

Search & Rescue 2012 Mobile and stationary Map Interaction in MCIs

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SpeedUp

- **Investigation of mobile and self-organizing communication and data platforms and of strategies for organization and action in complex, large-scale situations.**
- **Multiple partners:**
 - **Companies: Navimatix (Maps), Ageto (Administration), Agilion (Indoor Tracking)**
 - **Universities: TUM (UI), Friedrich Schiller Universität Jena (Psychologic background, self organizing communications)**
 - **Target Group: Feuerwehr TUM, Arbeiter-Samariter-Bund Munich, Stralsund Rettungsdienst**

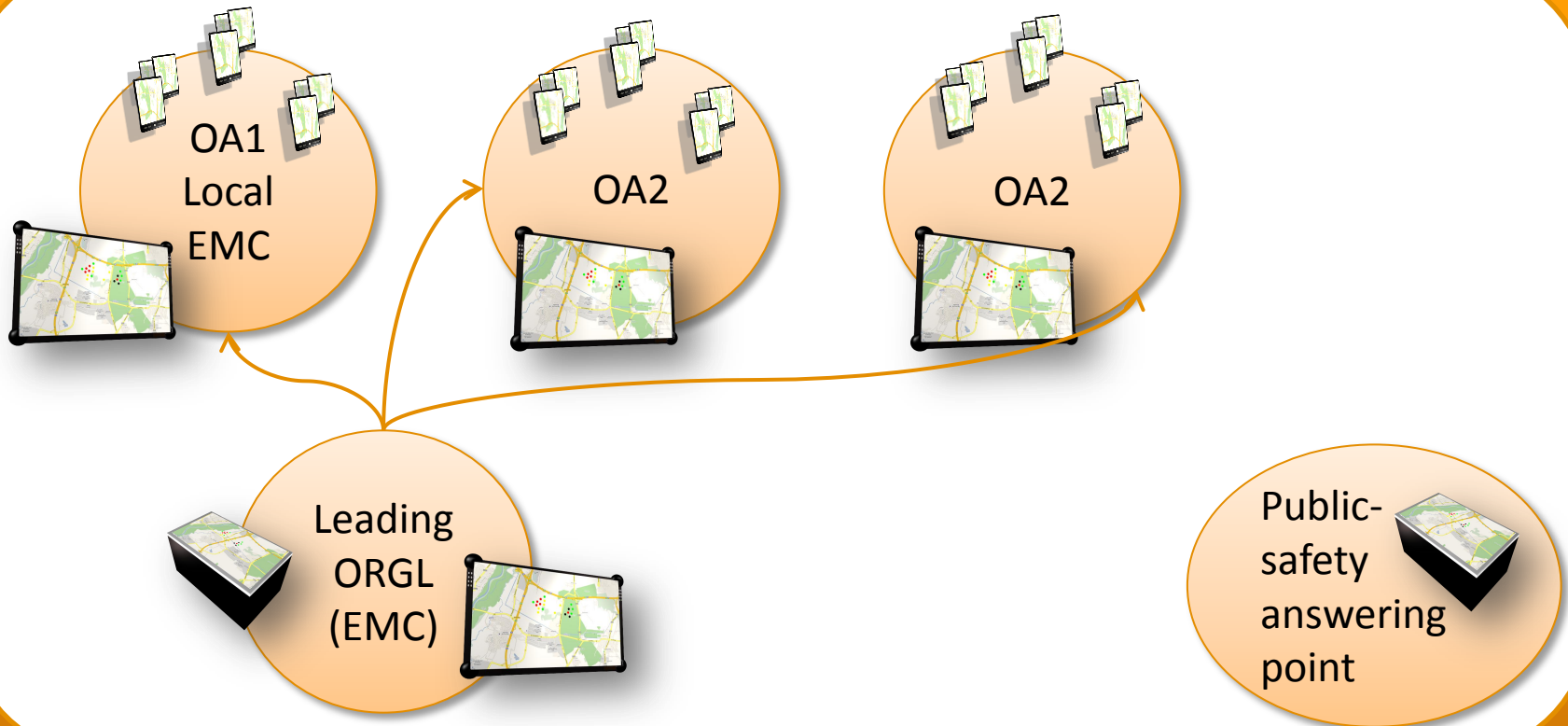


Mass Casualty Incident (MCI)

- **MCI** = An incident in which **more injured people** exist **than local rescue resources** are available
- => Rescue personnel performs **triage algorithm** to determine patient priorities
- The **Emergency Medical Chief (EMC)** leads the rescue process
- Goal of the **project**: speed up the overall rescue process
- Goal of **TUM**: user-centered development of an intuitive, efficient and ergonomic User Interface to do so

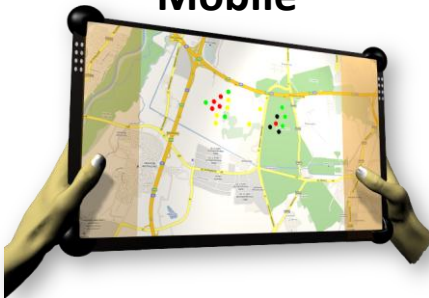


Which role uses which device



Map Interaction

Mobile

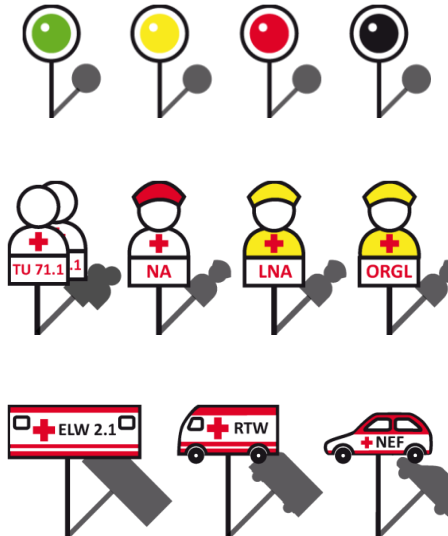


Stationary



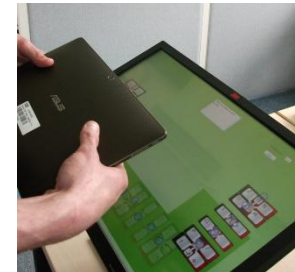
Map Visualisation

Both



Text Input

Mobile

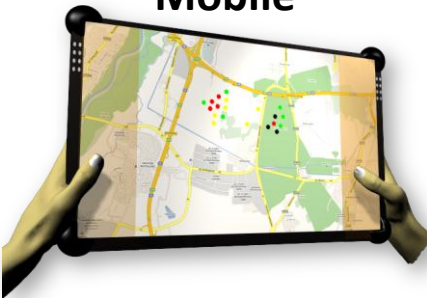


Stationary



Map Interaction

Mobile

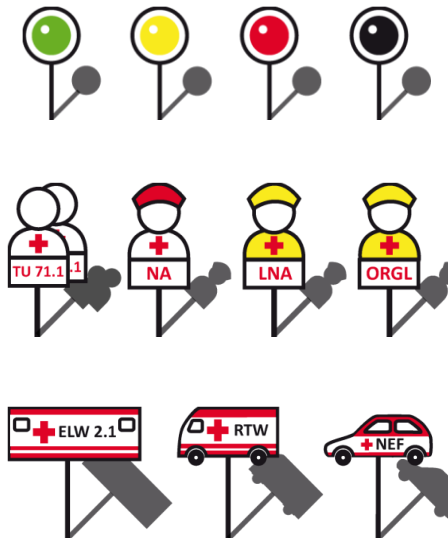


Stationary



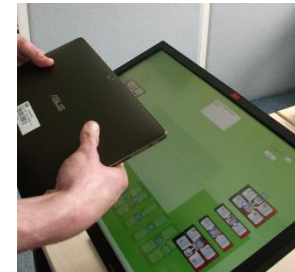
Map Visualisation

Both



Text Input

Mobile



Stationary



Collect Requirements

Literature Research

Iterative Interviews

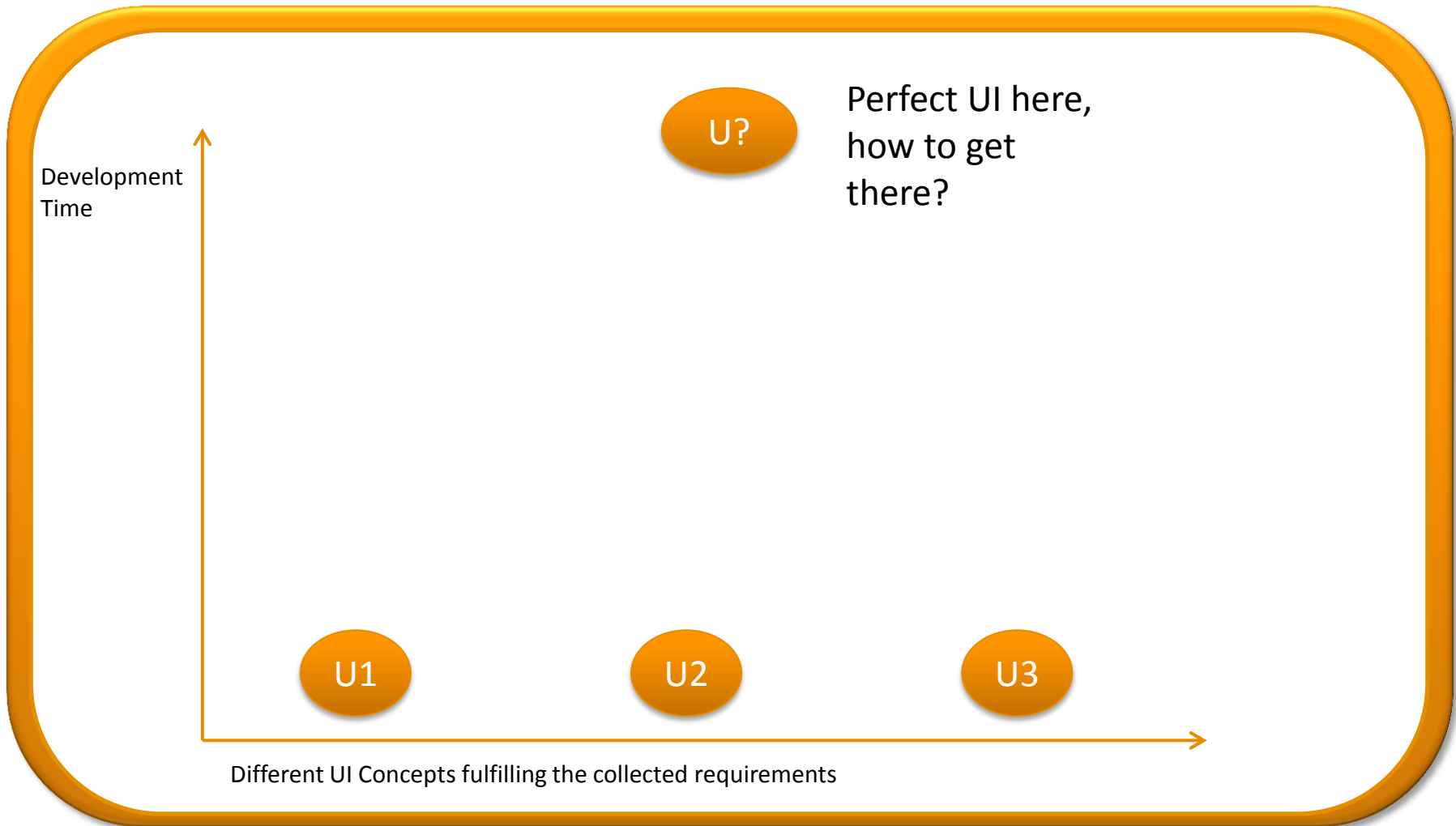
Develop Different Concepts/Alternatives

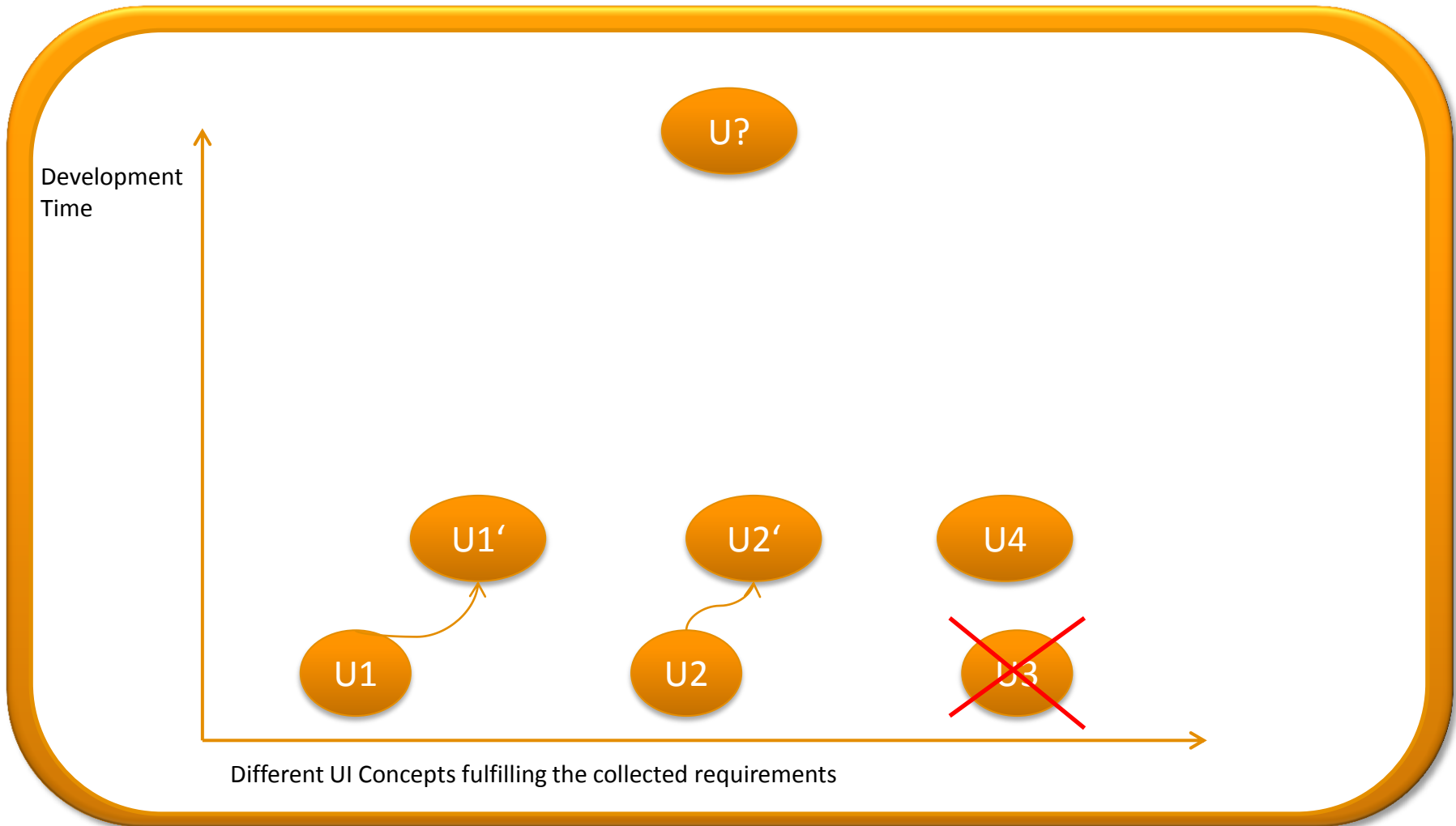
Evaluate each Alternative

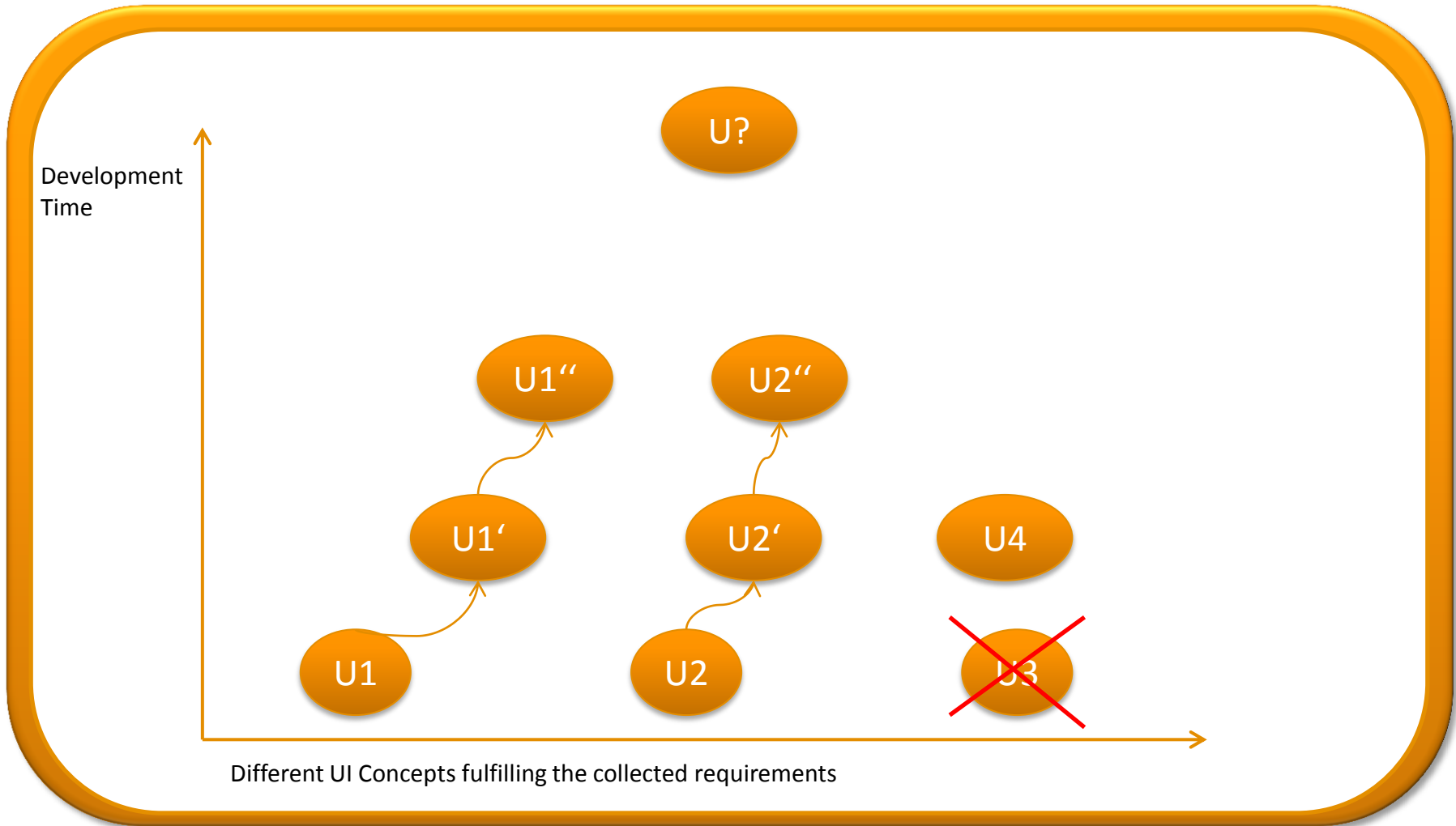
Select, Improve and/or Create New Alternatives

Common evaluation settings

- Within-subject
- 4 to 8 test users according to Nielsen*
- Define evaluation tasks
- Evaluate Usability with **SUS**
- Evaluate Attractivity with **AttrakDiff**
- Evaluate affordance with **NASA-TLX**
- Conduct qualitative interviews

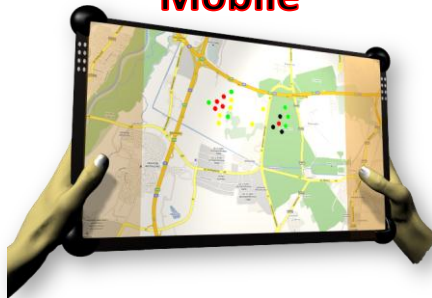






Map Interaction

Mobile



Stationary

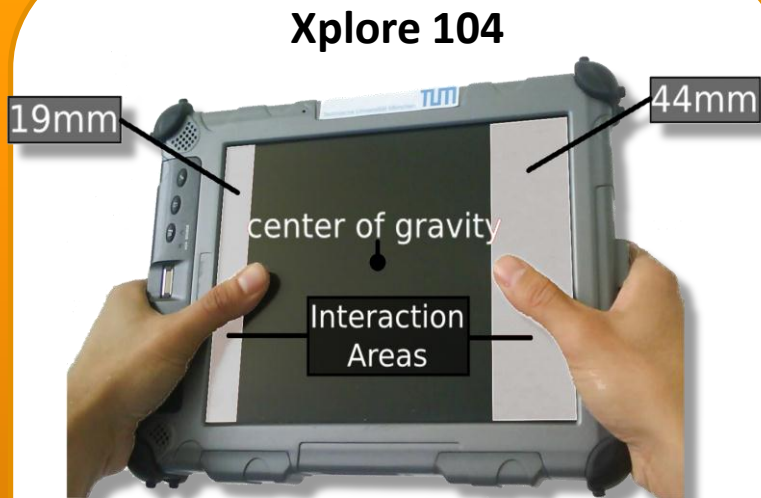


Map Visualisation

Both

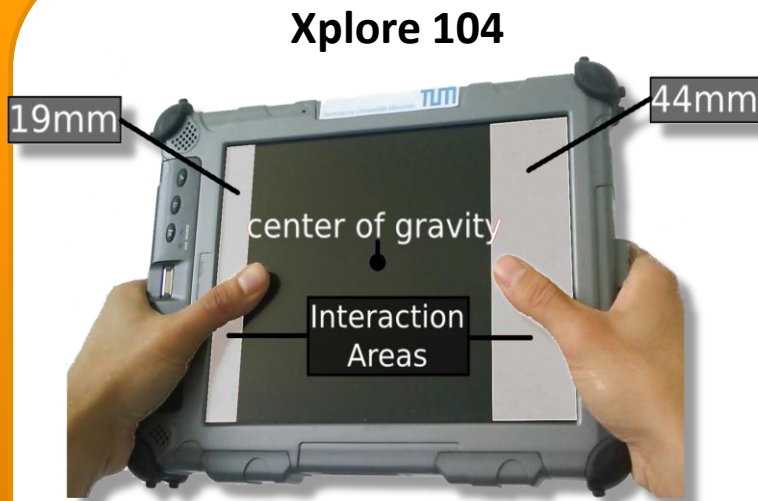


Requirements / Challenges



- Has been used by the Fire Department TUM
- Ruggedized Tablet
- Fulfills IP 55 (DIN EN 60529)
- **Weight of 2.38kg**
- Resistive Display
- Asymmetric Borders

Requirements / Challenges



Fire fighters asked us to develop an UI which allows the user to hold the device in both hands while interacting with it

- ⇒ Indirect interaction
- ⇒ „Fat-Finger“ problem
- ⇒ Less sensible touch screen



Conclusion

- Free interaction faster
- Border interaction more comfortable

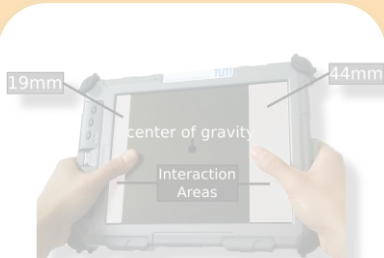
User-Centered Comparison between Classical and Edge Interaction on a Heavy Rugged Tablet PC used in MCIs – GMDS 2012 / Informatik 2012; *Gel Han, Tayfur Coskun, Eva Artinger, Amal Benzina, Gudrun Klinker*

Comparison: Free Interaction vs. Border Interaction

IT Rettung 2012



Border Interaction



Selection

1st Iteration

- A) Red Line
- B) Selection Square
- C) Auto Mapping

Mocomed 2010

2nd Iteration

- A) Red Bar
- B) Selection Square
- C) Auto Mapping

IHI 2012

Zooming

1st Iteration

- A) Buttons
- B) Slider

Mocomed 2010

Scrolling

1st Iteration

- A) Minimap
- B) Joystick
- C) ~~Arrows~~

IT Rettung 2010

2nd Iteration

- A) Minimap 2.0
- B) Radarjoystick 2.0

IT Rettung 2012



2nd Iteration

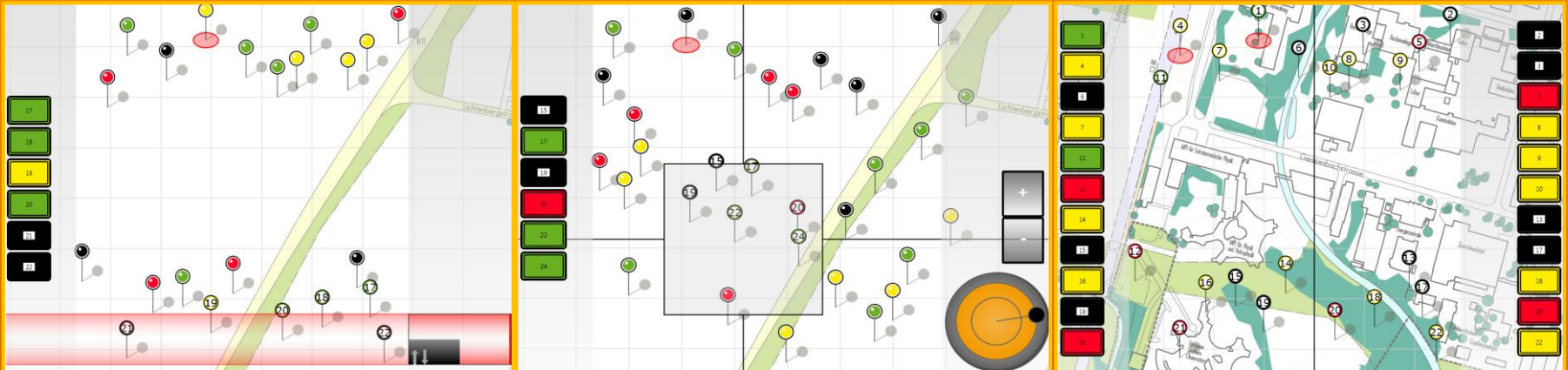
- A) Red Bar
- B) Selection Square
- C) Auto Mapping

Selecting

International Health 2012 – Florida, Miami

T. Coskun, A. Benzina, E. Artinger, C. Binder, G. Klinker

User-Centered Development Of UI Elements for Selecting Items on a Digital Map Designed for Heavy Rugged Tablet PCs in Mass Casualty Incidents



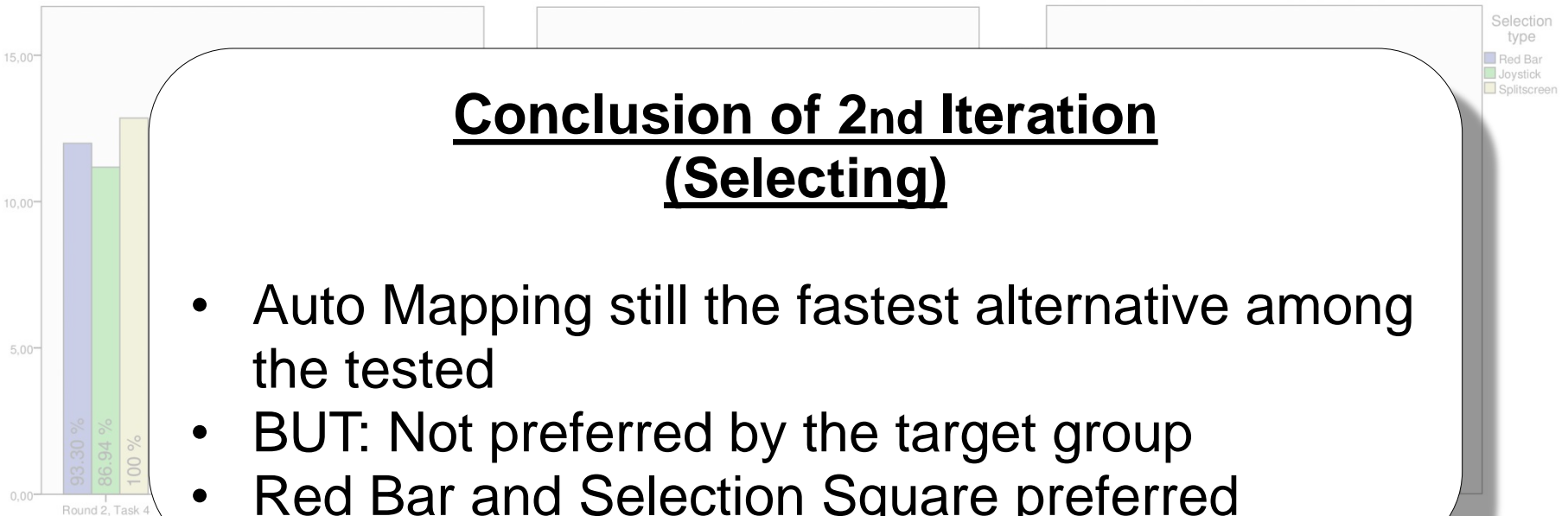


Conclusion of 2nd Iteration (Selecting)

- Auto Mapping still the fastest alternative among the tested
- BUT: Not preferred by the target group
- Red Bar and Selection Square preferred

Selection type

Red Bar
Joystick
Splitscreen



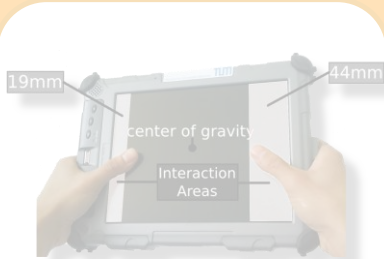
Strongly Distributed Patients

Less Distributed Patients

Speed per Round



Border Requirement



Selection

1st Iteration

- A) Red Line
- B) Selection Square
- C) Auto Mapping

Mocomed 2010

2nd Iteration

- A) Red Bar
- B) Selection Square
- C) Auto Mapping

IHI 2012

Zoom

1st Iteration

- A) Buttons
- B) Slider

Mocomed 2010

Scroll

1st Iteration

- A) Minimap
- B) Joystick
- C) ~~Arrows~~

IT Rettung 2010

2nd Iteration

- A) Minimap 2.0
- B) Radarjoystick 2.0

IT Rettung 2012

2nd Iteration

- A) Minimap 2.0
- B) Radarjoystick 2.0

Scrolling

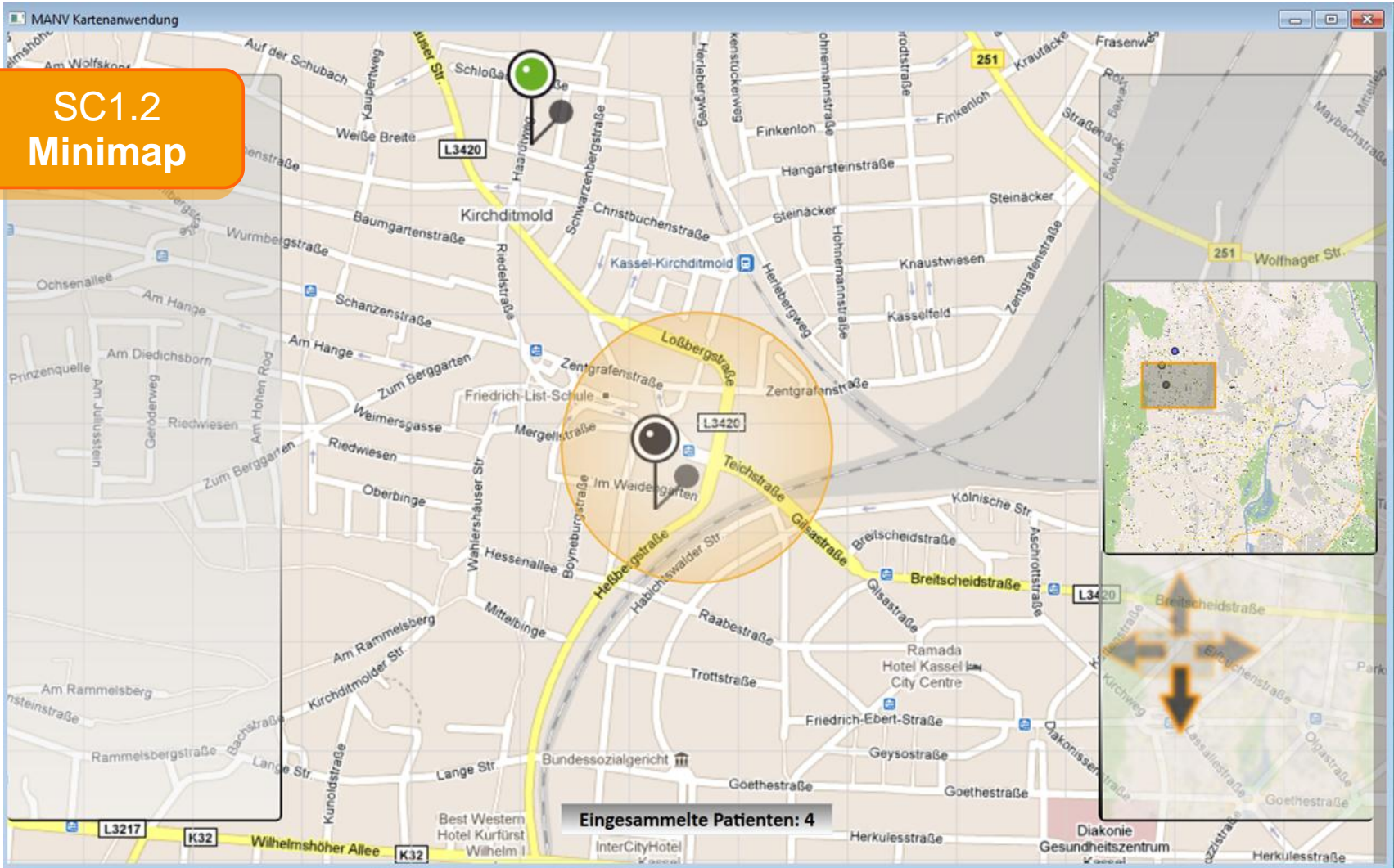
IT Unterstützung 2012 - Braunschweig

T. Coskun, C. Grill, A. Benzina, E. Artinger, G. Klinker

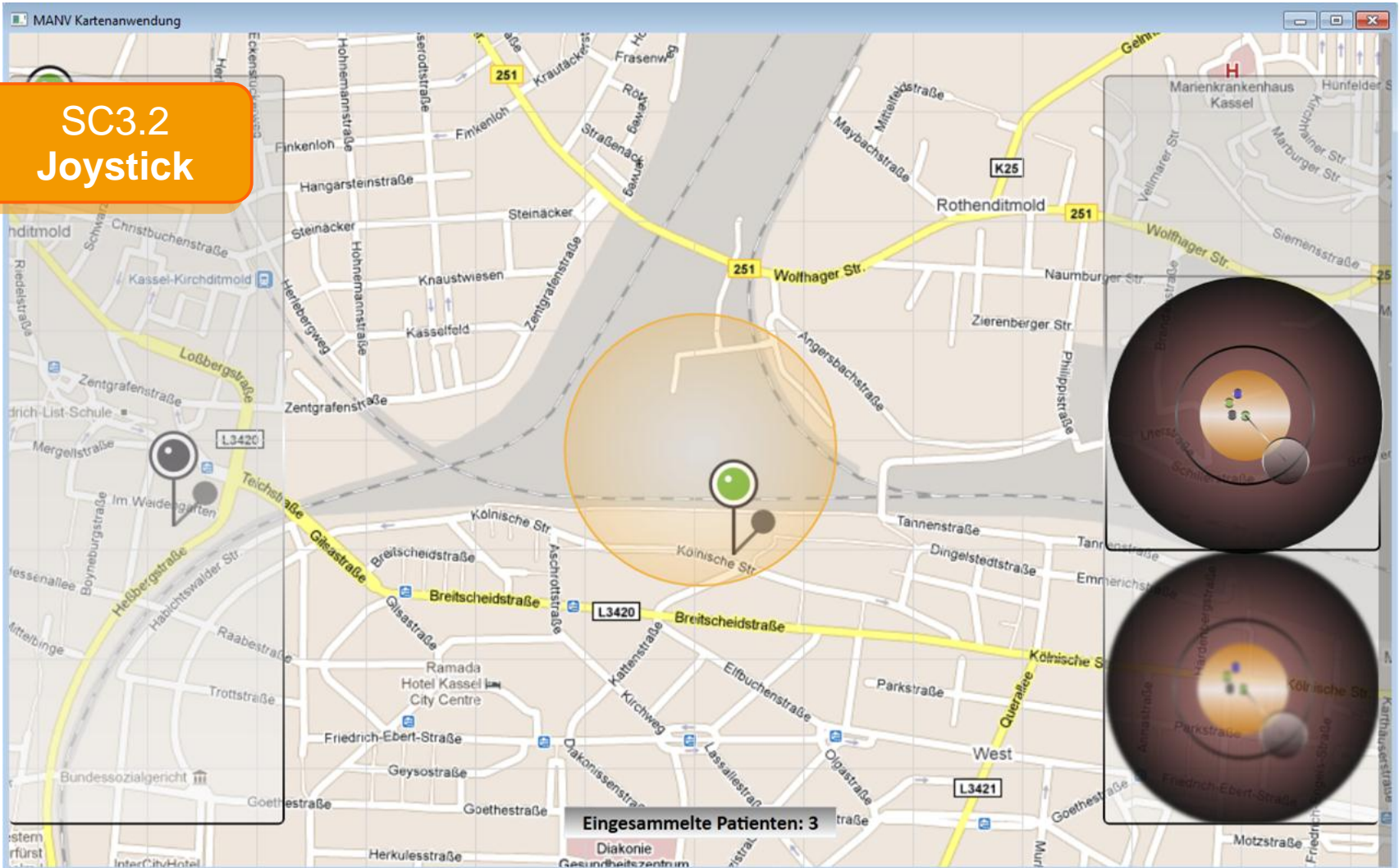
How-to Interact with a Map Application on a Heavy Rugged Tablet PC when Both Hands are Needed to Hold the Device

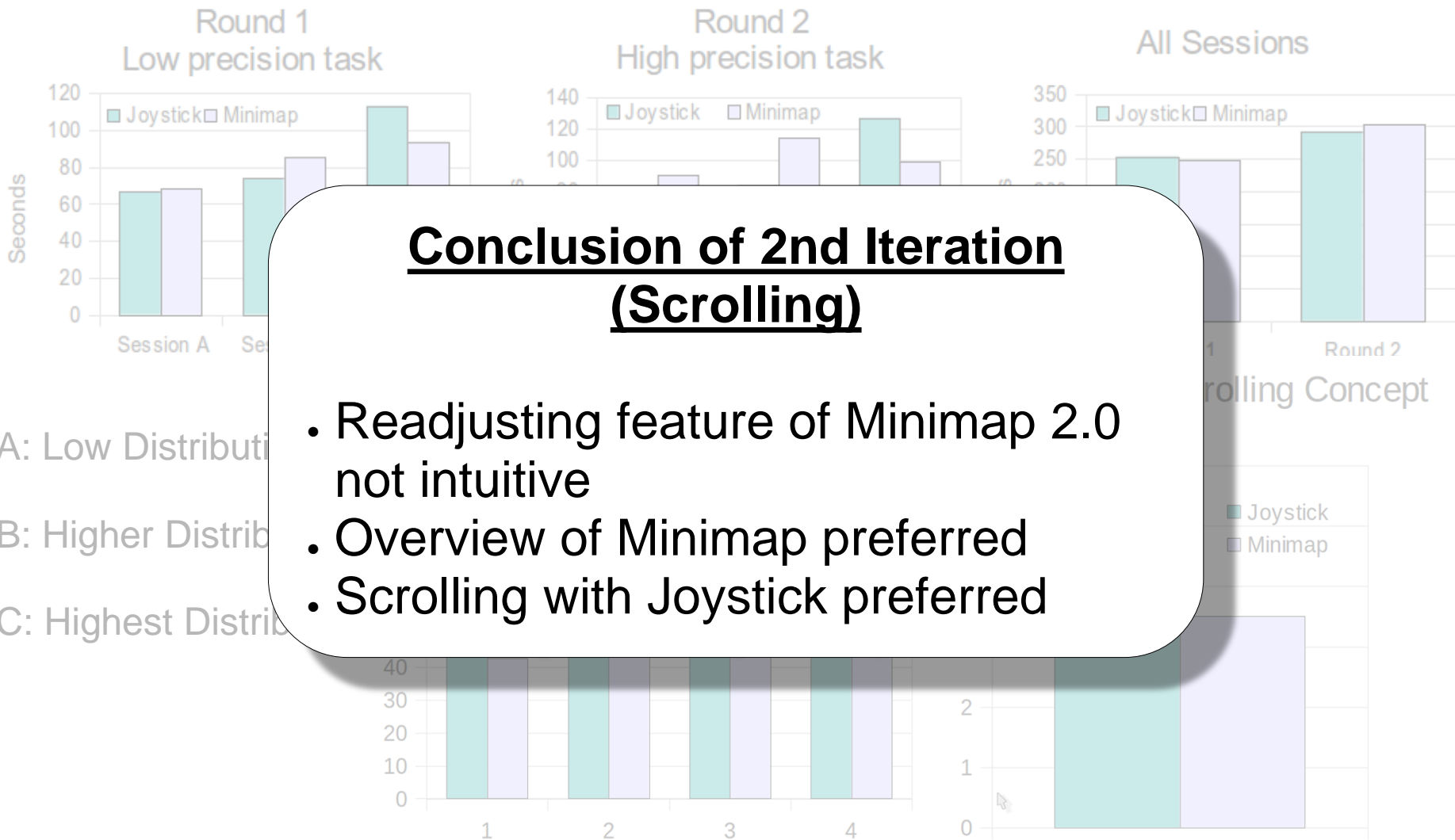


SC1.2
Minimap



SC3.2 Joystick





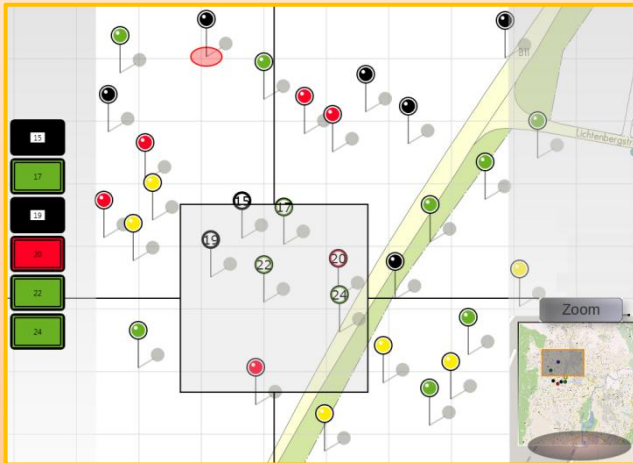
Conclusion of 2nd Iteration
(Scrolling)

- Readjusting feature of Minimap 2.0 not intuitive
- Overview of Minimap preferred
- Scrolling with Joystick preferred

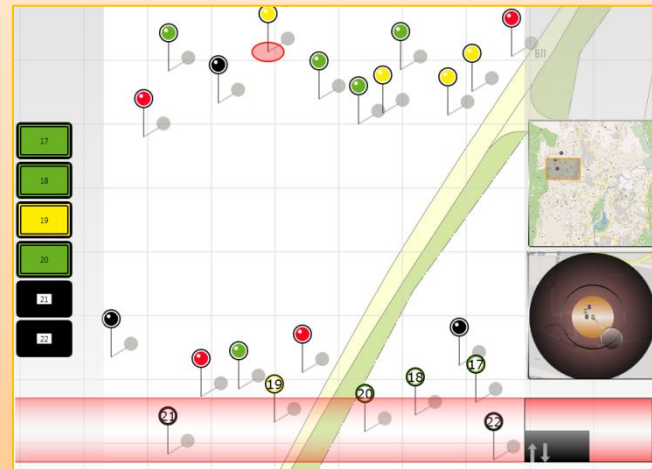


3rd Iteration

A) Combination of all three metaphors in one UI element



B) Choose „best“ concept for each feature



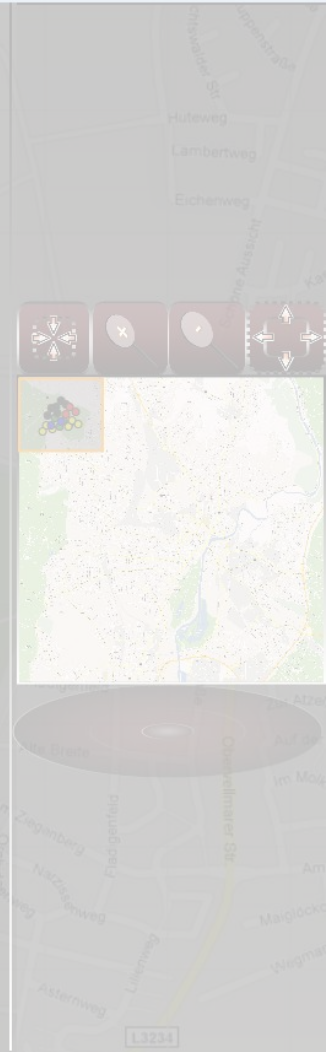


Advantages

- + Saves rare interaction space
- + Right hand does not need to move up and down, everything can be reached with the thumb
- + No Dual-Mode of the minimap

Disadvantages

- Might increase complexity



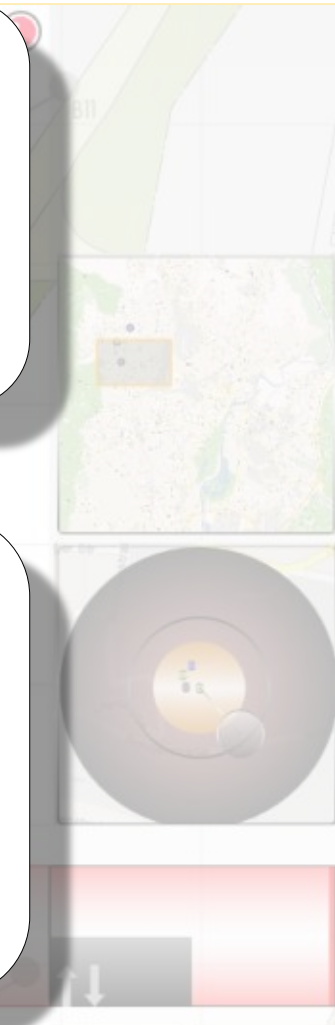


Advantages

+ One UI element for each action reduces complexity

Disadvantages

- Uses a lot of rare screen space
- Hands have to move up and down to reach the desired element





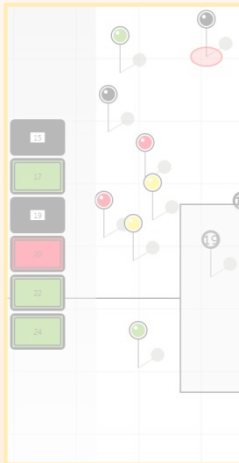
3rd Iteration

A) Combination of all three metaphors i

B) Choose „best“ concept for

Conclusion of 3rd Iteration (Including selecting, scrolling and zooming)

- B) preferred because of less complexity





Steps in this Iteration

1. Introduce and discuss the core idea with the target group
2. Collect feedback / Enhance core concept
3. Implement digital triage application version with and without FoT
4. Evaluate it with the target group and compare both versions to each other

Patienten an aktueller position hinzufügen

Neuen Patienten an beliebigem Punkt hinzufügen

Karte zentrieren

„Gel aufdecken“-Modus AUS

Letztes Aufdecken rückgängig



The screenshot shows a mobile application interface. At the top left is the TUM logo and the text 'Fog of Triage'. At the top right is the text 'MENÜLEISTE AUSBLENDEN'. Below this is a map area. On the right side, there is a menu with the following items: 'Hinzugefügt in den letzten' followed by a slider set to '5 Min.' with '-' and '+' buttons; 'Patienten an aktueller position hinzufügen'; 'neuen Patienten an beliebigem Punkt hinzufügen'; 'Karte zentrieren'; 'Auffdecken"-Modus AUS'; and 'letztes Aufdecken rückgängig'. At the bottom left is the 'Google' logo, and at the bottom right is the time '14:25' along with status icons for signal, Wi-Fi, and battery.

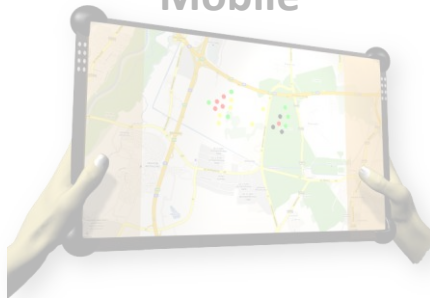
Conclusion of 1st Iteration (FoT)

- No significant difference in SUS
- No significant difference in speed (in our setup)
- 4 out of 6 test users would prefer FoT



Map Interaction

Mobile



Stationary



Map Visualisation

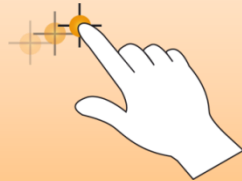
Both





2D Gestures – 1st Iteration

Scrolling



Zooming + Rotating



2-5 fingers

Selecting



hold

tap

IT Unterstützung 2011

3D Gestures – 2nd Iteration

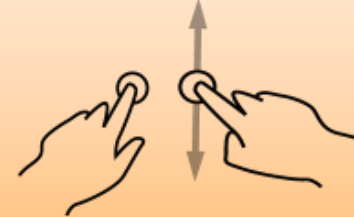
Drag



Scaling + Rotating



Depth gestures





General Gesture Overview

- Review of 59 scientific publications
- Analysis of 420 gestures with 57 different actions
- Website: <http://campar.in.tum.de/personal/abrek/index.html>



This image is used under Creative Commons by [Mike Gerhardt](#)

You can touch this!

Multi-touch has become a common interaction technique for computer systems. Smart phones, table tops and multi-touch tables are only few devices that support this technique. Today, multi-touch is everywhere. Because of the wide range of gestures and their diverse mappings to different tasks, it can often be difficult for users and system designers to keep track. This website was created in addition to a bachelor thesis. Goal is to provide an extensive overview of the gestures that are used today and to present the results of the research.

[Browse Gestures >](#)

History

Touch interaction may be popular only since a few years, but surely it has been around quite a while. There is a long history behind this technology, which can be found today almost anywhere, from ticketing machines to smart phones. Bill Buxton is one of the pioneers of multi-touch. He has summarized the history of touch, which you can also find on his website.

[Learn More >](#)

Links

Many websites provide extensive information about multi-touch. Under the link section you can find the bachelor thesis and the gesture overview as a PDF file. You can find also further papers, books, websites and other information about multi-touch here.

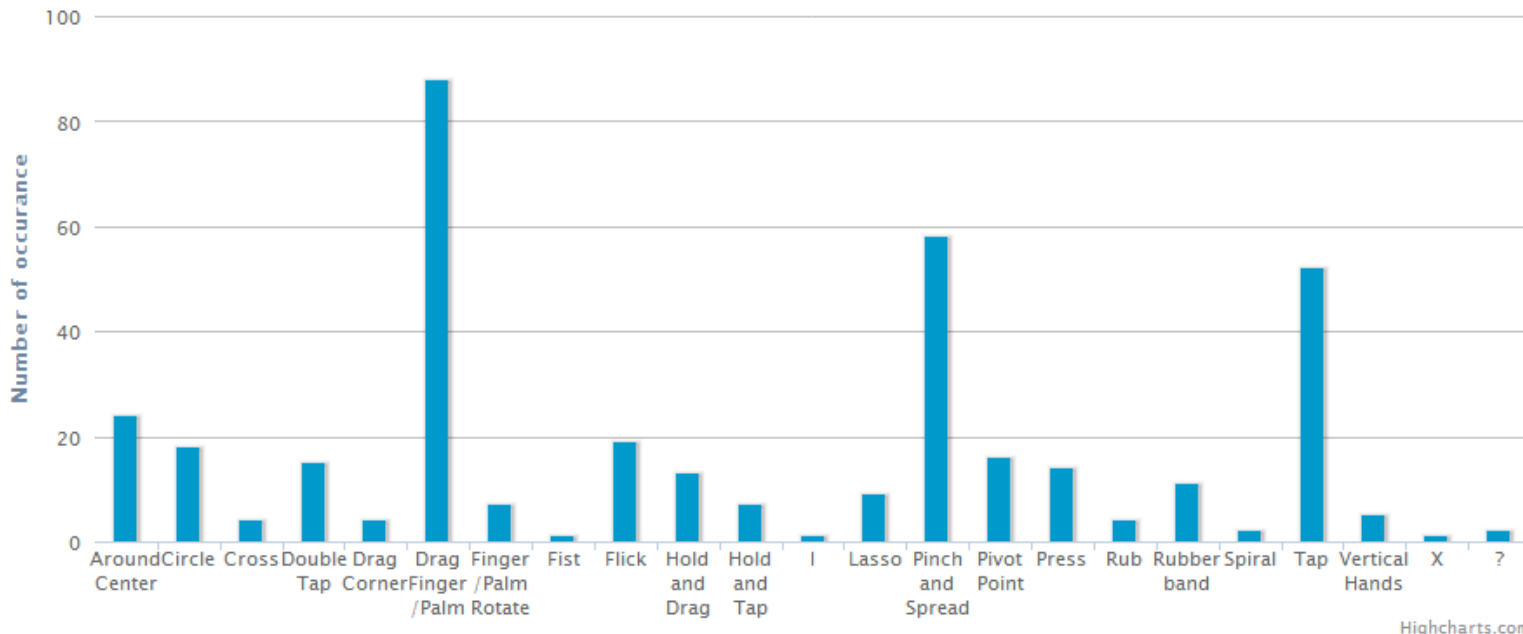
[Learn More >](#)



Gesture Analysis

Goal of the gesture analysis was to collect gestures from selected papers and determine their use rates and the actions they are most often associated with. Overall, 59 academic publications were reviewed. 420 gestures and 57 different actions were analyzed. We created an overview with the gestures that appeared at least two times for the basic tasks selecting, navigating, zooming and rotating. Additionally, gestures for special tasks were listed. The table can be filtered for a gesture or an action. The graph below shows how often gestures appeared in our analysis. Here you can find the [list of publications](#).

Gesture Occurance in 59 paper



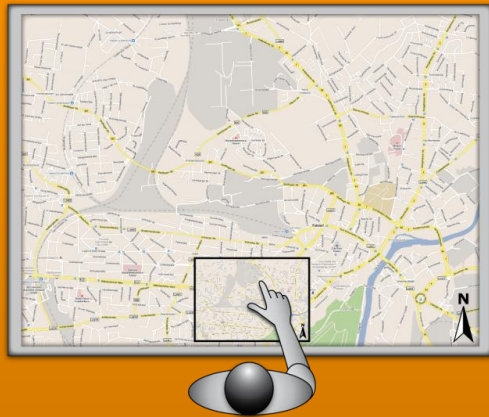
Select Gesture	Action	Description	Graphic
Select <input type="text" value="Select"/>	Select <input type="text" value="Select"/>		



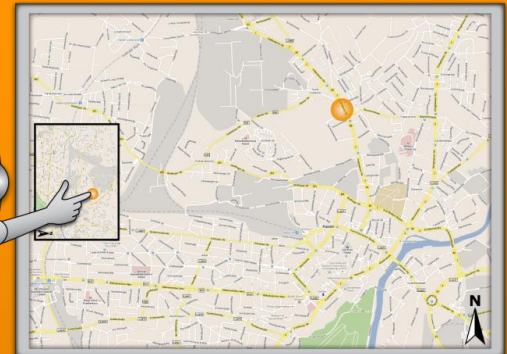
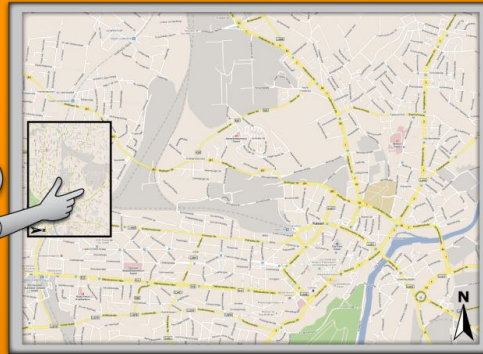
Help to interact with a large scale multi-touch device (surface) in difficult orientations

90° without help

90° with touch point

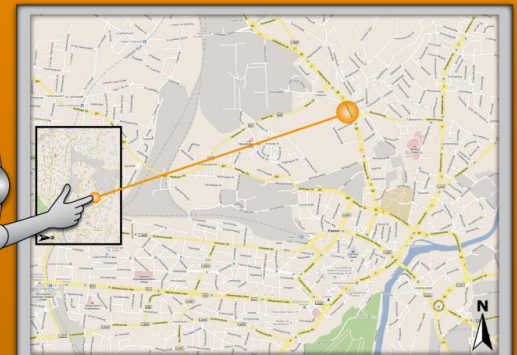
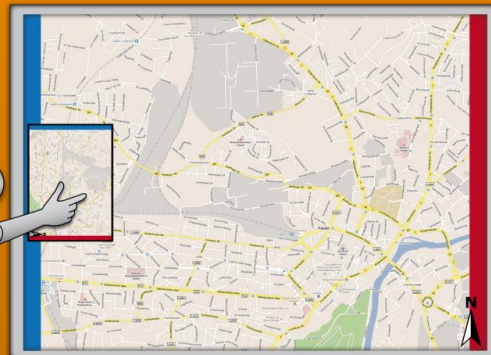


Default 0°



90° with coloured borders

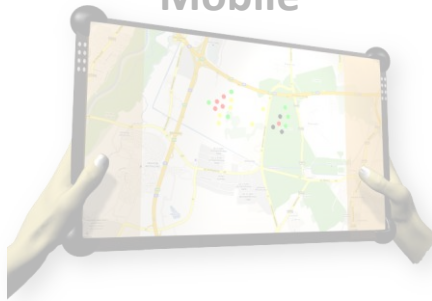
90° with touch point and line





Map Interaction

Mobile

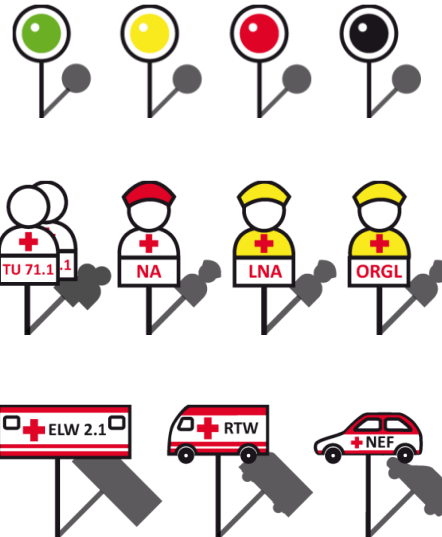


Stationary



Map Visualisation

Both

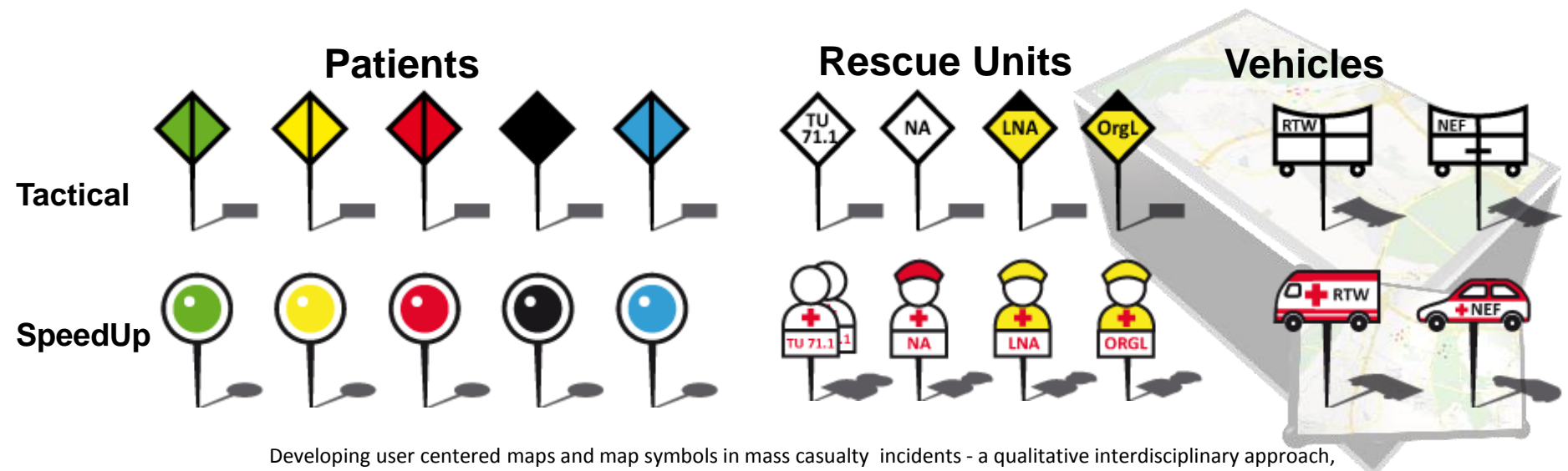


Visualisation of items

F: Comparison of tactical signs and the SpeedUp icons

Online Study

- Meaning of the icons
- Number of icons



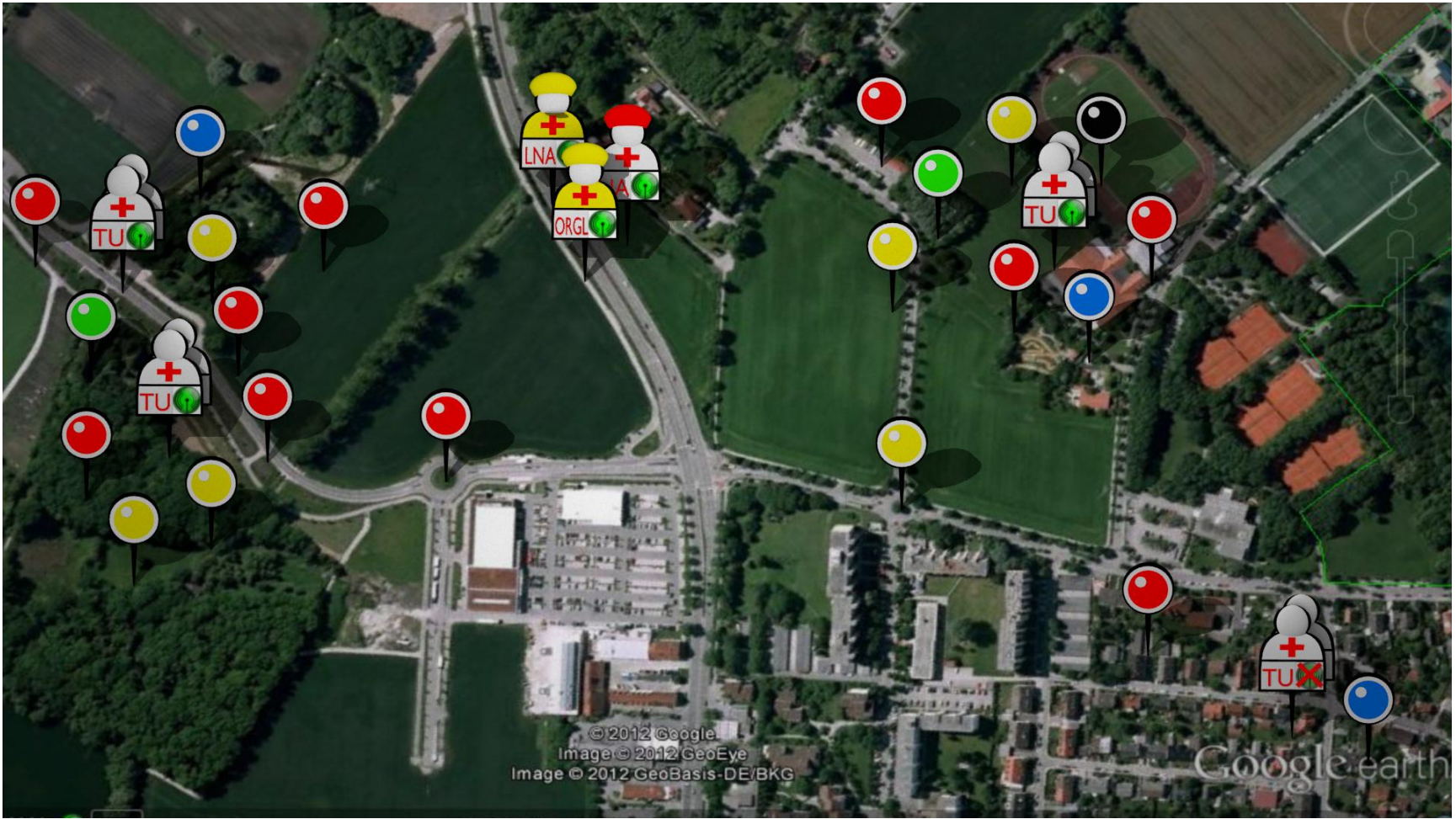


Group Visualisation of Patients and Resources (incl. Units)

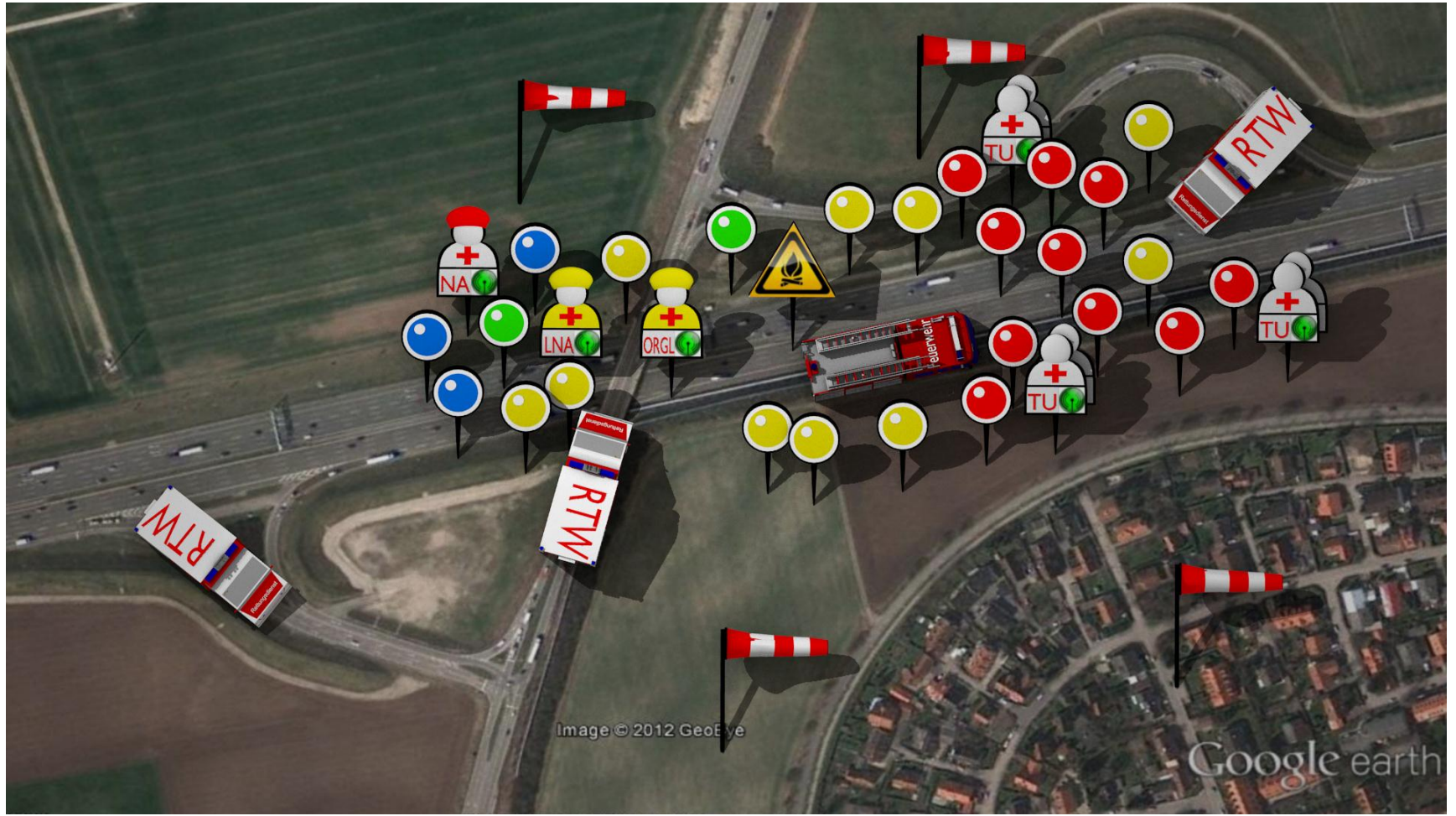
Conclusion of 1st Iteration
(Group Visualisation)

- The EMCs would prefer group visualisations instead of detailed information of each patient
- The relief units in operation areas would be also interested in detailed information

Map Visualisation



Map Visualisation



> Ruggedized Tablet

- Map Interaction with Border Requirement
 - Scrolling, Zooming, Selecting
- Fog of Triage

> Surface

- 2D and 3D gestures on Map applications
- Gesture Review of literature
- Orientation on a surface

> Map Visualization

- Design of new MCI related symbols/icons
- Tactical vs intuitive Icons
- Group Visualization of Resources and patients

Thank you for your attention!
Email: coskun@in.tum.de