DESIGN OF A NON-DISPERSIVE INFRA-RED (NDIR) BASED ${\rm CO_2}$ SENSOR TO DETECT THE HUMAN RESPIRATORY ${\rm CO_2}$

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DEDICATION

This thesis is dedicated to my beloved parents, elder brother, supervisor, lecturers and friends for their countless love, support and huge encouragement and prayers throughout the journey. Furthermore, I would like give my gratitude to my supervisor because this work would not be possible to finish without her constant support.

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ABSTRACT

Respiratory Carbon dioxide (CO₂) contains substantial amount of information that can be used to diagnose and treat pulmonary diseases. Many devices have been developed for this purpose, such as capnography, vital monitor, peak flow meter, spirometer etc. There are many CO₂ sensor are available in the market but among them NDIR based sensors are considered to be most inexpensive with its accuracy in terms of sensitivity and fast response time. There are commonly two types of technology available for detection; mainstream and sidestream. Mainstream technology is preferable than sidestream because sidestream is not applicable in intubated patients and at the same time it tends to give delay in detection due to longer transmission tube. Most of the NDIR CO₂ sensor are being used for the environmental CO₂ detection and there are very few mainstream NDIR based CO₂ sensor are available in the market. These sensor have a vast number of advantages with some disadvantages as well; such as high response time, thermal noise, temperature increase and others. This project proposed the specification of the electrical circuit of the NDIR CO₂ sensor combined with a gas chamber to detect human respiratory CO₂. To determine the specification of the CO₂ sensor circuit, the components value has been calculated and then the circuit design has been carried out by using Multisim Software. The overall CO₂ sensor circuit has six circuit blocks named oscillator, driver circuit, preamplifier, voltage regulator, rectifier, LPF and each of the blocks were built and simulated in the Multisim software. After the simulation the circuit has been built on breadboard to test the output. An IR source from International Light Technologies (ILT) 4115-2A and pyroelectric photodetector L2100X2020 from laser component were used for this project as NDIR components. After the successful simulation from breadboard a gas acquisition cell has been designed to acquire the human CO₂ gas. The design has been done by using Solid Works software and printed from a 3D printing machine. The material used for this chamber was ABS. After placing all the calculated components with the source and detector the output has been observed on the digital oscilloscope as a capnograph wave form showing the voltage range. These waveforms are being used in a capnometer determining respiratory diseases. The circuit shows a response time of 6 second with less noise and the waveform showed clear view of detected CO2 without any temperature increase.

ABSTRAK

Karbon dioksida pernafasan (CO₂) mengandungi banyak maklumat yang dapat digunakan untuk mendiagnosis dan merawat penyakit paru-paru. Banyak peranti telah dibangunkan untuk tujuan ini, seperti capnography, monitor penting, meter aliran puncak, spirometer dan sebagainya. Terdapat banyak sensor CO2 yang terdapat di pasaran tetapi di antara mereka sensor berdasarkan NDIR dianggap paling murah dengan ketepatannya dari segi sensitiviti dan masa tindak balas yang cepat. Terdapat dua jenis teknologi yang sedia ada untuk pengesanan; arus perdana dan sidestream. Teknologi arus perdana lebih baik daripada sidestream kerana sidestream tidak boleh digunakan dalam pesakit yang diintubasi dan pada masa yang sama ia cenderung memberi keterlambatan pengesanan kerana tiub transmisi yang lebih lama. Kebanyakan sensor NDIR CO2 digunakan untuk pengesanan CO2 alam sekitar dan terdapat sangat sedikit aliran utama NDIR sensor CO2 yang terdapat di pasaran. Sensor ini mempunyai sejumlah kelebihan dengan beberapa keburukan juga; seperti masa tindak balas yang tinggi, bunyi terma, kenaikan suhu dan lain-lain. Projek ini mencadangkan spesifikasi litar elektrik sensor NDIR CO2 yang digabungkan dengan ruang gas untuk mengesan CO2 pernafasan manusia. Untuk menentukan spesifikasi litar sensor CO₂, nilai komponen telah dikira dan kemudian reka bentuk litar telah dijalankan dengan menggunakan Perisian Multisim. Litar sensor CO₂ keseluruhan mempunyai enam blok litar yang dinamakan pengayun, litar pemacu, preamplifier, pengawal selia voltan, penerus, LPF dan setiap blok dibina dan disimulasikan dalam perisian Multisim. Selepas simulasi litar telah dibina di atas papan roti untuk menguji output. Satu sumber IR dari International Light Technologies (ILT) 4115-2A dan photodetector pyroelectric L2100X2020 dari komponen laser telah digunakan untuk projek ini sebagai komponen NDIR. Selepas simulasi yang berjaya dari papan roti sel pengambilalihan gas telah direka untuk memperoleh gas CO₂ manusia. Reka bentuk telah dilakukan dengan menggunakan perisian Solid Works dan dicetak dari mesin pencetak 3D. Bahan yang digunakan untuk ruangan ini adalah ABS. Selepas meletakkan semua komponen yang dikira dengan sumber dan pengesan output telah diperhatikan pada osiloskop digital sebagai bentuk gelombang capnograf yang menunjukkan julat voltan. Bentuk gelombang ini digunakan dalam capnometer yang menentukan penyakit pernafasan. Litar ini menunjukkan masa tindak balas 6 second dengan bunyi kurang dan bentuk gelombang menunjukkan paparan jelas CO₂ yang dikesan tanpa peningkatan suhu.

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LIST OF ABBREVIATIONS

CO₂ - Carbon Dioxide

MIR - Mid Infrared

LED - Light emitting diode

NDIR - Non-dispersive infra-red

Volt - Voltage

ICU - Intensive care unit

CAD - Computer Aided Design

3D - Three-Dimensional

UTM - Universiti Teknologi Malaysia

PWM - Pulse Width Modulation

ANN - Artificial Neural Network

UART - Universal Asynchronous Receiver/Transmitter.

PPM - Parts per meter

COPD - Chronic obstructive pulmonary disease

DSO - Digital signal oscilloscope

DC - Direct current

LPF - Low pass filter

HPF - High pass filter

BPF - Band pass filter

ILT - International Light Technologies

ABS - Acrylonitrile butadiene styrene

CM - Current Mode

VM - Voltage Mode

IR - Infrared

O₂ - Oxygen

Cm - Centimetre

mA - Milliamps

mm - Millimetre

mV - Millivolt

mW - Milliwatt

ms - Millisecond

mHz - Milli Hertz

Hz - Hertz

L - Length

D - Diameter

C - Concentration

A - Absorbance

I - Intensity of light striking the photodetector

 I_0 - Intensity of light of an empty sample chamber

 μF - Micro Farad

nF - Nano Farad

GND - Ground

 V_{in} - Input Voltage

Vo - Voltage

VCC - Positive Supply Voltage

VEE - Negative supply Voltage

F_c - Cut off frequency

N - No

Y - Yes

NS - Not specified

LIST OF SYMBOLS

α - Molar absorption co-efficient

 μ - Micro

 Ω - Ohm

 Π - pi

 λ - Lamda

± - Plus minus sign

 \leq Less than or equal to

 \geq - Greater than or equal to

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CHAPTER 1

INTRODUCTION

This chapter highlights the introduction to the topic related to respiratory CO₂ including discussion on the statement of the problem, the objectives of this research, the scope of this research work and its significance and finally the thesis organization.

1.1 Background of the Study

The goal of the research is to design a 'Non-Dispersive Infra-Red (NDIR) based CO₂ Sensor to Detect Human respiratory CO₂'. There are different designs had been done and tested for CO₂ sensor. It is very important to choose the right design and components for building a CO₂ sensor for medical application. In NDIR based design, the selection of source, detector, design of gas chamber and the material selection of the gas chamber plays vital role to get the correct output of the sensor device. In this design, the components were selected in a manner to detect the CO₂ gas correctly. NDIR based sensors considered to be most inexpensive with high accuracy therefore this technology were preferable to design a new sensor with this technology. This design can be considered as a novel gas sensor because the specified circuit design and the selected electronic components used in this design had not been used by any other researcher to implement NDIR sensor.

Respiration is an important physiological process which can maintain the vital signs of people stability. Respiratory diseases, such as asthma, chronic rhinosinusitis, bronchiectasis and obstructive sleep apnea are widely prevalent all around the world. To effectively and accurately assess cardio respiratory functions, respiratory monitoring is the key component during the administration of respiratory diseases and intensive care unit [7, 8]. In this work, the designing section of the NDIR sensor is focused which can be used for detecting CO₂ gas only called single channel CO₂ sensor. The concentration of gas in normal exhaled human breath is around 35,000

ppm to 50,000 ppm, which is corresponds to a sea level partial pressure of 26.6 to 38.0 mmHg. It is roughly a factor of 100, higher concentration between inspiration and expiration and CO₂ gas is fairly straight forward to measure [9].

In this work, the sensor circuit designed with mainstream system where the sensor can directly detect the gas and pass it for further processing. Typically, the main components of NDIR are infrared sources (lamps), sample chambers (or light tubes), wavelength filters, and infrared detectors [5]. An infrared ray is radiated onto the respiratory gas from a light-emitting element. A Voltage corresponding to the amount of light which is absorbed by CO₂ contained in the respiratory gas is detected by a light-receiving element, thus detecting the CO₂ [12].

1.2 Problem Statement

Many optical sensor offer high resolution, but can be very expensive depending on the quality of the light source, optical system and the detector used [13]. Most of the NDIR sensors are made for industrial use or environmental CO₂ detection and that is not suitable for respiratory CO₂ detection. As the CO₂ sensors are also being used in medical device therefore NDIR sensors are preferable for medical devices due to its reliable results and a lot of researches are going on this topic. There are two types of technology for detection, one is mainstream and another one is sidestream. Mainstream technology considered better than sidestream technology due to its sensitivity, high response time, no samples removed from breathing circuit and compatibility with intubated patients. Sidestream technology is not applicable to intubated patients and there is huge possibility of tube clogging and delaying of the delivery of CO₂ to sensor location [14]. The NDIR based mainstream CO₂ sensors are not widely available in the market and the available sensors have number of disadvantages likely delay in output, high initializing time, high warm-up time, temperature increase and most importantly noise.

To overcome the problems related to NDIR sensors this study is proposing an electrical design of sensor that is capable to detect the CO₂ using mainstream technology and can be used in any device for respiratory CO₂ detection in future.

Most of the NDIR sensor shows temperature increase due to the thermal detector. To overcome that problem this study is proposing the design along with the component selection which is capable to show less noisy waveform without any physical temperature increase.

For NDIR technique the gas chamber plays a vital role, with the gas chamber the detection of respiratory gas is more accurate. The researches under NDIR spectroscopy poses number of limitations due to the gas chamber. Some of them are having a longer path length or very complex pathlength and also material is another issue related to gas chamber. Complex path length gives incorrect output with delay in detection. Therefore this study is proposing a design of gas chamber which is easy to construct with simple detection pathlength that may overcome the problem related to gas chamber.

1.3 Objectives

The objectives of this proposed work are-

- 1. To develop an electrical circuit and to simulate circuit diagram of NDIR based CO₂ sensor using Multisim software
- 2. To build the circuit in breadboard to test the output of the NDIR CO₂ sensor
- 3. To design the absorption gas chamber for detection of respiratory CO₂

1.4 Scope of Study

The assessment of this sensor circuit is focus on only CO₂ gas detection because this gas is mostly used in the medical devices for monitoring and diagnosing

the respiratory diseases. This type of sensors are typically called single channel CO₂ sensor. Single channel sensors are simple and gives results with accuracy. The detector is compiled with TFC therefore the circuit doesn't show ant temperature increase during detection and because of current mood model, the output remain stable with low noise. In this study, the circuit designs has been done by using Multisim software and the gas chamber design by using solid works software. The output from the breadboard has been received and observed from the DSO which comes in voltage range. This is the typical output range of any CO₂ sensor available in the market. Though this sensor circuit gives result with accuracy as it is using a single channel detector and a source with exactly 4.26µm radiation output but still this study poses number of limitations. The output has been traced directly from breadboard where it poses unnecessary noisy signal. For this very advanced signal processing required and a PCB is required to have a robust circuit and stable output. On the other hand, the length of the gas chamber may give delay due to longer pathlength and also the material can be replaced with metal or a reflective pathlength may allow the radiation to reflect more. In this work, the gas chamber has been done with ABS and without any reflective path therefore there is no additional reflection inside the pathlength.

1.5 Significance of the Study

The need for this research is raised because in order to develop a medical device (capnometer) the selection of CO₂ sensor is very important as it needs to be appropriate with the application, monetary value, accuracy, and sensitivity. This proposed research will contribute to the existing knowledge significantly and would play a pivotal role in making better human respiratory CO₂ sensor. This project proposed an electrical circuit design of a sensor based on NDIR spectroscopy technique because it is considered to be very low cost but very sensitive with respect to other available sensors. The use of infrared technology in this study will improve the detection of CO₂ gas. Now a days the infrared technology is the most popular studies and this study is also based on it because of it reliable results. In this study, a Pyroelectric photo detector will be used which has a built in optical filter that blocks all the infrared except the radiation of 4.26 μm which is the most useful wave length to detect the CO₂ gas. The application L2100X2020 on NDIR spectroscopy will reduce

the thermal noise in a great extent. Because this detector is integrated with TFC which reduces the noise and attenuates the tendency towards natural oscillation with longer amplification. The detection of CO₂ gas reveals the problem associated with heart or lung, CO₂ gas detection is also needed during emergency monitoring and delivering the anaesthesia [24, 25].

1.6 Thesis organization

This thesis consists of 5 chapters. Chapter 1 is an introductory chapter. It presents the background of the study, problem statement, objectives, scope and significance of this research work.

Chapter 2 is literature review and provides brief reviews to the number of topics. Existing CO₂ sensors, explanation of NDIR gas sensors and summary of the studies related to NDIR technique and the materials for gas cell has been carried out extensively, emphasizing on the finding as well as their limitations.

In Chapter 3, the circuit design used to achieve the aforesaid objectives has been described in detail ranging from designing hardware to software as well as from designing project PCB to gas acquisition chamber.

Results and their discussion obtained through this research project have been carried out in Chapter 4.

Conclusively in Chapter 5 summary of the whole work is given including the recommendation for the further research has been presented briefly.

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