EESTI STANDARD

EVS-EN ISO 18562-1:2020

Biocompatibility evaluation of breathing gas pathways in healthcare applications - Part 1: Evaluation and testing within a risk management process (ISO 18562-1:2017)



EESTI STANDARDI EESSÕNA

NATIONAL FOREWORD

6.			
See Eesti standard EVS-EN ISO 18562-1:2020 sisaldab Euroopa standardi EN ISO 18562-1:2020 ingliskeelset teksti.	This Estonian standard EVS-EN ISO 18562-1:2020 consists of the English text of the European standard EN ISO 18562-1:2020.		
Standard on jõustunud sellekohase teate avaldamisega EVS Teatajas.	This standard has been endorsed with a notification published in the official bulletin of the Estonian Centre for Standardisation.		
Euroopa standardimisorganisatsioonid on teinud Euroopa standardi rahvuslikele liikmetele kättesaadavaks 19.02.2020.	Date of Availability of the European standard is 19.02.2020.		
Standard on kättesaadav Eesti Standardikeskusest.	The standard is available from the Estonian Centre for Standardisation.		

Tagasisidet standardi sisu kohta on võimalik edastada, kasutades EVS-i veebilehel asuvat tagasiside vormi või saates e-kirja meiliaadressile <u>standardiosakond@evs.ee</u>.

ICS 11.040.10

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EUROPEAN STANDARD NORME EUROPÉENNE **EUROPÄISCHE NORM**

EN ISO 18562-1

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English Version

Biocompatibility evaluation of breathing gas pathways in healthcare applications - Part 1: Evaluation and testing within a risk management process (ISO 18562-1:2017)

Évaluation de la biocompatibilité des voies de gaz respiratoires dans les applications de soins de santé -Partie 1: Évaluation et essais au sein d'un processus de gestion du risque (ISO 18562-1:2017)

Beurteilung der Biokompatibilität der Atemgaswege bei medizinischen Anwendungen - Teil 1: Beurteilung und Prüfung innerhalb eines Risikomanagement-Prozesses (ISO 18562-1:2017)

This European Standard was approved by CEN on 11 November 2019.

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This European Standard exists in three official versions (English, French, German). A version in any other language made by translation under the responsibility of a CEN member into its own language and notified to the CEN-CENELEC Management Centre has the same status as the official versions.

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EUROPEAN COMMITTEE FOR STANDARDIZATION COMITÉ EUROPÉEN DE NORMALISATION EUROPÄISCHES KOMITEE FÜR NORMUNG

CEN-CENELEC Management Centre: Rue de la Science 23, B-1040 Brussels

European foreword

The text of ISO 18562-1:2017 has been prepared by Technical Committee ISO/TC 121 "Anaesthetic and respiratory equipment" of the International Organization for Standardization (ISO) and has been taken over as EN ISO 18562-1:2020 by Technical Committee CEN/TC 215 "Respiratory and anaesthetic equipment" the secretariat of which is held by BSI.

This European Standard shall be given the status of a national standard, either by publication of an identical text or by endorsement, at the latest by August 2020, and conflicting national standards shall be withdrawn at the latest by August 2020.

Attention is drawn to the possibility that some of the elements of this document may be the subject of patent rights. CEN shall not be held responsible for identifying any or all such patent rights.

According to the CEN-CENELEC Internal Regulations, the national standards organizations of the following countries are bound to implement this European Standard: Austria, Belgium, Bulgaria, Croatia, Cyprus, Czech Republic, Denmark, Estonia, Finland, France, Germany, Greece, Hungary, Iceland, Ireland, Italy, Latvia, Lithuania, Luxembourg, Malta, Netherlands, Norway, Poland, Portugal, Republic of North Macedonia, Romania, Serbia, Slovakia, Slovenia, Spain, Sweden, Switzerland, Turkey and the United Kingdom.

Endorsement notice

The text of ISO 18562-1:2017 has been approved by CEN as EN ISO 18562-1:2020 without any modification.

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Foreword

ISO (the International Organization for Standardization) is a worldwide federation of national standards bodies (ISO member bodies). The work of preparing International Standards is normally carried out through ISO technical committees. Each member body interested in a subject for which a technical committee has been established has the right to be represented on that committee. International organizations, governmental and non-governmental, in liaison with ISO, also take part in the work. ISO collaborates closely with the International Electrotechnical Commission (IEC) on all matters of electrotechnical standardization.

The procedures used to develop this document and those intended for its further maintenance are described in the ISO/IEC Directives, Part 1. In particular the different approval criteria needed for the different types of ISO documents should be noted. This document was drafted in accordance with the editorial rules of the ISO/IEC Directives, Part 2 (see www.iso.org/directives).

Attention is drawn to the possibility that some of the elements of this document may be the subject of patent rights. ISO shall not be held responsible for identifying any or all such patent rights. Details of any patent rights identified during the development of the document will be in the Introduction and/or on the ISO list of patent declarations received (see www.iso.org/patents).

Any trade name used in this document is information given for the convenience of users and does not constitute an endorsement.

For an explanation on the voluntary nature of ISO standards, the meaning of ISO specific terms and expressions related to conformity assessment, as well as information about ISO's adherence to the World Trade Organization (WTO) principles in the Technical Barriers to Trade (TBT) see the following URL: www.iso.org/iso/foreword.html.

The committee responsible for this document is ISO/TC 121, *Anaesthetic and respiratory equipment*, Subcommittee SC 3, *Lung ventilators and related equipment*.

A list of all parts in the ISO 18562 series can be found on the ISO website.

Introduction

This document represents the application of the best-known science, in order to improve PATIENT safety, by addressing the RISK of potentially hazardous substances being conveyed to the PATIENT by the gas stream.

This document is intended to cover the biological evaluation of GAS PATHWAYS of MEDICAL DEVICES within a RISK MANAGEMENT PROCESS, as part of the overall MEDICAL DEVICE evaluation and development. This approach combines the review and evaluation of existing data from all sources with, where necessary, the selection and application of additional tests.

In general, the ISO 10993 series is intended to cover the biological evaluation of MEDICAL DEVICES. However, the ISO 10993 series does not sufficiently address the biological evaluation of the GAS PATHWAYS of MEDICAL DEVICES.

Before this document was developed, some AUTHORITIES HAVING JURISDICTION interpreted the ISO 10993-1:2009, Table A.1 to mean that materials in the GAS PATHWAY form "indirect contact" with the PATIENT, and should be subjected to tests equivalent to those required for tissue contact parts of MEDICAL DEVICES. This interpretation can lead to tests with questionable benefit and also to possible HAZARDS not being detected.

ISO 10993-1:2009 states that it is not intended to provide a rigid set of test methods as this might result in an unnecessary constraint on the development and use of novel MEDICAL DEVICES. ISO 10993-1:2009 also states where a particular application warrants it, experts in the product or in the area of application concerned can choose to establish specific tests and criteria, described in a product-specific vertical standard. This new series of standards is intended to address the specific needs for the evaluation of GAS PATHWAYS that are not adequately covered by ISO 10993-1:2009.

This document provides a guide to the development of a biological evaluation plan that minimizes the number and exposure of test animals by giving preference to chemical constituent testing and *in vitro* models.

The initial version of this series of standards was intended to cover only the most commonly found potentially harmful substances. It was felt that it was best to get a functioning document published that would test for the bulk of the currently known substances of interest. With the use of the TTC (THRESHOLD OF TOXICOLOGICAL CONCERN) approach, this document has the potential to be used to assess the safety of essentially any compound released from the GAS PATHWAYS of respiratory MEDICAL DEVICES, with very few exceptions (e.g. PCBs, dioxins), and not just the most commonly found potentially harmful substances. Later amendments and additional parts are planned to explicitly cover less common substances.

In this document, the following print types are used:

- requirements and definitions: roman type;
- *test specifications: italic type*;
- informative material appearing outside of tables, such as notes, examples and references: in smaller type. Normative text of tables is also in a smaller type;
- terms defined in <u>Clause 3</u> of this DOCUMENT or as noted: small capitals.

In this document, the conjunctive "or" is used as an "inclusive or" so a statement is true if any combination of the conditions is true.

The verbal forms used in this document conform to usage described in Annex H of the ISO/IEC Directives, Part 2. For the purposes of this document, the auxiliary verb:

"shall" means that compliance with a requirement or a test is mandatory for compliance with this document;

- "should" means that compliance with a requirement or a test is recommended but is not mandatory for compliance with this document;
- "may" is used to describe a permissible way to achieve compliance with a requirement or test.

An asterisk (*) as the first character of a title or at the beginning of a paragraph or table title indicates that there is guidance or rationale related to that item in <u>Annex A</u>.

The attention of Member Bodies is drawn to the fact that equipment manufacturers and testing organizations may need a transitional period following publication of a new, amended or revised ISO or IEC publication in which to make products in accordance with the new requirements and to equip ; opted i , oment new dy in product themselves for conducting new or revised tests. It is the recommendation of the committee that the content of this publication be adopted for implementation nationally not earlier than 3 years from the date of publication for equipment newly designed and not earlier than 5 years from the date of publication for equipment already in production.

Biocompatibility evaluation of breathing gas pathways in healthcare applications —

Part 1: Evaluation and testing within a risk management process

1 Scope

This document specifies:

- the general principles governing the biological evaluation within a RISK MANAGEMENT PROCESS of the GAS PATHWAYS of a MEDICAL DEVICE, its parts or ACCESSORIES, which are intended to provide respiratory care or supply substances via the respiratory tract to a PATIENT in all environments;
- the general categorization of GAS PATHWAYS based on the nature and duration of their contact with the gas stream;
- the evaluation of existing relevant data from all sources;
- the identification of gaps in the available data set on the basis of a RISK ANALYSIS;
- the identification of additional data sets necessary to analyse the biological safety of the GAS PATHWAY;
- the assessment of the biological safety of the GAS PATHWAY.

This document covers general principles regarding BIOCOMPATIBILITY assessment of MEDICAL DEVICE materials, which make up the GAS PATHWAY, but does not cover biological HAZARDS arising from any mechanical failure, unless the failure introduces a toxicity RISK (e.g. by generating PARTICULATES). The other parts of ISO 18562 cover specific tests that address potentially hazardous substances that are added to the respirable gas stream and establish acceptance criteria for these substances.

This document addresses potential contamination of the gas stream arising from the GAS PATHWAYS within the MEDICAL DEVICE, which might then be conducted to the PATIENT.

This document applies over the EXPECTED SERVICE LIFE of the MEDICAL DEVICE in NORMAL USE and takes into account the effects of any intended processing or reprocessing.

This document does not address biological evaluation of the surfaces of MEDICAL DEVICES that are in direct contact with the PATIENT. The requirements for direct contact surfaces are found in the ISO 10993 series.

MEDICAL DEVICES, parts or ACCESSORIES containing GAS PATHWAYS that are addressed by this document include, but are not limited to, ventilators, anaesthesia workstations (including gas mixers), breathing systems, oxygen conserving equipment, oxygen concentrators, nebulizers, low-pressure hose assemblies, humidifiers, heat and moisture exchangers, respiratory gas monitors, respiration monitors, masks, mouth pieces, resuscitators, breathing tubes, breathing system filters and Y-pieces as well as any breathing ACCESSORIES intended to be used with such MEDICAL DEVICES. The enclosed chamber of an incubator, including the mattress, and the inner surface of an oxygen hood are considered to be GAS PATHWAYS and are also addressed by this document.

This document does not address contamination already present in the gas supplied from the gas sources while MEDICAL DEVICES are in NORMAL USE.

EXAMPLE Contamination arriving at the MEDICAL DEVICE from gas sources such as MEDICAL GAS PIPELINE SYSTEMS (including the non-return valves in the pipeline outlets), outlets of pressure regulators connected or integral to a medical gas cylinder, or room air taken into the MEDICAL DEVICE is not addressed by ISO 18562 (all parts).

Future parts might be added to address other relevant aspects of biological testing including additional contamination that might arise from the GAS PATHWAY because of the presence of drugs and anaesthetic agents added to the gas stream.

NOTE 1 Some AUTHORITIES HAVING JURISDICTION require evaluation of these RISKS as part of a biological evaluation.

NOTE 2 This document has been prepared to address the relevant essential principles of safety and performance as indicated in <u>Annex B</u>.

2 Normative references

The following documents are referred to in the text in such a way that some or all of their content constitutes requirements of this document. For dated references, only the edition cited applies. For undated references, the latest edition of the referenced document (including any amendments) applies.

ISO 7396-1:2016, Medical gas pipeline systems — Part 1: Pipeline systems for compressed medical gases and vacuum

ISO 10993-1:2009, Biological evaluation of medical devices — Part 1: Evaluation and testing within a risk management process

ISO 10993-17:2002, Biological evaluation of medical devices — Part 17: Establishment of allowable limits for leachable substances

ISO 14971:2007, Medical devices — Application of risk management to medical devices

ISO 18562-2, Biocompatibility evaluation of breathing gas pathways in healthcare applications — Part 2: Tests for emissions of particulate matter

ISO 18562-3, Biocompatibility evaluation of breathing gas pathways in healthcare applications — Part 3: Tests for emissions of volatile organic compounds (VOCs)

ISO 18562-4, Biocompatibility evaluation of breathing gas pathways in healthcare applications — Part 4: Tests for leachables in condensate

3 Terms and definitions

For the purposes of this document, the terms and definitions given in ISO 7396-1, ISO 14971 and the following apply.

ISO and IEC maintain terminological databases for use in standardization at the following addresses:

- IEC Electropedia: available at http://www.electropedia.org/
- ISO Online browsing platform: available at <u>http://www.iso.org/obp</u>

NOTE For convenience, an alphabetized index of all defined terms and their sources used in this document is given in <u>Annex C</u>.

3.1

ACCESSORY

additional part for use with a MEDICAL DEVICE in order to: