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| **SSMED-1302** | **Equipment Testing and Calibration** |
| **Version No.** | 1 |
| **Content Owner** | Vikand Technology Solutions, LLC. |

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|  | **Equipment Testing and Calibration**   * 1. The equipment listed under the annual schedule is to be serviced by an authorized company, for which equipment certificate(s) is/are to be issued.   2. More frequent than annual checks (semiannually, quarterly, monthly, bi-weekly) as defined within this procedure, are to be performed as equipment functional tests by the medical staff onboard unless the equipment manufacturer does not explicitly recommend otherwise. * Equipment is tested and/or calibrated on a daily, weekly, monthly and annual schedule set forth by the manufacturer’s recommendations or as documented in the Company maintenance procedures. * Documented findings are entered in the Equipment testing and calibration form in the appropriate category and space indicated.   1. Daily Testing is performed by the Medical Staff and includes: * Defibrillator (Battery Test & Joule testing) * ECG Machine (Functioning Test) * Oxygen cylinders (Pressure Check) * AED - Automatic External Defibrillator (Battery Check/Pad connection and expiration) * QBC Star Hematology Analyzer (QC test) * Incubator (Temperature control) * Refrigerator (Temperature control) * Suction (Battery & Functional test) * Piccolo (Functional test/Self calibration) * I-Stat (Functional test/Self calibration/simulator test/printer test) * Chemistry Analyzer (Functional Test/Self Calibration)   1. Weekly Testing is performed by the Medical Staff and includes: * Defibrillator (Functional Test and pacer testing) * Oxygen cylinder (Functional Test) * Autoclave (Functional Test & Cleaning) * Glucometer (spare battery check & control checks every second week) * Ventilator (Battery & Pressure Test. Functional test on AC and Battery modes using test lung with and without oxygen)) * Nebulizer (Filter check & Functional Test)   1.5 Monthly Testing is performed by the Medical Staff and includes:   * Laryngoscope battery (Functional Test) * Glucometer spare battery (Functioning Test) * Oxygen Tanks (Quantity Check)   1.6 Annual Testing is performed by an outside, authorized contractor and includes:   * Autoclave Machine * Heart Defibrillators * ECG Machines and Monitors * Oxygen Cylinders * X-ray machine * Infusion Pumps * Laboratory Equipment Refrigerator(s) * Incubator(s) * Laryngoscopes * Otoscopes * Nebulizer * Oxygen Concentrator * Cardiac Monitors * Ventilator * Following Annual Testing, a certificate is issued and maintained in the Ship’s Medical Planned Maintenance File * The medical equipment planned maintenance monthly report is to be set up and maintained through electronic recordkeeping by the Bridge. |
|  | **References**  OEM (Original Equipment Manufacturer) Guidelines  Flag State Guidelines ILO Convention C164  The International Medical Guide for Ship (IMGS) by ILO/WHO  EU Directive 92/29 EEC  ACEP & The Cruise Lines International Association (CLIA) Guidelines |