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The diagnosability of triangle-free graphs

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ABSTRACT

The ability of identifying all the faulty devices in a multiprocessor system is known as diagnosability. The local diagnosability concerns the local connective substructure in a network. The PMC model is the test-based diagnosis with a processor performing the diagnosis by testing the neighboring processors via the links between them. In this paper, we discuss the diagnosability and the local diagnosability of a triangle-free network under the PMC model. We also propose the local diagnosis algorithms under the PMC model for some specific structures.

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1. Introduction

Sensor networks have gained more and more popularity in computer technology. In a sensor network, there are more than one sensor node or processor. These sensor nodes, processors and the links of a system are usually modeled as a graph topology. The reliability of a system is crucial since even a few malfunctions would disable to operate the service. Whenever devices are found to be faulty, they should be replaced with fault-free ones as soon as possible to guarantee that the system can work properly. Thus the ability of identifying all the faulty devices in a system is very important. This is known as *system diagnosability* is the maximum number of faulty devices that can be identified correctly. A system is *t*-diagnosable if all the faulty devices can be pointed out precisely with the faulty devices being at most *t*. Many results about the diagnosis and the diagnosability have been proposed in the literature [1-5].

The PMC diagnosis model is proposed by Preparata, Metze, and Chien in [6]. The PMC model is the test-based diagnosis with a processor performing the diagnosis by testing the neighboring processors via the links between them. In [7], Hakimi and Amin proved that a system is *t*-diagnosable if it is *t*-connected with at least 2t + 1 nodes under the PMC model. Moreover, they gave a necessary and sufficient condition for verifying if a system is *t*-diagnosable under the PMC model. Some related works have appeared in the literature [8–11].

In practice, processors in many systems are connected sparsely. Thus some research concerns with the measure that can better reflect fault patterns in real systems. For instance, Das et al. [2] investigated fault diagnosis under local constraints. For a *t*-diagnosable system, if there exist more than t + 1 faulty processors, we cannot make a precise diagnosis in this system. However, for the local sense, if the t + 1 faulty processors are gathered in a particular block of a large

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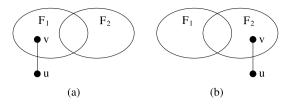


Fig. 1. A distinguishable pair (F_1, F_2) .

system, the situation will not affect to the other good parts. Hsu and Tan [12] proposed the concept of local diagnosability to identify the diagnosability of a large system by computing the local diagnosability with respect to each individual processor.

In this paper, we discuss the diagnosability of a graph under the PMC model. We prove that the diagnosability of a triangle-free graph G is the minimum degree of G if G is not isomorphic to a complete bipartite graph. We also concern with the local diagnosability and design a local diagnosis algorithm under the PMC model. The remainder of this paper is organized as follows: Section 2 provides preliminary background for system diagnosis. We prove the diagnosability and the local diagnosability of a graph in Section 3 and Section 4, respectively. We give a local diagnosis algorithm under the PMC model in Section 5. In the final section, we present our conclusion.

2. Preliminaries

The underlying topology of a multiprocessor system is usually modeled as a graph, whose node set and edge set represent the set of all processors and the set of all communication links between processors, respectively. For the graph definitions and notations, we follow [13]. Let G = (V, E) be a graph if V is a finite set and E is a subset of $\{\{u, v\} \mid \{u, v\} \text{ is an unordered pair of } V\}$. We say that V is the *node set* and E is the *edge set* of G. A graph $G = (V_0 \cup V_1, E)$ is *bipartite* if $V_0 \cap V_1 = \emptyset$ and $E \subseteq \{\{u, v\} \mid u \in V_0 \text{ and } v \in V_1\}$. A bipartite graph $G = (V_0 \cup V_1, E)$ is *complete* if for any two nodes, $u \in V_0$ and $v \in V_1$, $\{u, v\} \in E$; we say u is a *neighbor* of v, and vice versa. We use N(u) to denote the neighborhood set $\{v \mid \{u, v\} \in E(G)\}$. A graph G is *triangle-free* if G contains no cycles of length being three. Note that if u and v are two adjacent nodes in a triangle-free graph, then $N(u) \cap N(v) = \emptyset$. The *degree* of a node v in a graph G, denoted by $\deg_G(v)$, is the number of edges incident to v. We use $\delta(G)$ to denote the minimum degree of G.

Under the PMC diagnosis model, we assume that adjacent processors are capable of performing tests on each other. Let G = (V, E) denote the underlying topology of a multiprocessor system. For any two adjacent nodes $u, v \in V(G)$, the ordered pair (u, v) represents a test that processor u is able to diagnose processor v. In this situation, u is a tester, and v is a *testee*. The outcome of a test (u, v) is 1 (respectively, 0) if u evaluates v to be faulty (respectively, fault-free). Since the faults considered here are permanent, the outcome of a test is reliable if and only if the tester is fault-free. A faulty set F is the set of all faulty processors in G. It is noticed that F can be any subset of V. A test assignment for system G is a collection of tests and can be modeled as a directed graph T = (V, L), where $(u, v) \in L$ implies that u and v are adjacent in G. The collection of all test results from the test assignment T is called a syndrome. Formally, a syndrome of T is a mapping $\sigma: L \to \{0, 1\}$. For any given syndrome σ resulting from a test assignment T = (V, L), a subset of nodes $F \subseteq V$ is said to be *consistent* with σ if for a $(u, v) \in L$ such that $u \in V - F$, then $\sigma(u, v) = 1$ if and only if $v \in F$. This corresponds to the assumption that fault-free testers always give correct test results, whereas faulty testers can lead to unreliable results. Therefore, a given set F of faulty nodes may be consistent with different syndromes. Let $\sigma(F)$ denote the set of all possible syndromes with which the faulty set F can be consistent. Then two distinct faulty sets F_1 and F_2 of V are distinguishable if $\sigma(F_1) \cap \sigma(F_2) = \emptyset$; otherwise, F_1 and F_2 are *indistinguishable*. That is, (F_1, F_2) is a *distinguishable pair* of faulty sets if $\sigma(F_1) \cap \sigma(F_2) = \emptyset$. Otherwise, (F_1, F_2) is an *indistinguishable pair*. For any two distinct faulty sets F_1 and F_2 of G with $|F_1| \leq t$ and $|F_2| \leq t$, a system G is t-diagnosable if and only if (F_1, F_2) is a distinguishable pair. Let F_1 and F_2 be two distinct sets. We use $F_1 \triangle F_2$ to denote the symmetric difference $(F_1 - F_2) \cup (F_2 - F_1)$ between F_1 and F_2 . Dahbura and Masson presented a sufficient and necessary characterization of *t*-diagnosable systems in [9].

Theorem 1. (See [9].) Let G = (V, E) be a graph. For any two distinct subsets F_1 and F_2 of V, (F_1, F_2) is a distinguishable pair if and only if there exists a node $u \in V - (F_1 \cup F_2)$ and a node $v \in F_1 \triangle F_2$ such that $\{u, v\} \in E$. See Fig. 1 for an illustration.

Theorem 2. (See [9].) A graph G = (V, E) is t-diagnosable if and only if, for each distinct pair of sets $F_1, F_2 \subset V$ with $|F_1| \leq t$ and $|F_2| \leq t$, F_1 and F_2 are distinguishable.

Chang et al. [8] presented some conditions for a *t*-regular triangle-free graph to be *t*-diagnosable as the following theorem.

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