

**Meditisiiniseadmed. Riskijuhtimise rakendamine
meditsiiniseadmetele**

**Medical devices - Application of risk management to
medical devices**

EVS

EESTI STANDARDI EESSÕNA

NATIONAL FOREWORD

S E E S E E S	EVS-EN ISO 14971:2009 EN ISO 14971:2009 EVS 1 07 2009 E S	E E E S 1 07 2009 S	EVS-EN ISO 14971:2009 EN ISO 14971:2009 E E E
---------------------------------	---	--	---

EVS-

I S 11 040 01

V :

Standardite reprodutseerimise ja levitamise õigus kuulub Eesti Standardikeskusele

E S
10 10 17 E 0 0 0 - E S :

The right to reproduce and distribute standards belongs to the Estonian Centre for Standardisation

N
E S
I 10 10 17 E 0 0 0 - S :

EVS

English version

Medical devices - Application of risk management to medical devices (ISO 14971:2007, Corrected version 2007-10-01)

Dispositifs médicaux - Application de la gestion des risques
aux dispositifs médicaux (ISO 14971:2007, Version
corrigée de 2007-10-01)

Medizinprodukte - Anwendung des Risikomanagements auf
Medizinprodukte (ISO 14971:2007, korrigierte Fassung
2007-10-01)

This European Standard was approved by CEN on 13 June 2009.

CEN and CENELEC members are bound to comply with the CEN/CENELEC Internal Regulations which stipulate the conditions for giving this European Standard the status of a national standard without any alteration. Up-to-date lists and bibliographical references concerning such national standards may be obtained on application to the CEN Management Centre or to any CEN or CENELEC member.

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 or CENELEC member into its own language and notified to the CEN Management Centre has the same status as the official versions.

CEN and CENELEC members are the national standards bodies and national electrotechnical committees, respectively, of Austria, Belgium, Bulgaria, Cyprus, Czech Republic, Denmark, Estonia, Finland, France, Germany, Greece, Hungary, Iceland, Ireland, Italy, Latvia, Lithuania, Luxembourg, Malta, Netherlands, Norway, Poland, Portugal, Romania, Slovakia, Slovenia, Spain, Sweden, Switzerland and United Kingdom.



CEN Management Centre:
Avenue Marnix 17, B-1000 Brussels

CENELEC Central Secretariat:
Avenue Marnix 17, B-1000 Brussels

Foreword

The text of ISO 14971:2007, Corrected version 2007-10-01 has been prepared by Technical Committee ISO/TC 210 "Quality management and corresponding general aspects for medical devices" of the International Organization for Standardization (ISO) and has been taken over as EN ISO 14971:2009 by Technical Committee CEN/CLC TC 3 "Quality management and corresponding general aspects for medical devices" the secretariat of which is held by NEN.

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 January 2010, and conflicting national standards shall be withdrawn at the latest by March 2010.

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

This document supersedes EN ISO 14971:2007.

This document has been prepared under a mandate given to CEN by the European Commission and the European Free Trade Association, and supports essential requirements of EU Directives 93/42/EEC on Medical Devices, 90/385/EEC on Active Implantable Medical Devices and 98/79/EC on In Vitro Diagnostic Devices.

For relationship with EU Directives, see informative Annexes ZA, ZB and ZC, which are an integral part of this document.

The present standard can also be used to support some parts of the conformity assessment procedures described in annexes of the European medical devices directives (90/385/EEC, 93/42/EEC and (98/79/EC):

- an adequate description of: results of the risk analysis,
- an undertaking by the manufacturer to institute and keep up to date a systematic procedure to review experience gained from devices in the post-production phase and to implement appropriate means to apply any necessary corrective action

NOTE: Other requirements may be applicable to this aspect

In establishing the policy for determining risk acceptability criteria, this standard allows manufacturers to choose from a range of options within those permitted by regulations (see clause 3.2). European medical devices directives require that, in selecting the most appropriate solutions for the design and construction of the devices, these solutions must conform to safety principles, taking account of the generally acknowledged state of the art, and the manufacturer must apply the following principles in the following order:

- eliminate or reduce risks as far as possible (inherently safe design and construction),
- where appropriate take adequate protection measures including alarms if necessary, in relation to risks that cannot be eliminated,
- inform users of the residual risks due to any shortcomings of the protection measures adopted.

In this context, 'eliminating' or 'reducing' risk must be interpreted and applied in such a way as to take account of technology and practice existing at the time of design and of technical and economical considerations compatible with a high level of protection of health and safety; (see also Annex D.8).

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, Cyprus, Czech Republic, Denmark, Estonia, Finland, France, Germany, Greece, Hungary, Iceland, Ireland, Italy, Latvia, Lithuania, Luxembourg, Malta, Netherlands, Norway, Poland, Portugal, Romania, Slovakia, Slovenia, Spain, Sweden, Switzerland and the United Kingdom.

Endorsement notice

The text of ISO 14971:2007, Corrected version 2007-10-01 has been approved by CEN as a EN ISO 14971:2009 without any modification.

Annex ZA **(informative)**

Relationship between this European Standard and the Essential Requirements of EU Directive 93/42/EEC on Medical Devices

This European Standard has been prepared under a mandate given to CEN by the European Commission and the European Free Trade Association to provide a means of conforming to Essential Requirements of the New Approach Directive 93/42/EEC on medical devices.

Once this standard is cited in the Official Journal of the European Communities under that Directive and has been implemented as a national standard in at least one Member State, compliance with the clauses of this standard confers, within the limits of the scope of this standard, a presumption of conformity with the corresponding Essential Requirements of that Directive and associated EFTA regulations.

This standard provides a process for managing risks associated with medical devices. Because this standard describes an ongoing process applicable in part or in all to the Essential Requirements of Directive 93/42/EEC on medical devices, it is not meaningful to link individual clauses of the standard to specific corresponding Essential Requirements.

Compliance with all the requirement clauses in this standard will ensure that general aspects of medical devices related to patient risk and safety have been addressed. For particular medical devices or for particular safety aspects, additional specific requirements may need to be complied with in order to meet the essential requirements. With respect to users of medical devices and third persons, additional specific requirements from other EU Directives may need to be complied with in order to meet Essential Requirement 1. Relevant harmonized standards may also be used for these purposes.

The risk management processes described in this standard could establish the need for collection of clinical or other experimental data for risk-benefit evaluation purposes. It does not describe how this has to be carried out. Relevant harmonized standards may be used for this purpose.

WARNING — Other requirements and other EU Directives may be applicable to a product falling within the scope of this standard.

EVS

Annex ZB (informative)

Relationship between this European Standard and the Essential Requirements of EU Directive 90/385/EEC on Active Implantable Medical Devices

This European Standard has been prepared under a mandate given to CEN by the European Commission and the European Free Trade Association to provide a means of conforming to Essential Requirements of the New Approach Directive 90/385/EEC on active implantable medical devices.

Once this standard is cited in the Official Journal of the European Communities under that Directive and has been implemented as a national standard in at least one Member State, compliance with the clauses of this standard confers, within the limits of the scope of this standard, a presumption of conformity with the corresponding Essential Requirements of that Directive and associated EFTA regulations.

This standard provides a process for managing risks associated with medical devices. Because this standard describes an ongoing process applicable in part or in all to the Essential Requirements of Directive 90/385/EEC on active implantable medical devices, it is not meaningful to link individual clauses of the standard to specific corresponding Essential Requirements.

Compliance with all the requirement clauses in this standard will ensure that general aspects of medical devices related to patient risk and safety have been addressed. For particular medical devices or for particular safety aspects, additional specific requirements may need to be complied with in order to meet the essential requirements. With respect to users of medical devices and third persons, additional specific requirements from other EU Directives may need to be complied with in order to meet Essential Requirement 1. Relevant harmonized standards may also be used for these purposes.

The risk management processes described in this standard could establish the need for collection of clinical or other experimental data for risk-benefit evaluation purposes. It does not describe how this has to be carried out. Relevant harmonized standards may be used for this purpose.

WARNING — Other requirements and other EU Directives may be applicable to a product falling within the scope of this standard.

EVS

Annex ZC (informative)

Relationship between this European Standard and the Essential Requirements of EU Directive 98/79/EC on In Vitro Diagnostic Devices

This European Standard has been prepared under a mandate given to CEN by the European Commission and the European Free Trade Association to provide a means of conforming to Essential Requirements of the New Approach Directive 98/79/EC on in vitro diagnostic devices.

Once this standard is cited in the Official Journal of the European Communities under that Directive and has been implemented as a national standard in at least one Member State, compliance with the clauses of this standard confers, within the limits of the scope of this standard, a presumption of conformity with the corresponding Essential Requirements of that Directive and associated EFTA regulations.

This standard provides a process for managing risks associated with medical devices. Because this standard describes an ongoing process applicable in part or in all to the Essential Requirements of Directive 98/79/EC on in vitro diagnostic devices, it is not meaningful to link individual clauses of the standard to specific corresponding Essential Requirements.

Compliance with all the requirement clauses in this standard will ensure that general aspects of medical devices related to patient risk and safety have been addressed. For particular medical devices or for particular safety aspects, additional specific requirements may need to be complied with in order to meet the essential requirements. With respect to users of medical devices and third persons, additional specific requirements from other EU Directives may need to be complied with in order to meet Essential Requirement 1. Relevant harmonized standards may also be used for these purposes.

The risk management processes described in this standard could establish the need for collection of clinical or other experimental data for risk-benefit evaluation purposes. It does not describe how this has to be carried out. Relevant harmonized standards may be used for this purpose.

WARNING — Other requirements and other EU Directives may be applicable to a product falling within the scope of this standard.

EVS

Contents

Page

Foreword.....	iv
Introduction	v
1 Scope	1
2 Terms and definitions.....	1
3 General requirements for risk management	5
3.1 Risk management process	5
3.2 Management responsibilities	7
3.3 Qualification of personnel	7
3.4 Risk management plan.....	7
3.5 Risk management file	8
4 Risk analysis	8
4.1 Risk analysis process	8
4.2 Intended use and identification of characteristics related to the safety of the medical device	9
4.3 Identification of hazards	9
4.4 Estimation of the risk(s) for each hazardous situation.....	9
5 Risk evaluation.....	10
6 Risk control	11
6.1 Risk reduction	11
6.2 Risk control option analysis.....	11
6.3 Implementation of risk control measure(s).....	11
6.4 Residual risk evaluation.....	12
6.5 Risk/benefit analysis	12
6.6 Risks arising from risk control measures.....	12
6.7 Completeness of risk control	12
7 Evaluation of overall residual risk acceptability	13
8 Risk management report.....	13
9 Production and post-production information.....	13
Annex A (informative) Rationale for requirements	15
Annex B (informative) Overview of the risk management process for medical devices	23
Annex C (informative) Questions that can be used to identify medical device characteristics that could impact on safety	25
Annex D (informative) Risk concepts applied to medical devices	32
Annex E (informative) Examples of hazards, foreseeable sequences of events and hazardous situations	49
Annex F (informative) Risk management plan	54
Annex G (informative) Information on risk management techniques.....	56
Annex H (informative) Guidance on risk management for <i>in vitro</i> diagnostic medical devices.....	60
Annex I (informative) Guidance on risk analysis process for biological hazards	76
Annex J (informative) Information for safety and information about residual risk	78
Bibliography	80

Introduction

The requirements contained in this International Standard provide manufacturers with a framework within which experience, insight and judgment are applied systematically to manage the risks associated with the use of medical devices.

This International Standard was developed specifically for medical device/system manufacturers using established principles of risk management. For other manufacturers, e.g., in other healthcare industries, this International Standard could be used as informative guidance in developing and maintaining a risk management system and process.

This International Standard deals with processes for managing risks, primarily to the patient, but also to the operator, other persons, other equipment and the environment.

As a general concept, activities in which an individual, organization or government is involved can expose those or other stakeholders to hazards which can cause loss of or damage to something they value. Risk management is a complex subject because each stakeholder places a different value on the probability of harm occurring and its severity.

It is accepted that the concept of risk has two components:

- a) the probability of occurrence of harm;
- b) the consequences of that harm, that is, how severe it might be.

The concepts of risk management are particularly important in relation to medical devices because of the variety of stakeholders including medical practitioners, the organizations providing health care, governments, industry, patients and members of the public.

All stakeholders need to understand that the use of a medical device entails some degree of risk. The acceptability of a risk to a stakeholder is influenced by the components listed above and by the stakeholder's perception of the risk. Each stakeholder's perception of the risk can vary greatly depending upon their cultural background, the socio-economic and educational background of the society concerned, the actual and perceived state of health of the patient, and many other factors. The way a risk is perceived also takes into account, for example, whether exposure to the hazard seems to be involuntary, avoidable, from a man-made source, due to negligence, arising from a poorly understood cause, or directed at a vulnerable group within society. The decision to use a medical device in the context of a particular clinical procedure requires the residual risks to be balanced against the anticipated benefits of the procedure. Such judgments should take into account the intended use, performance and risks associated with the medical device, as well as the risks and benefits associated with the clinical procedure or the circumstances of use. Some of these judgments can be made only by a qualified medical practitioner with knowledge of the state of health of an individual patient or the patient's own opinion.

As one of the stakeholders, the manufacturer makes judgments relating to safety of a medical device, including the acceptability of risks, taking into account the generally accepted state of the art, in order to determine the suitability of a medical device to be placed on the market for its intended use. This International Standard specifies a process through which the manufacturer of a medical device can identify hazards associated with a medical device, estimate and evaluate the risks associated with these hazards, control these risks, and monitor the effectiveness of that control.

For any particular medical device, other International Standards could require the application of specific methods for managing risk.

Medical devices — Application of risk management to medical devices

1 Scope

This International Standard specifies a process for a manufacturer to identify the hazards associated with medical devices, including *in vitro* diagnostic (IVD) medical devices, to estimate and evaluate the associated risks, to control these risks, and to monitor the effectiveness of the controls.

The requirements of this International Standard are applicable to all stages of the life-cycle of a medical device.

This International Standard does not apply to clinical decision making.

This International Standard does not specify acceptable risk levels.

This International Standard does not require that the manufacturer have a quality management system in place. However, risk management can be an integral part of a quality management system.

2 Terms and definitions

For the purposes of this document, the following terms and definitions apply:

2.1

accompanying document

document accompanying a medical device and containing information for those accountable for the installation, use and maintenance of the medical device, the operator or the user, particularly regarding safety

NOTE Adapted from IEC 60601-1:2005, definition 3.4.

2.2

harm

physical injury or damage to the health of people, or damage to property or the environment

[ISO/IEC Guide 51:1999, definition 3.3]

2.3

hazard

potential source of harm

[ISO/IEC Guide 51:1999, definition 3.5]

2.4

hazardous situation

circumstance in which people, property, or the environment are exposed to one or more hazard(s)

[ISO/IEC Guide 51:1999, definition 3.6]

NOTE See Annex E for an explanation of the relationship between “hazard” and “hazardous situation”.