EQUIPMENT MAINTENANCE

PURPOSE

To ensure the safety of patients and personnel and ensure accurate and uninterrupted operation of all patient-related mechanical and electric equipment through routine cleaning and periodic inspections.

POLICY

All patient-related equipment will be cleaned by sleep facility staff on a regular basis and routinely monitored and inspected for electrical and mechanical safety consistent with manufacturer’s recommendations and OSHA regulations.

Patient-related equipment includes all facility owned, borrowed, leased, and consigned equipment used for demonstration purposes and data collection, including oxygen equipment, sensors, bands, oximeters, thermistors, beds, PAP equipment, HSAT equipment, and bio-physiologic equipment, computers and equipment in the control room.

PROCEDURE

1.0 All equipment used in the sleep facility will be inventoried and logged prior to its initial use.
2.0 A record of all equipment and inspections will be maintained and updated and documented in the equipment log book.
3.0 Sleep technicians will perform visual, safety and operational tests on all patient related equipment at the beginning of each shift/prior to each use.
4.0 Records of these inspections will be documented and kept on file in the manager’s office to include:
   1.1 Date of inspection;
   1.2 Equipment ID information;
   1.3 Repairs or replacements needed; and
   1.4 Name or initials of individual performing inspection.
5.0 In-center patient equipment will be inspected as follows:
   5.1 All units and cables, leads, etc. are inspected nightly by the recording technician and weekly by the manager
   5.2 All sensors are inspected nightly by the recording technician and monthly by the manager.
   5.3 All defective equipment will be pulled and reported to Clinical Equipment Services.
6.0 HSAT equipment will be inspected as follows:
   6.1 All units, disposable materials and batteries are inspected prior to shipping or release to patient by the technician.
   6.2 All defective equipment will be pulled and reported to Carefusion.
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7.0 An equipment maintenance log will be used to document repairs, replacements, and safety inspections of all equipment.

8.0 Devices with sensor issues or failed tests will be removed from service, recorded in the equipment maintenance log and returned to manufacturer for repair.
   8.1 Issues will be reviewed and analyzed for cause by the technical director.
   8.2 Trends related to device, sensor or services issues will be identified and addressed in a plan to prevent future failures.

9.0 All disposable equipment will be disposed of in the proper container.

10.0 Separate clean and dirty areas for all patient related equipment will be maintained and utilized appropriately.

11.0 All patient related non-disposable equipment will be cleaned according to manufacturer’s recommendations after each use and treated with appropriate disinfectant or germicidal agent if warranted.
   11.1 Effort belts should be washed weekly or whenever contact is made with the patient’s skin. Each buckle and wire should be wiped with Cavicide wipes and allowed to air dry.
   11.2 The surface of the CPAP machine and the pulse oximeters will be wiped down daily by using Cavicide wipes.
   11.3 EEG electrodes are pre-cleaned with a nailbrush and warm water. The gold cups and wires of electrodes are then thoroughly cleaned with Cavicide and allowed to air dry. There should be NO residual paste left on any part of the electrode cup or wire. - Soak electrodes in hot water for easier removal of electrode paste. This can be done by soaking the electrodes in a sink or cup filled with hot water for at least 10 minutes.
   11.4 Leg leads, thermistors, and snore sensors should be wiped clean using Cavicide wipes and allowed to air dry.
   11.5 All single use patient items (EKG pads, nasal cannulas, oximetry probe wraps) should be disposed of properly.

12.0 Electrician or bio-medical department will be contacted for inspection, repair, or replacement of defective equipment.

13.0 Annual electrical safety testing will be completed by a certified electrician or bio-medical engineer.