## UNIVERSITY OF TOLEDO HEALTH SCIENCE CAMPUS

SUBJECT: ELECTRICALLY POWERED DEVICES Procedure No: S-08-020

## PROCEDURE STATEMENT

Electrically powered equipment shall conform to specific safety requirements as appropriate for its inherent characteristics, intended application and area of use.

## PURPOSE OF PROCEDURE

To provide guidelines in the control and inspection of, and safety requirements for electrically powered devices and to enhance the electrical and fire safety of the environment for patients, employees, visitors and students.

## **PROCEDURE**

- A. Medical equipment (defined as any equipment used directly or indirectly for the monitoring, diagnosis or treatment of a patient) shall be maintained and controlled in accordance with Procedure ME-08-007, "Testing of Patient Care Electrical Equipment" and with Procedure ME-08-008, "Medical Equipment Management" as administered by the Department of Biomedical Engineering Services.
- B. Patient and staff personal electrical equipment used in the patient vicinity (an area extending six feet from the perimeter of the bed and 7.5 feet vertically) or in a patient care area (any portion of a health care facility wherein patients are intended to be examined or treated) shall be maintained and controlled in accordance with Procedure ME-08-004, "Patient and Staff Personal Electrical Equipment."
- C. All other electrically powered equipment in patient care areas regardless of ownership shall comply with the following:
  - All such devices must have a grounding type power cord or be double insulated (i.e. having no exposed electrically conductive surfaces).
  - Only the electrical power strips meeting electrical/fire safety criteria listed in Procedure S-08-037 "Extension Cords" shall be used.
  - Electrical heaters are not permitted and are subject to removal. Refer to Procedure S-08-009 "Portable Space Heaters."
  - All electrically powered devices shall be used in a manner consistent with their design and construction, shall be maintained in proper working order with their physical/mechanical integrity uncompromised.
- D. Any device not complying with this policy may be removed by staff from Facilities Maintenance, Campus Police or Biomedical Engineering Services. They are obligated to advise the appropriate department chair/manager and hold the device for at least five days to ascertain ownership. After five days, they may discard the device.
- E. Department managers/chairman are responsible for compliance with this policy for any equipment used within their department regardless of ownership and for having Biomedical Engineering Services inspect medical devices prior to initial use.

Source: Safety & Health Committee Effective Date: 6/8/92

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