



DECLARATION OF GORDON MACPHERSON

I, Gordon MacPherson, am over twenty-one (21) years of age. I have never been convicted of a felony, and I am fully competent to make this declaration. I declare the following to be true to the best of my knowledge, information and belief:

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2. IEEE is a neutral third party in this dispute.
3. I am not being compensated for this declaration and IEEE is only being reimbursed for the cost of the article I am certifying.
4. Among my responsibilities as Director Board Governance & IP Operations, I act as a custodian of certain records for IEEE.
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8. The article below has been attached as Exhibit A to this declaration:

A.	Y. Mendelson, R. J. Duckworth, and G. Comtois, “A Wearable Reflectance Pulse Oximeter for Remote Physiological Monitoring”, 2006 International Conference of the IEEE Engineering in Medicine and Biology Society, August 30, 2006 - September 3, 2006.
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9. I obtained a copy of Exhibit A through IEEE Xplore, where it is maintained in the ordinary course of IEEE’s business. Exhibit A is a true and correct copy of the Exhibit, as it existed on or about April 30, 2021.

10. The article and abstract from IEEE Xplore shows the date of publication. IEEE Xplore populates this information using the metadata associated with the publication.
11. Y. Mendelson, R. J. Duckworth, and G. Comtois, "A Wearable Reflectance Pulse Oximeter for Remote Physiological Monitoring" was published in the 2006 International Conference of the IEEE Engineering in Medicine and Biology Society. The 2006 International Conference of the IEEE Engineering in Medicine and Biology Society was held from August 30, 2006 - September 3, 2006. Copies of the conference proceedings were made available no later than the last day of the conference. The article is currently available for public download from the IEEE digital library, IEEE Xplore.
12. I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. § 1001.

I declare under penalty of perjury that the foregoing statements are true and correct.

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Abstract: To save life, casualty care requires that trauma injuries are accurately and expeditiously assessed in the field. This paper describes the initial bench testing of a wireless wearable pulse oximeter developed based on a small forehead mounted sensor. The battery operated device employs a lightweight optical reflectance sensor and incorporates an annular photodetector to reduce power consumption. The system also has short range wireless communication capabilities to transfer arterial oxygen saturation (SpO₂), heart rate (HR), body acceleration, and posture information to a PDA. It has the potential for use in combat casualty care, such as for remote triage, and by first responders, such as firefighters

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Y. Mendelson

Department of Biomedical Engineering, Worcester Polytechnic Institute, Worcester, MA, USA

R. J. Duckworth

Department of Electrical and Computer Engineering, Worcester Polytechnic Institute, Worcester, MA, USA

G. Comtois

Department of Biomedical Engineering, Worcester Polytechnic Institute, Worcester, MA, USA

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I. Introduction

Steady advances in noninvasive physiological sensing, hardware miniaturization, and wireless communication are leading to the development of new wearable technologies that have broad and important implications for civilian and military applications [1]–[2]. For example, the emerging development of compact, low-power, small-size, light-weight, and unobtrusive wearable devices may facilitate remote noninvasive monitoring of vital signs from soldiers during training exercises and combat. Telemetry of physiological information via a short-range wirelessly-linked personal area network can also be useful for firefighters, hazardous material workers, mountain climbers, or emergency first-responders operating in harsh and hazardous environments. The primary goal of this new mobile platform would be to keep track of an injured person's vital signs, thus readily allowing the telemetry of physiological information to medical providers, and support emergency responders in making critical and often life saving decisions in order to expedite rescue operations. Having wearable physiological monitoring could offer far-forward medics numerous advantages, including the ability to determine a casualty's condition remotely without exposing the first responders to increased risks, quickly identifying the severity of injuries especially when the injured are greatly dispersed over large geographical terrains and often out-of-site, and continuously tracking the injured condition until they arrive safely at a medical care facility.

Authors

Y. Mendelson

Department of Biomedical Engineering, Worcester Polytechnic Institute, Worcester, MA, USA

R. J. Duckworth

Department of Electrical and Computer Engineering, Worcester Polytechnic Institute, Worcester, MA, USA

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