

Modeling Diabetes in KIV

Observations & Experiences
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Status

- Plans done, except list stuff
 - approx. 5 pieces
- Data abstraction to be done

Implementation Decisions

- Only user-performed plans share file with others
 - 43 Files = 43 plans + 16 user-performed
- Obligatory plan state propagation
- Nearly all variables are in patient record

Plan Ordering - Distribution [1/2]

- sequentially
 - wait for all (22)
 - wait for one, and optional subplans (1)
 - wait for 1 certain child, and optional subplans (5)
- any-order
 - wait for all (7)
 - wait for one (4)

Plan Ordering - Distribution [2/2]

- parallel
 - wait for none (1)
- unordered
 - wait for 1 certain child
 - retry aborted subplans (1)
 - do not retry aborted subplans (1)
 - wait for none (1)
- on-abort (1)

Automation - done [1/2]

- Transformation XML -> List notation
 - more potential for compression
- Based on <ask>
 - variables
 - ask-statement incl. assignment to patient data

Automation - done [2/2]

- Based on <plan-schema>
 - enrich-statement
 - invocation
 - plan states of called plans
- Based on <plan>
 - enrich-statement & start new file
 - procedures-statement
 - plan states

Automation - undone

- User-performed plans
 - too trivial
- Conditions
 - need tree logic
- Plan state propagation
 - problem: nesting
- Correct sequence
 - needs more sophisticated internal storage

Open Issues

- Wait for all with ask
 - ask is completed is implicit
 - do asks
 - do subplans (setting state variables)
 - compare state variables at the end
 - if ask is interrupted, you don't get there
 - ask in any-order - when terminate?