

Department of Anesthesia

Title:
Biomedical Equipment

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9257

Pages:
2

Attachment:
A – Inventory &
Maintenance Schedule

POLICY:

The Medical Equipment Management Plan within the Department of Anesthesia is part of the overall MGUH Biomedical Engineering policies, which can be found in the Environment of Care Manual, which is a subset of the MGUH Policies and Procedure Manual.

PROCEDURES:

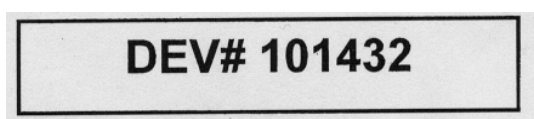
Biomedical Engineering maintains a Master Inventory report for the Anesthesia equipment inventory that shows Mfr, Model, Serial No., Description and Device Number as well as the Preventative Maintenance (PM) schedule. (See attached report Inventory and PM Reports)

The Department will work with Biomedical Engineering to maintain a comprehensive list of all clinical equipment and develop a Medical Equipment Management Plan that includes criteria for:

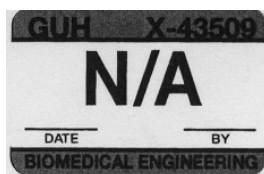
1. What equipment is covered
2. Criteria for scheduled inspections, if required
3. Frequency of inspections
4. Maintenance and record keeping

A scoring tool is used to determine whether equipment may be placed in the N/A category with regard to inspection category. A master file of all of the filled-out scoring sheets for each class of equipment is maintained in Biomedical Engineering.

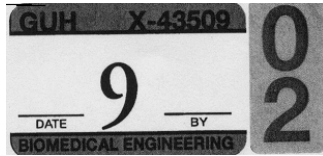
If the equipment has been inventoried, it will have the following device number sticker:



Equipment that does not require any annual inspection, as scored by comprehensive risk assessment criteria will carry the following sticker:



Equipment that requires scheduled preventative maintenance or performance assurance will carry the following type of sticker:



This sticker indicates that the equipment will be overdue for inspection after September 2002.

For equipment requiring inspections:

- GE will perform machine inspections to the anesthesia machines semi-annually
- The blood and fluid warmers will all be checked in September
- Miscellaneous Anesthesia equipment including all the Bair Huggers (which need temp safety checks) will also be done in August.
- All defibrillators throughout the house are done in June and December, regardless of department ownership

Scheduled Inspections are not needed for:

1. Monitoring equipment unless the equipment contains gas or agent monitoring components. This is in recognition that these are computer-based devices, and unlike the old analog units, they are unlikely to drift "out of spec".
2. All IV, feeding and syringe pumps. EXCEPT PCA pumps.

Supplementing these inspections are twice-yearly documented Biomedical Hazard Surveillance rounds of the Anesthesia Department in May and November.

Green stickers from the earlier system of medical equipment surveillance may still be found on some equipment. If in doubt as to the clinical safety of a device with a green sticker, the Chief of Service, Anesthesia or the Director, Biomedical Engineering should be contacted.

Education:

Emphasis will be placed on reducing risks involving medical devices and equipment through vigilance in observing and reporting problems with equipment by the users. Repairs and downtime for equipment will be reduced through education about:

- Operator error
- Reducing physical damage,
- Preventing discharged batteries

Russell T. Wall, MD
Chief of Service, Anesthesia

Attachment:

- A. Master Inventory List & Preventative Maintenance Schedule