Technical Information Report

AAMI/ISO TIR62354: 2015

General testing procedures for medical electrical equipment

AAMI
Advancing Safety in Healthcare Technology

Objectives and uses of AAMI standards and recommended practices

It is most important that the objectives and potential uses of an AAMI product standard or recommended practice are clearly understood. The objectives of AAMI's technical development program derive from AAMI's overall mission: the advancement of medical instrumentation. Essential to such advancement are (1) a continued increase in the safe and effective application of current technologies to patient care, and (2) the encouragement of new technologies. It is AAMI's view that standards and recommended practices can contribute significantly to the advancement of medical instrumentation, provided that they are drafted with attention to these objectives and provided that arbitrary and restrictive uses are avoided.

A voluntary *standard* for a *medical device* recommends to the manufacturer the information that should be provided with or on the product, basic safety and performance criteria that should be considered in qualifying the device for clinical use, and the measurement techniques that can be used to determine whether the device conforms with the safety and performance criteria and/or to compare the performance characteristics of different products. Some standards emphasize the information that should be provided with the device, including performance characteristics, instructions for use, warnings and precautions, and other data considered important in ensuring the safe and effective use of the device in the clinical environment. Recommending the disclosure of performance characteristics often necessitates the development of specialized test methods to facilitate uniformity in reporting; reaching consensus on these tests can represent a considerable part of committee work. When a drafting committee determines that clinical concerns warrant the establishment of *minimum* safety and performance criteria, referee tests must be provided and the reasons for establishing the criteria must be documented in the rationale.

A *recommended practice* provides guidelines for the use, care, and/or processing of a medical device or system. A recommended practice does not address device performance *per se*, but rather procedures and practices that will help ensure that a device is used safely and effectively and that its performance will be maintained.

Although a device standard is primarily directed to the manufacturer, it may also be of value to the potential purchaser or user of the device as a frame of reference for device evaluation. Similarly, even though a recommended practice is usually oriented towards healthcare professionals, it may be useful to the manufacturer in better understanding the environment in which a medical device will be used. Also, some recommended practices, while not addressing device performance criteria, provide guidelines to industrial personnel on such subjects as sterilization processing, methods of collecting data to establish safety and efficacy, human engineering, and other processing or evaluation techniques; such guidelines may be useful to health care professionals in understanding industrial practices.

In determining whether an AAMI standard or recommended practice is relevant to the specific needs of a potential user of the document, several important concepts must be recognized:

All AAMI standards and recommended practices are *voluntary* (unless, of course, they are adopted by government regulatory or procurement authorities). The application of a standard or recommended practice is solely within the discretion and professional judgment of the user of the document.

Each AAMI standard or recommended practice reflects the collective expertise of a committee of health care professionals and industrial representatives, whose work has been reviewed nationally (and sometimes internationally). As such, the consensus recommendations embodied in a standard or recommended practice are intended to respond to clinical needs and, ultimately, to help ensure patient safety. A standard or recommended practice is limited, however, in the sense that it responds generally to perceived risks and conditions that may not always be relevant to specific situations. A standard or recommended practice is an important *reference* in responsible decision-making, but it should never *replace* responsible decision-making.

Despite periodic review and revision (at least once every five years), a standard or recommended practice is necessarily a static document applied to a dynamic technology. Therefore, a standards user must carefully review the reasons why the document was initially developed and the specific rationale for each of its provisions. This review will reveal whether the document remains relevant to the specific needs of the user.

Particular care should be taken in applying a product standard to existing devices and equipment, and in applying a recommended practice to current procedures and practices. While observed or potential risks with existing equipment typically form the basis for the safety and performance criteria defined in a standard, professional judgment must be used in applying these criteria to existing equipment. No single source of information will serve to identify a particular product as "unsafe". A voluntary standard can be used as one resource, but the ultimate decision as to product safety and efficacy must take into account the specifics of its utilization and, of course, cost-benefit considerations. Similarly, a recommended practice should be analyzed in the context of the specific needs and resources of the individual institution or firm. Again, the rationale accompanying each AAMI standard and recommended practice is an excellent guide to the reasoning and data underlying its provision.

In summary, a standard or recommended practice is truly useful only when it is used in conjunction with other sources of information and policy guidance and in the context of professional experience and judgment.

INTERPRETATIONS OF AAMI STANDARDS AND RECOMMENDED PRACTICES

Requests for interpretations of AAMI standards and recommended practices must be made in writing, to the AAMI Vice President, Standards Policy and Programs. An official interpretation must be approved by letter ballot of the originating committee and subsequently reviewed and approved by the AAMI Standards Board. The interpretation will become official and representation of the Association only upon exhaustion of any appeals and upon publication of notice of interpretation in the "Standards Monitor" section of the *AAMI News*. The Association for the Advancement of Medical Instrumentation disclaims responsibility for any characterization or explanation of a standard or recommended practice which has not been developed and communicated in accordance with this procedure and which is not published, by appropriate notice, as an *official interpretation* in the *AAMI News*.

General testing procedures for medical electrical equipment

Approved 30 March 2015 by
Association for the Advancement of Medical Instrumentation

Registered 12 April 2015 by
American National Standards Institute

Abstract: This technical report applies to medical electrical equipment. The object of this technical report is to provide guidance on general testing procedures according to IEC 60601-1:1988 (including the collateral provisions of IEC 60601-1-1:2000) and IEC 60601-1:2005 and IEC 60601-1:2005 and IEC 60601-1:2005/AMD1:2012.

Keywords: medical electrical equipment, safety, general testing

Published by

Association for the Advancement of Medical Instrumentation
4301 N Fairfax Drive, Suite 301
Arlington, VA 22203-1633
www.aami.org

Printed in the United States of America

ISBN 1-57020-583-3

AAMI Technical Information Report

A technical information report (TIR) is a publication of the Association for the Advancement of Medical Instrumentation (AAMI) that addresses a particular aspect of medical technology.

Although the material presented in a TIR may need further evaluation by experts, releasing the information is valuable because the industry and the professions have an immediate need for it.

A TIR differs markedly from a standard or recommended practice, and readers should understand the differences between these documents.

Standards and recommended practices are subject to a formal process of committee approval, public review, and resolution of all comments. This process of consensus is supervised by the AAMI Standards Board and, in the case of American National Standards, by the American National Standards Institute.

A TIR is not subject to the same formal approval process as a standard. However, a TIR is approved for distribution by a technical committee and the AAMI Standards Board.

Another difference is that, although both standards and TIRs are periodically reviewed, a standard must be acted on—reaffirmed, revised, or withdrawn—and the action formally approved usually every five years but at least every 10 years. For a TIR, AAMI consults with a technical committee about five years after the publication date (and periodically thereafter) for guidance on whether the document is still useful—that is, to check that the information is relevant or of historical value. If the information is not useful, the TIR is removed from circulation.

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Comments on this technical information report are invited and should be sent to AAMI, Attn: Standards Department, 4301 N. Fairfax Drive, Suite 301, Arlington, VA 22203-1633.

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Glossary of equivalent standards

International Standards adopted in the United States may include normative references to other International Standards. AAMI maintains a current list of each International Standard that has been adopted by AAMI (and ANSI). Available on the AAMI website at the address below, this list gives the corresponding U.S. designation and level of equivalency to the International Standard.

www.aami.org/standards/glossary.pdf

Committee representation

Association for the Advancement of Medical Instrumentation

AAMI ES, Electrical Safety Committee

Committee approval of this document does not necessarily imply that all committee members voted for its approval. At the time this document was published, the committee had the following members.

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NOTE—Participation by federal agency representatives in the development of this technical information report does not constitute endorsement by the federal government or any of its agencies.

Background of ANSI/AAMI adoption of IEC/TR 62354:2014

The International Electrotechnical Commission (IEC) is a worldwide organization for standardization comprising all national electrotechnical committees (IEC National Committees). The United States is one of the IEC members that took an active role in the development of this technical report.

International Technical Report IEC/TR 62354 was developed by the Subcommittee (SC) 62A, *Common aspects of electrical equipment used in medical practice.*

U.S. participation in IEC/SC 62A is organized through the U.S. Technical Advisory Group for IEC/SC 62A, administered by AAMI on behalf of the United States National Committee, which is a committee of the American National Standards Institute (ANSI). AAMI administers the International Secretariat for IEC/SC 62A on behalf of the United States, and U.S. experts made a considerable contribution to this technical report.

This third edition cancels and replaces AAMI/ISO 62354:2009. It constitutes a technical revision.

AAMI encourages its committees to harmonize their work with international documents as much as possible. The AAMI Electrical Safety Committee reviewed IEC/TR 62354 to formulate the U.S. position while the document was being developed. This close collaboration helped gain widespread U.S. consensus on the document. The AAMI Electrical Safety Committee voted to adopt the IEC Technical Report as written.

The concepts incorporated into this technical report should not be considered inflexible or static. This technical information report, like any other, must be reviewed and updated periodically to assimilate progressive technological developments. To remain relevant, it must be modified as technological advances are made and as new date comes to light.

Publication of this Technical Report that has been registered with ANSI has been approved by the Accredited Standards Developer (AAMI, 4301 N. Fairfax Drive, Suite 301, Arlington, VA 22203-1633). This document is registered as a Technical Report according to the Procedures for the Registration of Technical Reports with ANSI. This document is not an American National Standard and the material contained herein is not normative in nature.

Suggestions for improving this TIR are invited. Comments and suggested revisions should be sent to Technical Programs, AAMI, 4301 N Fairfax Drive, Suite 301, Arlington VA 22203-1633.

NOTE—Beginning with the IEC foreword on page “viii,” AAMI/ISO TIR62354:2015, *General testing procedures for medical electrical equipment* is identical to IEC/TR 62354:2014.

Foreword

1) The International Electrotechnical Commission (IEC) is a worldwide organization for standardization comprising all national electrotechnical committees (IEC National Committees). The object of IEC is to promote international co-operation on all questions concerning standardization in the electrical and electronic fields. To this end and in addition to other activities, IEC publishes International Standards, Technical Specifications, Technical Reports, Publicly Available Specifications (PAS) and Guides (hereafter referred to as “IEC Publication(s)”). Their preparation is entrusted to technical committees; any IEC National Committee interested in the subject dealt with may participate in this preparatory work. International, governmental and non-governmental organizations liaising with the IEC also participate in this preparation. IEC collaborates closely with the International Organization for Standardization (ISO) in accordance with conditions determined by agreement between the two organizations.
2) The formal decisions or agreements of IEC on technical matters express, as nearly as possible, an international consensus of opinion on the relevant subjects since each technical committee has representation from all interested IEC National Committees.
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8) Attention is drawn to the Normative references cited in this publication. Use of the referenced publications is indispensable for the correct application of this publication.
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The main task of IEC technical committees is to prepare International Standards. However, a technical committee may propose the publication of a technical report when it has collected data of a different kind from that which is normally published as an International Standard, for example "state of the art".

IEC 62354, which is a technical report, has been prepared by subcommittee 62A: Common aspects of electrical equipment used in medical practice, of IEC technical committee 62: Electrical equipment in medical practice.

This third edition cancels and replaces the second edition published in 2009. This edition constitutes a technical revision intended to align the guidance in this technical report with Amendment 1 to IEC 60601:2005. Several tests have been updated and additional test procedures added. The following tests have been added or significantly revised:

13.2.1 RISK MANAGEMENT PROCESS

13.2.4 Durability and legibility of marking

13.2.5 Battery markings

13.2.8 POTENTIAL EQUALIZATION TERMINAL

13.2.14 USABILITY of ME EQUIPMENT

13.3.1 Humidity preconditioning

13.3.2 Impedance of PE connection

13.3.7 CREEPAGE DISTANCES and AIR CLEARANCES

13.3.12 Instability (in transport position; excluding transport; from horizontal and vertical forces and from unwanted lateral movement)

13.3.13 Castors and wheels (Force for propulsion, movement over a threshold)

13.3.14 Safety catch evaluation

13.3.17 Overflow

13.3.18 Spillage

13.3.23 Impact

13.3.14 Drop impact

13.3.25 Rough handling

13.3.27 Actuating parts of controls

13.3.28 Construction of transformers

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13.4.14 Sound pressure level measurements

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13.4.20 Interruption of power supply

13.4.28 Rechargeable battery overcharge/discharge

13.4.29 Mains transformers

This technical report is intended to be read in conjunction with IEC 60601-1:1988 (including the collateral provisions of IEC 60601-1-1:2000) and IEC 60601-1:2005 and IEC 60601-1:2005/AMD1:2012.

The text of this technical report is based on the following documents:

Enquiry draft	Report on voting
62A/936/DTR	62A/947/RVC

Full information on the voting for the approval of this technical report can be found in the report on voting indicated in the above table.

In this technical report, the terms defined in Clause 2 of IEC 60601-1:1988 or Clause 3 of IEC 60601-1:2005 are printed in SMALL CAPITALS.

This publication has been drafted in accordance with the ISO/IEC Directives, Part 2.

The committee has decided that the contents of this publication will remain unchanged until the stability date indicated on the IEC web site under "http://webstore.iec.ch" in the data related to the specific publication. At this date, the publication will be

- reconfirmed,
- withdrawn,
- replaced by a revised edition, or
- amended.

A bilingual version of this publication may be issued at a later date.

Introduction

IEC/TR 60513, *Fundamental aspects of safety standards for medical electrical equipment* published by IEC sub-committee 62A provided the basis for inclusion of the test methods for ME EQUIPMENT in the safety standards.

"Technical requirements and test methods are interrelated elements of product standards and should always be considered together.

Product standards should identify where medically informed judgements are required in deciding whether a particular requirement applies.

Wherever possible, the standards should contain test specifications for completely and clearly checking compliance with the technical requirements. In some cases, a compliance statement such as 'visual inspection', 'manual testing' or similar is adequate for this purpose if such a method gives an accurate assessment.

It should be easy to recognize which test methods apply to each technical requirement. Appropriate headings should designate the appropriate test and a reference should be made to the clause containing the requirement. This also applies for references which are made to other relevant test standards."

It was deemed necessary to support IEC 60601-1 with guidelines for general testing PROCEDURES for MEDICAL ELECTRICAL EQUIPMENT.

In developing the test PROCEDURES, the advice given in IEC/TR 60513 and ISO/IEC Guide 51 was considered as follows:

a) test results should be reproducible within defined limits. When considered necessary, the test method should incorporate a statement as to its limit of uncertainty;

b) where the sequence of tests can influence the results, the correct sequence should be specified.

There is also growing support for the idea that all the test PROCEDURES for ME EQUIPMENT should be found within one international standard.

ISO/IEC 17025, *General requirements for the competence of testing and calibration laboratories*, highlights the need for a single series of requirements covering test PROCEDURES.

IEC/TR 60513 includes a major new principle referring to testing:

> “In specifying minimum safety requirements, provision is made for assessing the adequacy of the design PROCESS where this provides an appropriate alternative to the application of laboratory testing with specific pass/fail criteria, (e.g. in assessing the safety of new technologies such as programmable electronic systems).”

General testing procedures for medical electrical equipment

1 Scope and object

This technical report applies to MEDICAL ELECTRICAL EQUIPMENT (as defined in Subclauses 3.63 of IEC 60601-1:2005 and 2.2.15 of IEC 60601-1:1988), hereinafter referred to as ME EQUIPMENT.

The object of this technical report is to provide guidance on general testing PROCEDURES according to IEC 60601-1:1988 (including the collateral provisions of IEC 60601-1-1:2000) and IEC 60601-1:2005 and IEC 60601-1:2005/AMD1:2012.

2 Normative references

The following documents, in whole or in part, are normatively referenced in this document and are indispensable for its application. For dated references, only the edition cited applies. For undated references, the latest edition of the referenced document (including any amendments) applies.

IEC 60086-4, *Primary batteries – Part 4: Safety of lithium batteries*

IEC 60127-1, *Miniature fuses – Part 1: Definitions for miniature fuses and general requirements for miniature fuse-links*

IEC 60252-1, *AC motor capacitors – Part 1: General – Performance, testing and rating – Safety requirements – Guide for installation and operation*

IEC 60364-4-41, *Low voltage electrical installations – Part 4-41: Protection for safety – Protection against electric shock*

IEC 60417, *Graphical symbols for use on equipment.* Available from: http://www.graphical-symbols.info/equipment

IEC/TR 60513, *Fundamental aspects of safety standards for medical electrical equipment*

IEC 60529:1989, *Degrees of protection provided by enclosures (IP Code)*
IEC 60529:1989/AMD1:1999[1]

IEC 60601-1:1988, *Medical electrical equipment – Part 1: General requirements for safety*[2]
IEC 60601-1:1998/AMD1:1991
IEC 60601-1:1998/AMD2:1995

IEC 60601-1:2005, *Medical electrical equipment – Part 1: General requirements for basic safety and essential performance*

IEC 60601-1:2005/AMD1:2012[3]

IEC 60601-1-2, *Medical electrical equipment – Part 1-2: General requirements for basic safety and essential performance – Collateral Standard: Electromagnetic disturbances – Requirements and tests*

IEC 61010 (all parts), *Safety requirements for electrical equipment for measurement, control, and laboratory use*

IEC 61010-1, *Safety requirements for electrical equipment for measurement, control, and laboratory use – Part 1: General requirements*

IEC 61672-1, *Electroacoustics – Sound level meters – Part 1: Specifications*

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1 A consolidated version 2.1 (2001) exists that includes IEC 60529:1989 and its Amendment 1:1999.

2 The second edition of IEC 60601-1, cancelled and replaced by the third edition in 2005.

3 A consolidated version 3.1 (2012) exists that includes IEC 60601-1:2005 and its Amendment 1:2012.