



Figure 2: (a) Blood oxygen saturation and (b) heart rate, data collection after employing sliding window algorithm at the receiver.

III. PERFORMANCE ANALYSIS

In the receiver, the SpO₂ and BPM data is collected using camera. Afterward, the data is processed using sliding window algorithm with different window size. The window size mainly depend on the number of sample in an interval data is collected. After applying sliding window scheme the SpO₂ and HR data is shown in Figure 2 (a) and (b) with respect to the number of sample. In the receiver, we took 400 samples of data in one interval for employing sliding window scheme to generate the graphs. As shown in Figure 2, several unstable spikes are generated within the initial samples. The reason is the initial stirs of the patch while attaching the sensor. The exact BPM and SpO₂ values can be observed after 125 samples and 200 samples, respectively. The experiments were performed on a male volunteer whose basic information are: 62 kg weight, 167 cm height, and 26 years old. We also calculate the mean absolute error (MAE) of the data of the volunteer in different lighting conditions and considering four different indoor conditions. Firstly, in nighttime, the data is taken using multiple room light sources and a single light source with low intensity, separately. The same procedure is applied in daytime using slight sunlight entering the room. It can be seen that the MAE increases when the interferences are high. Finally, the data are sent to an IoT cloud server where an authorized person can access the data using a login ID and password.

IV. DATA DECODING

The retrieval of the received signal significantly depends on the orientation of the transmitter. It will not be sophisticated to maintain a fixed position of the patch as the placement of the hand may be altered based on the patients' requirement. However, different orientation of the LED array will generate substantial errors in the data. Thankfully, we have avoided the challenge by measuring the amount of inflection of the LED array. As mentioned in transmitter section, three LEDs are reserved in OFF position to indicate the starting and ending points of each IR, BPM, and SpO₂ data. The three positions will be unchanged in the LED matrix disregarding any inflection. Thus, in the original LED matrix, the amount of orientation is calculated locating the positions of the OFF LEDs. The data may vary significantly, therefore, it is possible for any of the other LEDs to progress in the OFF state if the data is too small. However, as we defined the OFF LEDs at the end of each dataset, the newly OFF LEDs will

appear sequentially just before the specific OFF LED, therefore, the positions of the OFF LEDs will be determined easily. After measuring the inflection angle, the starting point of the dataset is defined. Then, the symbols are decoded using the color code sequence in the LED matrix. Finally, the data for IR, BPM, and SpO₂ are stored into three separate CSV files.

V. CONCLUSION

A real-time health monitoring system based on OCC with the improvement of system error performance is proposed in this paper. A MAX30102 sensor is used to collect the IR, SpO₂, and BPM data, and connected to a patch mounted on the patient's hand. The patch is composed of an LED array that is used to transmit the data to a webcam. As the OCC system is itself a higher security system so we don't need any additional security protocol to improve the performance of the system. In the receiver, each LED in the array is detected using a NN. Also, another feature-extraction-based NN is used to recognize the colors precisely. In addition, a mechanism based on sliding window technique is developed to assuage the challenge error free data collection at the receiver. The whole data decoding and ECG signal generation procedures are performed in Python 3.7. Finally, the data is processed and accessed by a remote monitor and stored in a cloud server.

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REFERENCES

- [1] M. F. Ahmed, M. K. Hasan, M. Shahjalal, M. M. Alam, and Y. M. Jang, "Design and Implementation of an OCC-Based Real-Time Heart Rate and Pulse-Oxygen Saturation Monitoring System," *IEEE Access*, vol. 8, pp. 198740-198747, 2020.
- [2] B. Jiao, "Anti-motion interference wearable device for monitoring blood oxygen saturation based on sliding window algorithm", *IEEE Access*, vol. 8, pp. 124675-124687, 2020.
- [3] W. Huang, P. Tian and Z. Xu, "Design and implementation of a real-time CIM-MIMO optical camera communication system", *Opt. Express*, vol. 24, pp. 24567-24579, Oct. 2016.
- [4] O. S. Alwan and K. Prahald Rao, "Dedicated real-time monitoring system for health care using ZigBee", *Healthcare Technol. Lett.*, vol. 4, no. 4, pp. 142-144, Aug. 2017.
- [5] V. P. Tran and A. A. Al-Jumaily, "A novel oxygen-hemoglobin model for non-contact sleep monitoring of oxygen saturation", *IEEE Sensors J.*, vol. 19, no. 24, pp. 12325-12332, Dec. 2019.
- [6] M. Hasan, M. Shahjalal, M. Chowdhury and Y. Jang, "Real-time healthcare data transmission for remote patient monitoring in patch-based hybrid OCC/BLE networks", *Sensors*, vol. 19, no. 5, pp. 1208, Mar. 2019.
- [7] M. Z. Chowdhury, M. T. Hossan, M. Shahjalal, M. K. Hasan and Y. M. Jang, "A new 5G eHealth architecture based on optical camera communication: An overview prospects and applications", *IEEE Consum. Electron. Mag.*, vol. 9, no. 6, pp. 23-33, Nov. 2020.
- [8] M. F. Ahmed, M. K. Hasan, M. Shahjalal, M. M. Alam and Y. M. Jang, "Experimental demonstration of continuous sensor data monitoring using neural network-based optical camera communications", *IEEE Photon. J.*, vol. 12, no. 5, pp. 1-11, Oct. 2020.