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April 3, 2020

## Progress Report 4

# 1. Background on the project itself

The Non-Invasive Continuous Optical Lactic Acid Sensor (N.I.C.O.L.A.S.) is a smart lactate sensing modality developed for continuous, noninvasive blood lactate level monitoring in clinical settings. It will be a vast improvement on the intermittent blood draws currently employed for blood lactate monitoring due to its ability to sample lactate levels continuously and noninvasively in a small package that will be less resource-intensive on hospitals. Our sensor will utilize near IR spectroscopy (NIRS) and ratiometric analyses to detect fluctuations and alert healthcare professionals of any rapid spikes in lactate levels. This will help healthcare providers better utilize lactate as an early indicator of sepsis, organ failure, and hemorrhage, allowing for earlier preventative intervention in these cases leading to improved patient outcomes. At last reporting, we gave updates on the following fronts:

- Circuit Optimization
- Lactic Acid Absorbance
- Alternative Methodologies
- Proposed New Strategy
- Marketing Study
- Remote transition

### 2. Achievements since last reporting

Since the last report, we have made progress in completing our project. Due to the impact of COVID-19, we have been unable to do any updates with regard to prototyping and testing of our device since last reporting. Because of that, we are continuing with the assumption that our non-invasive, optical device as intended, instead of the microfluidic device we were prototyping concurrently. Based on this, we have spent time working on the transition to the Course Modification Plan (CMP) for the class and adjusting to teleworking and communicating via zoom. In this time, we have formulated our predictive failure model and foreseen all anticipated failures with solutions. Additionally, we have <u>formalized our persona and SWOT analysis</u> and the ways in which we plan to approach the consumers in the clinical fields that we intend to reach.

#### 3. Problems that have arisen

With regard to the circuit, we have had trouble filtering out 60Hz noise in our system. We are currently able to focus on the signal and see the attenuation, but we would like to see our signal without this process. The spectrum of lactate in water gave inconclusive data. This required us to go back into the lab and try to get cleaner spectrums with different solvents, which still was not very distinguishable. Of course, we cannot fail to mention that with the outbreak of COVID-19, we have not been able to work on the hardware of the device. We are in the process of comparing our device to the standard of care that exists by contacting physicians and juxtaposing the efficacy of our design.

#### 4. Work that lies ahead

Ahead, we will continue following the CMP and all that it entails. We need to continue formalizing our predictive failure model and safety analysis to add to our presentation. Additionally, we need to formulate a specific business model canvas and marketing analysis. Lastly, we have to make our poster to present this week. This will require condensing our previous iterations in order to have a 5-minute pitch for virtual design day. In addition, we need to be able to create this design in a marketable approach to physicians and other entrepreneurs. We used our persona assessment for our ideal customer, and now we will use the SWOT analysis to see where we would need to optimize the weaknesses of our device.

## 5. Assessment of objectives relative to proposed schedule and budget

All other prototyping/testing is unable to be completed for the semester. In terms of staying on track with the CMP, we are set to complete our predictive failure model, safety analysis, business model canvas, marketing analysis, and poster. In addition, we will reach out to local resources to achieve access to prototyping capabilities when COVID-19 issues decrease. Thus, this week we focused on creating a precise design for an extension of our project for when we regain access to the appropriate resources.