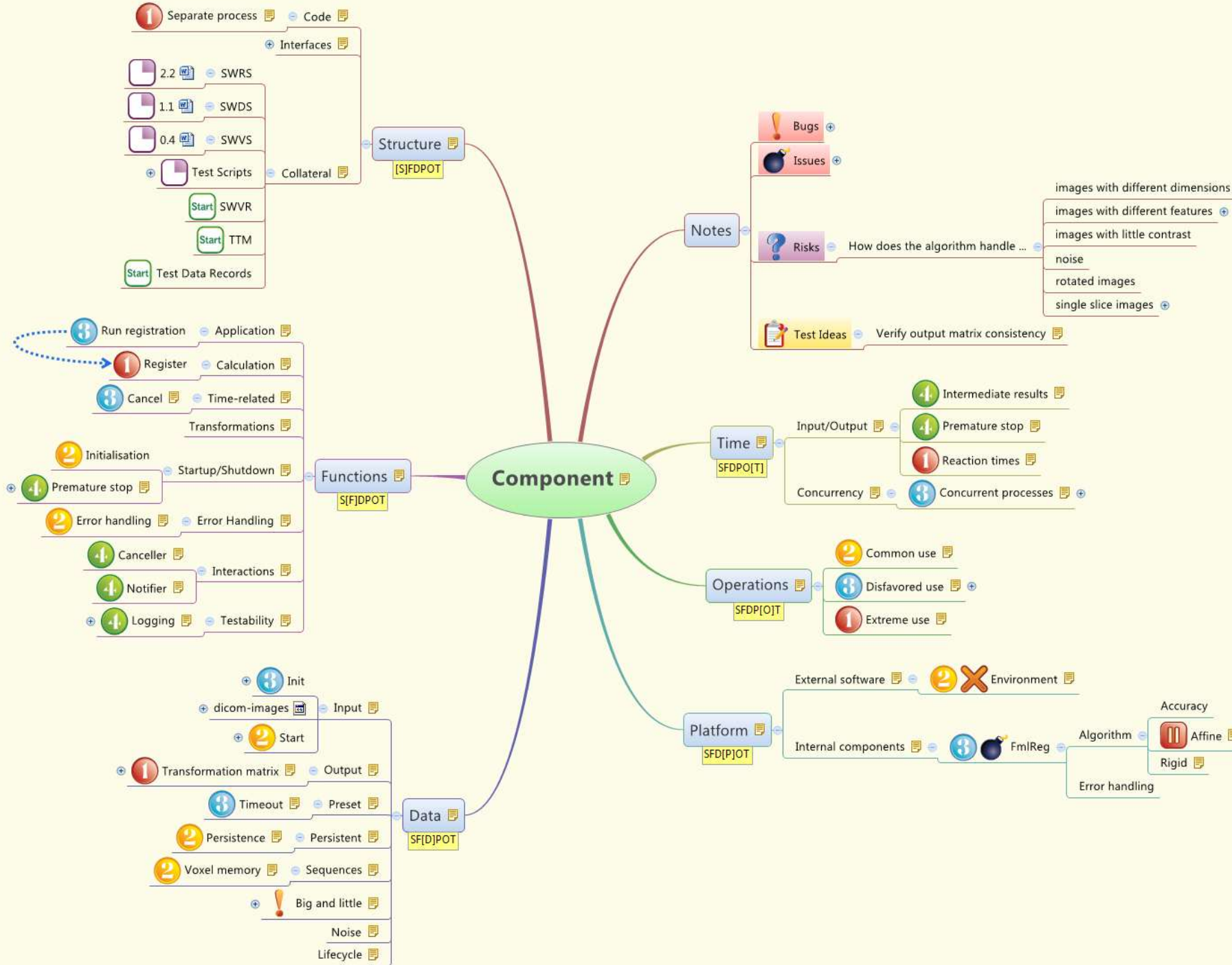
Scripted Testing

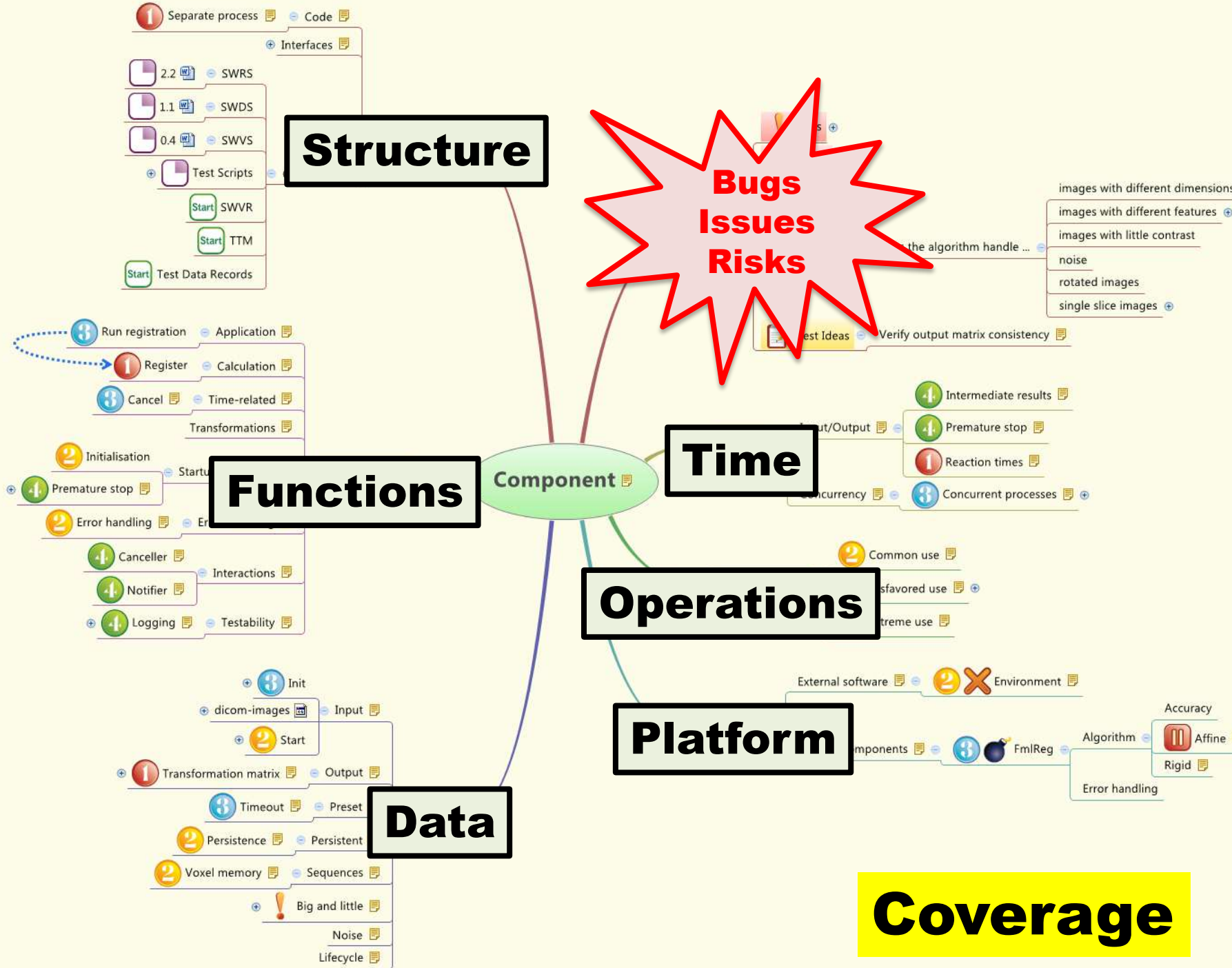
Unit tests annotated with requirement tags for traceability

```
[Test]
[RequirementTags("Req1", "Req7")]
void FooBar()
{
    Assert.That(...);
}
```

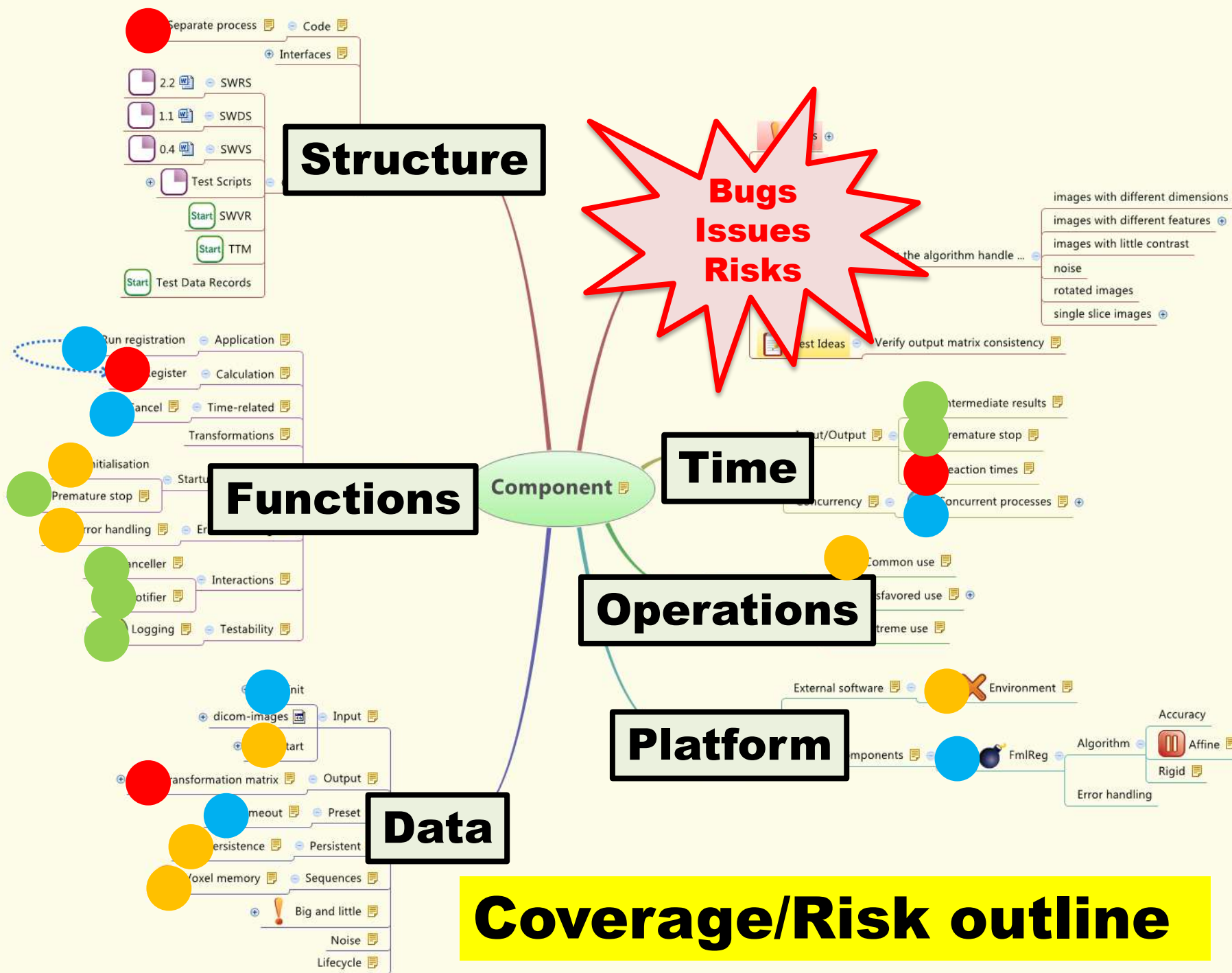
**Specify test cases for high risk specified requirements only**

*Mission update*





**Coverage**



# Why PASS and FAIL is not enough

PASS only means that no problem was found, which doesn't mean that there's no problem

## Comparable Products

- Lots of remarks during evaluation at hospital
- Our product side-by-side to competitors product



# Independent Testing

- Testers were responsible for
  - ALL test documentation
  - Providing Objective Evidence
- Developers did some unit testing but
  - Their tests were undocumented
  - Could not be used as Objective Evidence

**Why does testing take so long?**

# JIGGLE!

## Time-out

### Testing

Incomplete, overdue specified requirements. Independent testing. “I don’t know nothing about testing.” What does the team **know** about or does have **experience** with working in a **Medical Device Context?**

### Agile/Scrum

Almost no Agile practices. The team didn’t live Scrum. What does the team **know** about or does have **experience** with **Agile/Scrum?**

# Regulations and Agile/Scrum

***CONCURRENT ENGINEERING. Although the **waterfall model** is a useful tool for introducing design controls, its **usefulness in practice is limited.*****

*DESIGN CONTROL GUIDANCE FOR MEDICAL DEVICE MANUFACTURERS*

*This Guidance relates to FDA 21 CFR 820.30 and Sub-clause 4.4 of ISO 9001*

Agile TIR SW Committee Draft 1.0

**Guidance on the use of AGILE practices** in the development of medical device software

# Improvements after Time-out

## Testing

- IEC 62304 training, Less independent testing.

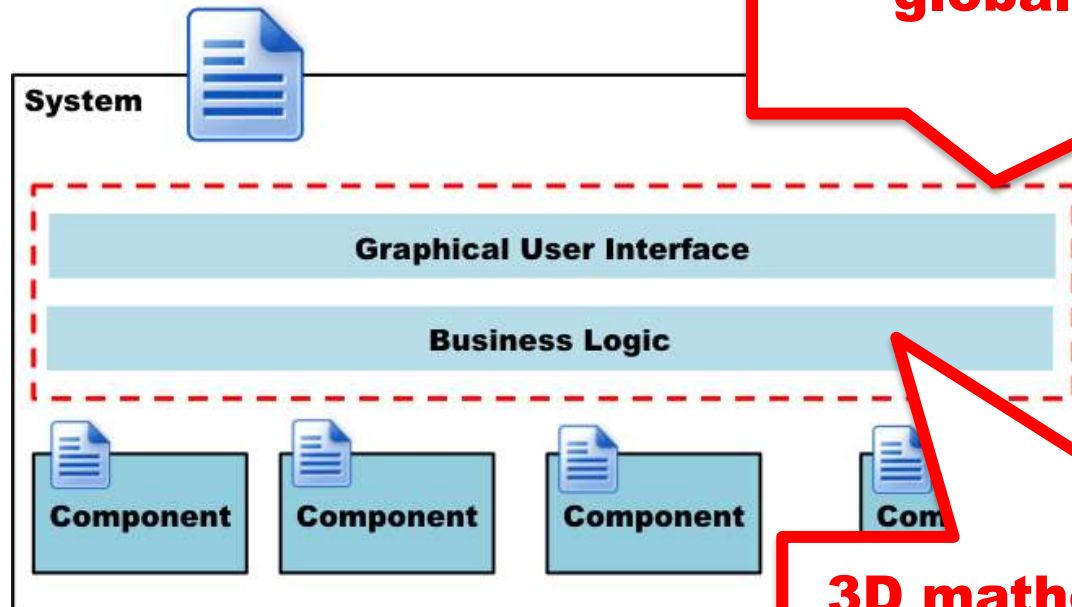
## Agile/Scrum

- Product Backlog, Sprint Planning, **Definition of Done**, Scrum Board, Sprint Review, Retrospectives, Smaller Teams each with their own Scrum Master
- Scrum Master, Product Owner training
- Agile/Scrum Coach

**Overdue specified requirements**

# Other Identified Risks

**Component not traceable to global design and risk analysis**



**3D mathematical model was not specified**

**Claim these results**

**Clarify mission**



**Product Owner**



**System Architect**



**Program Director**



**Test Architect**



**Director  
Quality & Regulations**

**Status reporting**

# Observe the work of testing



**A diary might help**



# Lessons Learned, Conclusions

- A feedback loop is mandatory
  - Mission
  - Status Reporting
- Medical Device Context is not limiting
  - Exploratory testing is possible
  - Agile/Scrum is possible

**No matter what the problem is, it's always a people problem.**

*Gerald M. Weinberg*

# Questions

Ruud Cox

email

[rco@improveqs.nl](mailto:rco@improveqs.nl)

Twitter

@ruudcox

Blog

<http://ruudcox.wordpress.com/>