
FMS.26 The hospital has policies and procedures that support the medical equipment management program.

FMS.26.1 There is a policy to perform inspection on all new equipment for conformity before commissioning including those brought for "demos".

FMS.26.2 There is a written policy for tagging medical equipment as follows:

FMS.26.2.1 Preventive maintenance with testing date and due date.

FMS.26.2.2 Inventory number.

FMS.26.2.3 Removal from service.

FMS.26.2.4 Electrical safety check.

FMS.26.3 There is a policy for removal of equipment from service.

FMS.26.4 There is a policy to address agent or contractor repairs.

FMS.26.5 There is a policy to eliminate the use of extension cords.

FMS.26.6 There is a policy to restrict the use of cellular phones in the intensive care units, operating room, and cardiology units, as needed.

Standard Intent:

Medical equipment management program needs to be supported by policies and procedures that mitigate the risks associated with the introduction of new medical equipment into service, tagging of medical equipment, removal of equipment from service, agent/sub-contractors repairs, use of extension cords, and cellular phones.

FMS.27 Hospital staff are trained on safe operation of medical equipment.

FMS.27.1 Hospital staff are trained to operate safely all medical equipment.

FMS.27.2 The training includes physicians, nurses, and paramedics.

FMS.27.3 The training considers the following:

FMS.27.3.1 New equipment.

FMS.27.3.2 Staff transferred from a department to another.

FMS.27.3.3 New staff hired.

FMS.27.3.4 Recurrent misuse of equipment.

Standard Intent:

Staff are the hospital's primary source of contact with patients, families, and visitors. Thus, they need to be educated and trained to carry out their roles in identifying and reducing risks, protecting others and themselves, and creating a safe and secure facility,