# Modelling and Testing Requirements via Executable Abstract State Machines

Model-Driven Requirements Engineering (MoDRE) August 20, 2018 / Banff, Canada



#### **Research Problem**



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Given *informal* requirements describing the *problem domain*, how can we facilitate **the process** of developing *working* code in the *solution domain*?

We present a method for facilitating this process: from requirements to *formal*, *executable* specifications.

#### Case Study: An E-Health System





- · Patients are prescribed to medications.
- Medications may have *dangerous interactions*. e.g., warfarin and aspirin both increase anti-coagulation
- Goal: *No dangerous interactions* in patients' prescriptions.

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#### Contributions

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- ETF (Eiffel Testing Framework)
  - Generates code stub for developing business logic
  - Supports acceptance testing via a given Abstract User Interface
- Mathmodels programming library
  - Specifies business logic as abstract state machines



• Scalable to large systems via Runtime Contract Checking.

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### **Requirements Elicitation (1)**

ENV1	Physicians prescribe medications to <i>patients</i> .
ENV2	There exist pairs of medications that when taken together have dangerous <i>interactions</i> .
ENV3	If one <i>medication</i> interacts with another, then the reverse also applies (Symmetry).
ENV4	A medication does not interact with itself (Irreflexivity).
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**ENV**-descriptions document environment constraints or assumptions.

#### Abstract User Interface

system ehealth	
semantics types	
type <b>MEDICATION</b> = SI	TRING
type <b>PATIENT</b> = STRIN	IG
events	
add_patient	(p: <b>PATIENT</b> )
add_medication	(m: MEDICATION)
add_interaction	(m1: MEDICATION; m2: MEDICATION)
add_prescription	(p: <b>PATIENT;</b> m: <b>MEDICATION</b> )
remove_interaction	(m1: MEDICATION; m2: MEDICATION)
remove_prescription	(p: <b>PATIENT;</b> m: <b>MEDICATION</b> ))
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<u>Abstract</u> UI may **later** be implemented using <u>concrete</u> desktop, mobile, or web interface.

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**Requirements Elicitation (2)** 

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**REQ**-descriptions document what the machines must produce.

REQ5	The system shall maintain records of dangerous medication interactions.
REQ6	The system shall maintain records of patient <i>prescriptions</i> . No prescription may have a dangerous interaction.
REQ7	Physicians shall be allowed to add a medication to a patient's prescription, provided it does not result in a dangerous interaction.
REQ8	It shall be possible to add a new medication interaction to the records, provided that it does not result in a dangerous interaction.
REQ9	Physicians shall always be allowed to remove a medication from a patient's prescrip- tion.

reflected in Mathmodels



Types of *abstract* state variables:

patients	€	<i>₽ PATIENT</i>
medications	€	ℙ MEDICATION
interactions	€	MEDICATION ↔ MEDICATION
prescriptions	e	PATIENT ↔ MEDICATION

Example *abstract state* in ASCII form:

patients:	{p1, p2, p3}
medications:	{m1, m2, m3, m4}
interactions:	{m1 -> m2, m2 -> m1}
prescriptions:	{p1 -> m1, m3; p3 -> m2,m4}

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#### **Acceptance Test**

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state 16	
patients:	{p1,p2,p3}
medications:	{m1,m2,m3,m4}
interactions:	{m1->m2,m2->m1,m2->m4,m4->m2}
prescriptions:	{p1->m1,m3; p3->m2}
->add_prescript:	ion("p3","m4")
state 17 Error	e4: this prescription dangerous
->remove_intera	ction("m2","m4")
state 18	
patients:	{p1,p2,p3}
medications:	{m1,m2,m3,m4}
interactions:	{m1->m2,m2->m1}
prescriptions:	{p1->m1,m3; p3->m2}
->add_prescript:	ion("p3","m4")
state 19	
patients:	{p1,p2,p3}
medications:	{m1,m2,m3,m4}
interactions:	{m1->m2,m2->m1}
prescriptions:	{p1->m1,m3; p3->m2,m4}

#### The Mathmodels Library

	_
lass	
<b>REL</b> [ <i>G</i> , <i>H</i> ]	
nherit	
<b>SET</b> [ <b>TUPLE</b> [ <i>G</i> , <i>H</i> ]]	
eature immutable queries	
domain: SET[G]	
range: SET[ H]	
image alias "[]" (g: G): SET[ H ]	
extended alias "+" (p: TUPLE[ G, H]): REL[ G, H]	
overriden_by (p: TUPLE[ G, H]): REL[ G, H]	
eature mutable commands	
extend (p: TUPLE[ G, H])	
override (p: TUPLE[ G, H])	
nd	
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- Immutable queries for specifying precise contracts.
- Mutable commands for making executable Abstract State Machine.
- There are other classes in Mathmodels library: SET, FUN, BAG.

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Mathmodels vs. Math	
Recall the informal R-description:	
REQ6 The system maintains records of <i>patient prescriptions</i> . No pre- scription may have a <i>dangerous interaction</i> .	
<ul> <li>How to formulate it using set theory and predicate logic?</li> <li>∀p ∈ patients; m<sub>1</sub>, m<sub>2</sub> ∈ medications :</li> <li>p ∈ dom(prescriptions) ∧ m<sub>1</sub> ≠ m<sub>2</sub> ∧ (m<sub>1</sub>, m<sub>2</sub>) ∈ interactions</li> <li>⇒ ¬((p, m<sub>1</sub>) ∈ prescriptions ∧ (p, m<sub>2</sub>) ∈ prescriptions)</li> </ul>	
• How to make the above formula executable and traceable ?	
no_dangerous_interactions_REQ6 : across prescriptions.domain as p all across prescriptions[p.item] as m1 all across prescriptions[p.item] as m2 all interactions.has ( [m1.item, m2.item] ) implies not( prescriptions.has( [p.item, m1.item] ) and prescriptions.has( [p.item, m2.item] end end end	))

#### Using Mathmodels to Contract Abstract Statessonde

Invariants are traceable back to ENV- and REQ-descriptions.



#### Summary

• ETF (Eiffel Testing Framework)

Mathmodels programming library

## code generator ] [ code generator ] [ specification language

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The proposed method adopts *Design-by-Contract* (DbC) and *Eiffel programming IDE*.

 $\Rightarrow$  Scalable to large systems via Runtime Contract Checking.

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#### **Using Mathmodels to Contract Actions**



State updates are contracted with *pre-conditions* and *post-conditions*.

REQ7 Physicians shall be allowed to add a medication to a patient's prescription, provided it does not result in a dangerous interaction.

Class
ADD_PRESCRIPTION
inherit
HEALTH_SYSTEM inherits all system invariants
feature commands
add_prescription (p: PATIENT; m: MEDICATION)
Add a prescription of 'm1' to 'p1'.
require
p ∈ patients
patients.has (p)
m ∉ prescriptions[p]
not prescriptions[p].has (m)
cannot cause a dangerous interaction
∀ med ∈ prescriptions[p] : (med, m) ∉ interaction
across prescriptions[p] as med all not interactions.has( [med.item, m] ) end
do
prescriptions.extend ([p, m])
ensure
prescriptions ~ old prescriptions + [p, m]
UNCHANGED (patients, medications, interactions)
end
end

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