

EECE 2510 - Circuits and Signals: Biomedical Applications

Lab 15 ECG Circuit - Analog Filtering and A/D Conversion

INTRODUCTION:

Now that you have your basic instrumentation amplifier circuit running, in this lab, you will carefully process the ECG signal in the analog domain to reduce noise and prepare it for analog to digital conversion and then you will acquire a sampled (digital) version of your ECG signal in MATLAB using the NI USB-6001

OVERVIEW

Working backward from the NI USB-6001 20 kSPS 14 Bit A/D, we need to start by looking at the specs for this device. The 6001 samples analog voltages from -10 to 10 volts and converts them to digital signals. It divides the input interval from -10 V to 10 V into 2^{14} levels: a total of 16384 levels. Our job in this lab is to provide a good ECG signal that fits within the -10 to 10 V input window for the A/D device and then to use the A/D to sample the signal so that we have a digital signal we can work with in the computer. Since our power supply voltage is limited to ± 1.5 V, we thus want to make the signal as "large" as possible but still avoid saturating the Op Amps. Unfortunately, even if we do the best job we can, using most of the ± 1.5 V range, we will still only use 15% of the A/D range, which is equivalent to using only a little more than 11 of the 14 bits of A/D resolution. An optimum design would have a 14 bit A/D with a 3 V input range. Questions: How many input ADC levels are available in our 3 V window? How large is the spacing between adjacent levels?

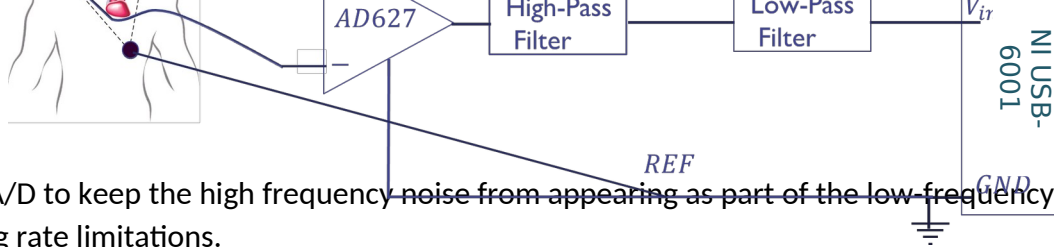
A sketch of the signal path, with the necessary filters is shown in Figure 1. You will need to design the filters and understand what each part of the circuit is doing!! Spec. Sheets for the chips you are using are available on the course web site. Some step-by-step advice is given below, but you will have to do some thinking and investigating on your own, and you will probably want to discuss your goals and approach with your instructors. Note that this document is not intended to give you step by step instructions, but to give you some idea what and why you are building and how to get started. Enjoy!!

Analog circuit goal #1: Deliver the largest signal that is certain to fit within the combined limits of the ± 1.5 V supply rails of the instrumentation amplifier to take full advantage of the A/D range and have the minimum amount of noise in the converted signal. Note that you will not want to have all the gain in the instrumentation amplifier stage. This is because you will have some DC or near-DC signal components that you must filter out before you can fully amplify the AC portion of the signal. So, expect to design a gain of more than one into the filter stages to achieve the signal size that you want.

Analog circuit goal #2: Filter out frequency components that are not part of the ECG signal. A) Get rid of the DC part of the signal after the instrumentation amplifier. B) Get rid of high-frequency noise

Can swap these? (maybe!)





before A/D to keep the high frequency noise from appearing as part of the low-frequency signal due to sampling rate limitations.

PART I, CONDITIONING THE ECG SIGNAL FOR INPUT INTO THE A-TO-D CONVERTER

Overview: Our overall goal is to provide a clean, properly scaled ECG signal to the input of the NI USB-6001 device.

The raw output of the first instrumentation amplifier stage contains the desired ECG signal, but it also contains a lot of high-frequency noise, and some dc or near-dc voltages related to electrode contact potentials on the skin and perhaps other sources, and it may contain a significant amount of 60 Hz interference. We would like to remove as much of this undesired noise and interference as possible by the time we are finished, so that we have a good ECG signal to work with.

Since the DC levels (if too large) may interfere with optimal scaling of the ECG signal, you should use a high-pass filter to remove the near-DC components of the signal.

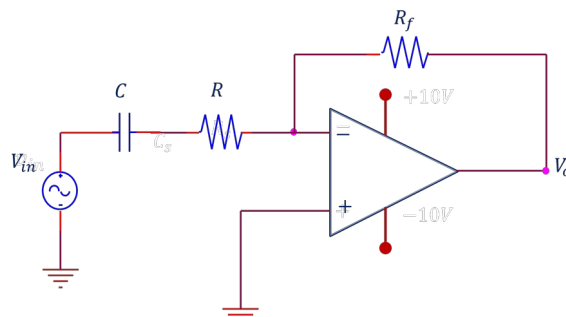
The high frequency noise must be removed before the ADC, because as you know, if the sampling frequency is not high enough, we will experience aliasing of the signal and some of the high frequency noise will appear as low-frequency noise in the digital representation of the ECG signal. To remove the high frequency noise you should use one or more low-pass filters. The signal will be greatly improved by this step!

Filtering out the 60 Hz interference without affecting the rest of the signal is difficult in the analog domain, but fortunately the 60 Hz interference can at least partially be handled by digital processing on the computer. However, we can take steps (described later) to minimize the 60 Hz interference in the first place.

1. REMOVE DC SIGNAL COMPONENTS:

To remove the DC component of the signal coming out of the AD627 chip you should use a **high-pass filter**. The lower cut-off (3 dB) angular frequency $\omega_c = \frac{1}{RC}$ (sometimes called the cut-on frequency).

We want this filter to remove the DC component (zero frequency!), but we don't want it to filter out any ECG frequencies. Discuss your $\omega_c(f_c)$, **capacitor**, and **resistor choices** with your instructor. In practical terms, it is important not to use resistors below about $1\text{ k}\Omega$ so that the op-amp does not exceed its output current capabilities. Use the LT 1490 op-amp, which can operate at our relatively



small $\pm 1.5\text{V}$ power supply. Note that the LT1490 chip is a dual op-amp (meaning that two op-amps are on one chip – see the pinout on the spec sheet). It has a very small offset due to op-amp input currents, and the output voltage can come very close to the power supply. Draw the circuit for your filter in your lab notebook, write down the values of R and C you used, the cut-on frequency ω_c in rad/s and f_c in Hz, and explain why this circuit works. Test your circuit with the small signal from the signal generator and observe the output. You can choose R_f to add a gain at this stage or leave at unity gain. Choose the input signal level so that the output of the filter does not saturate. You can test with one frequency in the passband of the filter, one around the designed corner frequency and one near the stopband. Compare the input and output sinusoidal waveforms and confirm that the filter is functioning properly. The input and output signals of the filter are applied to the oscilloscope channel 1 and channel 2 respectively. Adjust the input signal amplitude so that output does not saturate in the range of frequency specified. Observe the gain of the filter at one or two points in the stop band and a few points in the passband to sketch the filter response. It will still be difficult to display signals below 0.2Hz. Measure the cut-on frequency of the filter. Is it as designed? If not, debug your design as necessary.

2. REMOVAL OF HIGH-FREQUENCY NOISE.

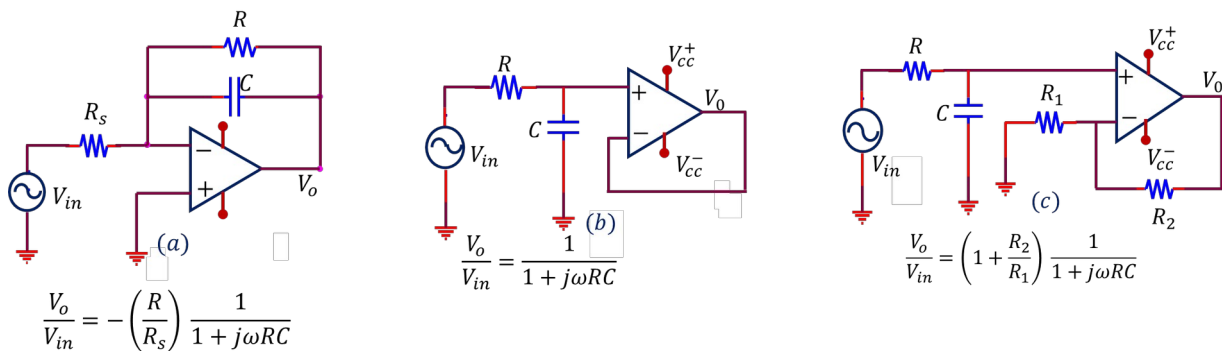


Figure 3 Low pass filter options (a) Active first order LPF with DC gain of $-\frac{R}{R_s}$ (b) Active first order LPF with unity gain

(c) Active first order LPF with DC gain of $\left(1 + \frac{R_2}{R_1}\right)$. Corner frequency for all designs, $f_c = \frac{1}{2\pi RC}$

You want to filter out the high-frequency noise without eliminating the ECG signal. Again, the choice of cut-off frequency is critical!! **Discuss your cut off frequency and filter circuit choices with your instructor.** You can also add filters cascaded in series, or a second order filter (see Nilsson) for even better removal of high-frequency noise. Construct a low-pass filter as discussed in class, or any other low-pass filters using half of the LT 1490 chip. Several possibilities, as discussed in class, are shown in Figure 3, and all but the passive filter are implemented with an op-amp (half of a LT 1490 chip).

Low-Pass Filter Options:

Figure 3 shows different options for a first order low pass filter (LPF) design. Figure 4 shows a cascade of two active low pass filters. Note that in general when filters are cascaded the overall transfer

function is not simply the product of the individual transfer functions. In the case shown in figure 4 if we assume that op-amps are ideal with zero output resistance, we can find the overall transfer function as the product of the individual functions

$$H(j\omega) = \frac{V_o(j\omega)}{V_i(j\omega)} = \left(\frac{R}{R_s}\right)^2 \frac{1}{(1+j\omega RC)^2} A_{V_{DC}} = \left(\frac{R}{R_s}\right)^2, f_c = \frac{0.64}{2\pi RC}$$

Test the LPF alone by comparing a sinusoidal input from the signal generator and output sinusoidal waveform in the frequency range of interest. You can display the signals on both channels of the oscilloscope.

Now combine the HP and LP filter and determine the upper and lower cutoff frequencies of the entire circuit using the signal generator and the oscilloscope. Carefully adjust the input signal amplitude so that the output does not saturate. Are these at the design frequencies? Once you have the circuit working properly, draw the entire circuit diagram in your lab notebook. Explain why it is essential to remove high frequency noise before A/D conversion, rather than afterward.

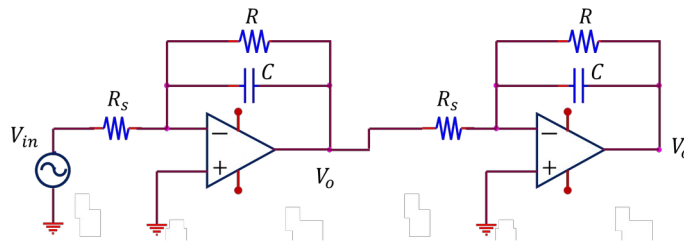


Figure 4. Cascade of two identical first order LPF

PART II, ACQUIRING THE ECG SIGNAL: SETUP AND CONSIDERATIONS

Use the Biopac EL503 electrodes. You can use the supplied lead wires or make lead wires and attach them to the conductor by stripping a ~1" length from the end and wrapping it around the conductor tightly a few times and crimping with pliers. Do not solder since this will damage the electrode.

The Electrode placements in Figure 1 are suggested for the optimum signal, but simply using the right and left forearm may be more convenient for testing and is also fine as far as acquiring a cardiac signal.

Some considerations:

Electrode placement: electrodes can be placed across your chest (upper right and lower left as shown in figure 1) or on your forearms. Be sure to attach a **third electrode to your body connected to ground**. This is very important. The better contact you have between the electrodes and your skin the better chance you have of getting a good signal. Try to make sure the electrodes lie flat against your skin and that the entire electrode surface is making good contact. Try different positions of the electrodes if you are not getting a good signal – the closer to your shoulder the better, usually.

Observe the ECG signal on the oscilloscope. Remember that you want the signal to fit within the power supply rails and be as large as possible (**this is important**). Describe the signal that you get. You can adjust the appropriate resistors (**think about which resistors change only the gain and not the cutoff frequency!**) on the instrumentation amplifier, the high-pass filter or the lowpass filter to increase the gain as needed. Note that you do not want the gain of the first stage to be so large that the undesired dc component causes the amplifier to saturate.

1. Is your circuit working as expected? Show one of the instructors your results.
Remember: You want to “fill” the ± 1.5 range, but you do not want to over-fill (saturate). Modify resistor values based on the amplitude of your measured ECG signal. You can (and should) adjust this as you are working.
2. **Connectors:** You may use the specialized electrode connectors provided. Somewhat surprisingly, many students have better results by making lead wires and attach them to the conductor by stripping a ~1” length from the end and wrapping it around the conductor tightly a few times and crimping with pliers. Do not solder since this will damage the electrode.
3. Try to keep your muscles still when you are acquiring your data (why?). It is suggested that **one student wear the electrodes and hold still**, while the other student adjusts the equipment. You can even try holding your breath while acquiring to reduce movement further.
4. This is one occasion where the “**auto scale**” option on the oscilloscope **will probably not work**. A time base setting of **(200-500) ms/division** will allow you to display a few cycles of the ECG waveform
5. One source of noise is your body acting as an antenna and picking up low frequency signals, largely from the 60 Hz power lines. We try to eliminate this as much as possible by using the difference amplifier feature of the instrumentation amplifier, assuming that the potential of your entire body is changing at the same time due to external influences. Another potential source of noise is that any loop of wire acts as a transformer as the magnetic field changes inside it. You may have seen this in your physics course and you will see it in the future in your electromagnetics course. The way we can eliminate loops of wire is by twisting the wires together. This is used in Ethernet cables – they contain “twisted pairs.” Here, you may be able to do the same thing by twisting the three wires going to the body together. Try this and describe the results.

PART III, ACQUIRING AN ECG SIGNAL USING THE NI A/D

Now we are ready to acquire your ECG signal with the NI USB-6001 in Matlab. Once you have a set up your circuit and can see a good signal on the oscilloscope **acquire at least 5 10-second** long ECG traces and save them for later analysis. Try to record ECG traces with different heart rates – either from different people, or run up and down the hall a little to get the rate up!! **Note: It may help reduce 60 Hz noise if you disconnect the oscilloscope while you are acquiring the signal.** Once you can have these 5 signals, try to move very slowly while recording another 10s ECG (to introduce some signal drift into the trace). The goal is to get an ECG where you see a slow change in the signal ---slower than the individual beats---without picking up too much noise. To do this you will have to change position a little without too much fast muscle contraction near where your electrodes are and without disturbing the electrode contacts. You can also try to breathe slowly while acquiring to see if you see any effect on the signal. You should also try recording a longer signal, which might be useful for the digital signal processing that you will do following this lab.

We will do more processing, but for this lab, plot your signal on axes scaled in units of volts and time (instead of arbitrary numbers and number of samples). Make 2 plots, one plot of the voltage as

recorded by the A/D and another one scaled by the gain of your analog system so that you are plotting the voltage at the electrodes on the vertical axis.

IMPORTANT: BEFORE YOU LEAVE THE LAB:

- a. Place all of the components that you removed from the red tool box back in that box and return it to the cabinet that houses them
- b. Collect all used components and wires from your bench and place them in your group's reusable plastic container. If you are not going to use these components or wires again please discard them in the trash bin located in your lab room.
- c. Turn off all of the equipment you have used on your workbench.
- d. Make sure you return your protoboard, the equipment wires and your reusable container to the front window.
- e. Make sure to have your notebook signed by an instructor before you leave the lab.

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