MEDITSIINILISED ELEKTRISEADMED. OSA 2-12: ERINÕUDED KRIITILISE MEDITSIINIABI ANDMISEL KASUTATAVATE HINGAMISAPARAATIDE ESMASE OHUTUSE JA OLULISTE TOIMIMISNÄITAJATE OSAS

Medical electrical equipment - Part 2-12: Particular requirements for basic safety and essential performance of critical care ventilators (ISO 80601-2-12:2020)



EESTI STANDARDI EESSÕNA

NATIONAL FOREWORD

See Eesti standard EVS-EN ISO 80601-2-12:2020 sisaldab Euroopa standardi EN ISO 80601-2-12:2020 ingliskeelset teksti.	This Estonian standard EVS-EN ISO 80601-2-12:2020 consists of the English text of the European standard EN ISO 80601-2-12:2020.
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 11.03.2020.	Date of Availability of the European standard is 11.03.2020.
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

Standardite reprodutseerimise ja levitamise õigus kuulub Eesti Standardikeskusele

Andmete paljundamine, taastekitamine, kopeerimine, salvestamine elektroonsesse süsteemi või edastamine ükskõik millises vormis või millisel teel ilma Eesti Standardikeskuse kirjaliku loata on keelatud.

Kui Teil on küsimusi standardite autorikaitse kohta, võtke palun ühendust Eesti Standardikeskusega: Koduleht <u>www.evs.ee</u>; telefon 605 5050; e-post <u>info@evs.ee</u>

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

No part of this publication may be reproduced or utilized in any form or by any means, electronic or mechanical, including photocopying, without a written permission from the Estonian Centre for Standardisation.

If you have any questions about copyright, please contact Estonian Centre for Standardisation:

Homepage www.evs.ee; phone +372 605 5050; e-mail info@evs.ee

EUROPEAN STANDARD

NORME EUROPÉENNE

EUROPÄISCHE NORM

March 2020

EN ISO 80601-2-12

ICS 11.040.10

Supersedes EN ISO 80601-2-12:2011

English Version

Medical electrical equipment - Part 2-12: Particular requirements for basic safety and essential performance of critical care ventilators (ISO 80601-2-12:2020)

Appareils électromédicaux - Partie 2-12: Exigences particulières relatives à la sécurité de base et aux performances essentielles des ventilateurs pulmonaires pour utilisation en soins intensifs (ISO 80601-2-12:2020)

Medizinische elektrische Geräte - Teil 2-12: Besondere Festlegungen für die Sicherheit einschließlich der wesentlichen Leistungsmerkmale von Beatmungsgeräten für die Intensivpflege (ISO 80601-2-12:2020)

This European Standard was approved by CEN on 12 November 2019.

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

CEN members are the national standards bodies of 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 United Kingdom.



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

This document (EN ISO 80601-2-12:2020) has been prepared by Technical Committee ISO/TC 121 "Anaesthetic and respiratory equipment" in collaboration with 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 September 2020, and conflicting national standards shall be withdrawn at the latest by September 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.

This document supersedes EN ISO 80601-2-12:2011.

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 80601-2-12:2020 has been approved by CEN as EN ISO 80601-2-12:2020 without any modification.

Contents

201. 1	Scope, object a	and related standards	1
201.	1.1 * Scope		1
201.	1.2 Object		2
201.	1.3 Collateral	standards	3
201.	1.4 Particular	standards	3
201. 2	Normative ref	erences	4
201.3	Terms and de	finitions	7
201.4	General requi	rements	9
201.	4.3 Essential p	erformance	9
201.	4.3.101	* Additional requirements for essential performance	
201.	4.4 Additional	requirements for expected service life	9
201.	4.6 * ME equip	ment or ME system parts that contact the patient	10
201.	4.11.101	* Additional requirements for pressurized gas input	10
201.	4.11.101.1	Overpressure requirement	10
201.	4.11.101.2	Compatibility requirement	10
201.5	General requi	rements for testing of ME equipment	11
201.	5.101	Additional requirements for general requirements for testi	
	of ME equipmen	nt	11
201.	5.101.1	Ventilator test conditions	
	5.101.2	* Gas flowrate and leakage specifications	
	5.101.3	* Ventilator testing errors	
201.6		of ME equipment and ME systems	
201.7	ME equipment	identification, marking and documents	12
201.	7.2.3	* Consult accompanying documents	
201.	7.2.4.101	Additional requirements for accessories	12
201.	7.2.13.101	Additional requirements for physiological effects	12
201.	7.2.17.101	Additional requirements for protective packaging	
201.	7.2.18	External gas source	13
201.	7.2.101	* Additional requirements for marking on the outside of	4.0
201		or ME equipment parts	
	7.4.3	* Units of measurement	
	7.9.1	Additional general requirements	
	7.9.2.1.101	Additional general requirements	
	7.9.2.2.101	* Additional requirements for warnings and safety notices.	
	7.9.2.8.101	* Additional requirements for start-up <i>procedure</i>	
	7.9.2.9.101	* Additional requirements for operating instructions	
	7.9.2.12	Cleaning, disinfection, and sterilization	1 /
201.	7.9.2.14.101 equipment, use	* Additional requirements for <i>accessories</i> , supplementary ed material	17

201. 7.9.2.16.101 description	* Additional requirements for reference to the technical	10
201. 7.9.3.1.101	* Additional general requirements	
201. 7.9.3.1.101	Additional requirements for the technical description	
	ninst electrical hazards from ME equipment	
	ainst mechanical hazards of ME equipment and ME systems	
201. 9.6.2.1.101	* Additional requirements for audible acoustic energy	
201. 9.0.2.1.101	* Additional requirements for suction <i>procedures</i>	
	ninst unwanted and excessive radiation hazards	
	inst excessive temperatures and other hazards	
	<i>_</i>	
201. 11.1.2.2 201. 11.6.5.101	* Applied parts not intended to supply heat to a patient	
	equipment or ME system	
201. 11.6.6	* Cleaning and disinfection of ME equipment or ME system	
201. 11.6.7	Sterilization of ME equipment or ME system	
	ibility of ME equipment and ME systems	
201. 11.8.101	* Additional requirements for interruption of the power	
supply/supply	mains to ME equipment	25
	ntrols and instruments and protection against hazardous	
•		
•	of controls and instruments	
201. 12.1.101	* Volume-control inflation-type	
201. 12.1.102	* Pressure-control inflation-type	
201. 12.1.103	Other inflation-types	
201. 12.1.104	* Inspiratory volume monitoring	35
201. 12.1.105	* Response of the <i>ventilator</i> to an increase in set 0 ₂	~ =
concentration	1 1	
	against hazardous output	
	Oxygen monitor	
201. 12.4.102 201. 12.4.103	* Measurement of airway pressure	38
conditions	* Measurement of expired volume and low volume alarm	39
201. 12.4.103.1	Ventilators intended to provide a tidal volume > 50 ml	
201. 12.4.103.2	Ventilators intended to provide a tidal volume ≤50 ml	
201. 12.4.104	* Expiratory end-tidal CO ₂ monitoring equipment	
201. 12.4.105	* Maximum limited pressure protection device	
201. 12.4.106	* High airway pressure alarm condition and protection device	
201. 12.4.107	PEEP alarm conditions	
201. 12.4.108	* Obstruction alarm condition	44
201. 12.4.109	* Disconnection alarm condition	45
201. 12.4.110	Protection against inadvertent setting of high airway pressure	9
		45
201. 12.101	* Protection against accidental or unintentional adjustments	
201 13 Hazardous situ	uations and fault conditions for ME equipment	46

201. 13.2.101	* Additional specific single fault conditions	46
201. 13.2.102	* Failure of one gas supply to a ventilator	46
201. 13.2.103	* Independence of ventilation control function and relat	ed <i>risk</i>
	ures	
201. 13.2.104	* Failure of functional connection to a ventilator control	
	ble electrical medical systems (PEMS)	
201. 14 <i>Frogrammat</i> 201. 14.101		
	Software life cycle of ME equipment	
201. 15 Construction 201. 15.3.5.101		
201. 15.3.5.101	Additional requirements for rough handling* * Shock and vibration (robustness)	
201. 15.3.5.101.1	* Shock and vibration for a transit-operable ventilator du	
operation	Shock and vibration for a transit-operable ventilator at	
201. 15.4.1	Construction of connectors	
201. 15.101	Mode of operation	
201. 15.102	Delivered oxygen concentration	
201. 15.103	Accessory self-check	
201. 16 <i>ME systems</i>		52
201. 16.1.101	Additional general requirements for ME systems	52
201. 16.2.101	* Additional general requirements for accompanying doc	
of an <i>ME syste</i>	em	
	etic compatibility of ME equipment and ME systems	
201. 101 Gas connecti	ions	52
201. 101.1	* Protection against reverse gas leakage	52
201. 101.2	Connection to a high-pressure input port	53
201. 101.2.1	Connector	53
201. 101.2.2	* Filter	53
201. 101.3	VBS connectors	53
201. 101.3.1	* General	
201. 101.3.2	Other named ports	
201. 101.3.2.1	Patient-connection port	
201. 101.3.2.2	Gas output port and gas return port	54
201. 101.3.2.3	Emergency intake port	54
201. 101.3.2.4	Flow-direction-sensitive components	54
201. 101.3.2.5	* Accessory port	54
201. 101.3.2.6	Gas exhaust port	
201. 101.3.2.7	Temperature sensor port	
	ts for the VBS and accessories	
201. 102.1	* General	
201. 102.2	Labelling	
201. 102.3	Breathing tubes	
201. 102.4	* Water vapour management	
201. 102.4.1	Humidification system	
201. 102.4.2	Heat and moisture exchanger (HME)	56

201. 10	2.6	Breathing system filters	56
201. 10	2.7	Ventilator breathing systems	56
201. 1	.02.7.1	* Leakage from complete VBS	56
201. 1	02.7.2	* Non-invasive ventilation	57
201. 103 °	* Spontaneous	s breathing during loss of power supply	57
201. 104 ;	* Indication o	f duration of operation	57
201. 105	Functional coi	nnection	58
201. 10		General	
201. 10		* Connection to an electronic health record	
201. 10		* Connection to a distributed alarm system	
201. 10		Connection for remote control	
201. 10		Pressure-volume loops	
201. 10		Flow-volume loops	
		latory pause	
201. 10		Expiratory pause	
201. 10		Inspiratory pause	
		tic disturbances — Requirements and tests	
	_		
	-		
206.103		perating functions	
206.102	· ·		
	-	rements, tests and guidance for alarm systems in medical pment and medical electrical systems	
	_	Guide to marking and labelling requirements for	
		and ME systems	66
201.C.1	01	Marking on the outside of ME equipment, ME systems or the	eir
	parts		66
201.C.1	02	Accompanying documents, general	67
201.C.1	03	Accompanying documents, instructions for use	
201.C.1	04	Accompanying documents, technical description	70
Annex D (informative)	Symbols on marking	71
Annex AA	(informative) Particular guidance and rationale	75
		ice	
		articular clauses and subclauses	
) Data interfaces	
		d purpose	
	<u> </u>	u purpose	
		Reference to the essential principles	
) Reference to the general safety and performance	
	-		126
	-	Terminology — Alphabetized index of defined terms	
- IUIIUSI U	~ ~ ~ 7		

Introduction

In this document, the following print types are used:

- Requirements and definitions: roman type;
- Instructions, test specifications and terms defined in Clause 3 of the general standard, in this document or as noted: 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.

In referring to the structure of this document, the term

- "clause" means one of the four numbered divisions within the table of contents, inclusive of all subdivisions (e.g. Clause 201 includes subclauses 201.7, 201.8, etc.);
- "subclause" means a numbered subdivision of a clause (e.g. 201.7, 201.8 and 201.12 are all subclauses of Clause 201).

References to clauses within this document are preceded by the term "Clause" followed by the clause number. References to subclauses within this document are by number only.

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.

For the purposes of this document, the auxiliary verb

- "shall" means that conformance with a requirement or a test is mandatory for conformance with this document,
- "should" means that conformance with a requirement or a test is recommended but is not mandatory for conformance with this document;
- "may" is used to describe permission (e.g. a permissible way to achieve conformance with a requirement or test),
- "can" is used to describe a possibility or capability, and
- "must" is used to express an external constraint.

Annex C contains a guide to the marking and labelling requirements in this document.

Annex D contains a summary of the symbols referenced in this document.

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 Annex AA.

Medical electrical equipment — Part 2-12: Particular requirements for basic safety and essential performance of critical care ventilators

201.1 Scope, object and related standards

Clause 1 of the general standard applies, except as follows:

NOTE The general standard is IEC 60601-1:2005+AMD1:2012.

201.1.1 * Scope

Replacement:

This document applies to the *basic safety* and *essential performance* of a *ventilator* in combination with its *accessories*, hereafter referred to as *ME equipment*:

- intended for use in an environment that provides specialized care for *patients* whose conditions can be life-threatening and who can require comprehensive care and constant monitoring in a *professional healthcare facility*;
 - NOTE 1 For the purposes of this document, such an environment is referred to as a critical care environment. *Ventilators* for this environment are considered life-sustaining.
 - NOTE 2 For the purposes of this document, such a *ventilator* can provide transport within a *professional healthcare facility* (i.e. be a *transit-operable ventilator*).
 - NOTE 3 A critical care *ventilator* intended for use in transport within a *professional healthcare facility* is not considered as an *emergency medical services environment ventilator*.
- intended to be operated by a healthcare professional operator; and
- intended for those *patients* who need differing levels of support from artificial ventilation including for *ventilator-dependent patients*.

A critical care *ventilator* is not considered to utilize a *physiologic closed-loop-control system* unless it uses a physiological *patient* variable to adjust the ventilation therapy settings.

This document is also applicable to those *accessories* intended by their *manufacturer* to be connected to a *ventilator breathing system*, or to a *ventilator*, where the characteristics of those *accessories* can affect the *basic safety* or *essential performance* of the *ventilator*.

NOTE 4 If a clause or subclause is specifically intended to be applicable to *ME equipment* only, or to *ME systems* only, the title and content of that clause or subclause will say so. If that is not the case, the clause or subclause applies both to *ME equipment* and to *ME systems*, as relevant.

Hazards inherent in the intended physiological function of *ME equipment* or *ME systems* within the scope of this document are not covered by specific requirements in this document except in IEC 60601-1:2005, 7.2.13 and 8.4.1.

NOTE 5 Additional information can be found in IEC 60601-1:2005+AMD1:2012. 4.2.

This document is not applicable to *ME equipment* or an *ME system* operating in a *ventilator-operational mode* solely intended for *patients* who are not dependent on artificial ventilation.

NOTE 6 A critical care *ventilator*, when operating in such a *ventilator-operational mode*, is not considered life-sustaining.

This document is not applicable to *ME equipment* that is intended solely to augment the ventilation of spontaneously breathing *patients* within a *professional healthcare facility*.

This document does not specify the requirements for:

- *ventilators* or *accessories* intended for anaesthetic applications, which are given in ISO 80601-2-13[2];
- *ventilators* or *accessories* intended for the *emergency medical services environment*, which are given in ISO 80601-2-84^[3], the future replacement for ISO 10651-3^[4];
- ventilators or accessories intended for ventilator-dependent patients in the home healthcare environment, which are given in ISO 80601-2-72:2015^[5];
- *ventilators* or *accessories* intended for home-care ventilatory support devices, which are given in ISO 80601-2-79:2018^[6] and ISO 80601-2-80:2018^[7];
- obstructive sleep apnoea therapy *ME equipment*, which are given in ISO 80601-2-70^[9];
- continuous positive airway pressure (CPAP) ME equipment;
- high-frequency jet ventilators (HFJVs) and high-frequency oscillatory ventilators (HFOVs), which are given in ISO 80601-2-87^[63];

NOTE 7 A critical care *ventilator* can incorporate high-frequency jet or high-frequency oscillatory *ventilator* operational modes.

- oxygen therapy constant flow ME equipment; and
- cuirass or "iron-lung" ventilation equipment.

201.1.2 Object

Replacement:

The object of this document is to establish *basic safety* and *essential performance* requirements for a *ventilator* and its *accessories*.

¹ ISO 80601-2-79 and ISO 80601-2-80 replace ISO 10651-6, which has been withdrawn.

Accessories are included because the combination of the *ventilator* and the *accessories* needs to be adequately safe. Accessories can have a significant impact on the *basic safety* or *essential performance* of a *ventilator*.

NOTE 1 This document has been prepared to address the relevant *essential principles of safety and performance* of ISO 16142-1:2016 as indicated in Annex CC.

NOTE 2 This document has been prepared to address the relevant general safety and performance requirements of European regulation (EU) 2017/745 as indicated in Annex DD.

201.1.3 Collateral standards

Amendment (add after existing text):

This document refers to those applicable collateral standards that are listed in Clause 2 of the general standard and in 201.2 of this document.

IEC 60601-1-2, IEC 60601-1-6 and IEC 60601-1-8 apply as modified in Clauses 202, 206 and 208 respectively. IEC 60601-1- $3^{[12]}$, IEC 60601-1- $9^{[13]}$, IEC 60601-1-11 and IEC 60601-1-12 do not apply. All other published collateral standards in the IEC 60601-1 series apply as published.

201.1.4 Particular standards

Replacement:

In the IEC 60601 series, particular standards may modify, replace or delete requirements contained in the general standard, including the collateral standards, as appropriate for the particular *ME equipment* under consideration, and may add other *basic safety* or *essential performance* requirements.

A requirement of a particular standard takes priority over IEC 60601-1:2005 or the collateral standards.

For brevity, IEC 60601-1:2005+AMD1:2012 is referred to in this particular document as the general standard. Collateral standards are referred to by their document number.

The numbering of clauses and subclauses of this document corresponds to those of the general standard with the prefix "201" (e.g. 201.1 in this document addresses the content of Clause 1 of the general standard) or applicable collateral standard with the prefix "2xx" where xx is the final digits of the collateral standard document number (e.g. 202.4 in this document addresses the content of Clause 4 of the IEC 60601-1-2 collateral standard, 208.4 in this document addresses the content of Clause 4 of the IEC 60601-1-8 collateral standard, etc.). The changes to the text of the general standard are specified by the use of the following words:

"Replacement" means that the clause or subclause of IEC 60601-1:2005+AMD1:2012 or the applicable collateral standard is replaced completely by the text of this document.

"Addition" means that the text of this document is additional to the requirements of IEC 60601-1:2005+AMD1:2012 or the applicable collateral standard.

"Amendment" means that the clause or subclause of IEC 60601-1:2005+AMD1:2012 or the applicable collateral standard is amended as indicated by the text of this document.

3

Subclauses, figures or tables that are additional to those of the general standard are numbered starting from 201.101. However, due to the fact that definitions in the general standard are numbered 3.1 through 3.147, additional definitions in this document are numbered beginning from 201.3.201. Additional annexes are lettered AA, BB, etc., and additional items aa), bb), etc.

Subclauses or figures that are additional to those of a collateral standard are numbered starting from 20x, where "x" is the number of the collateral standard, e.g. 202 for IEC 60601-1-2, 203 for IEC 60601-1- $3^{[12]}$, etc.

The term "this document" is used to make reference to the general standard, any applicable collateral standards and this particular document taken together.

Where there is no corresponding clause or subclause in this document, the clause or subclause of IEC 60601-1:2005+AMD1:2012 or the applicable collateral standard, although possibly not relevant, applies without modification; where it is intended that any part of IEC 60601-1:2005+AMD1:2012 or the applicable collateral standard, although possibly relevant, is not to be applied, a statement to that effect is given in this particular document.

201.2 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.

Clause 2 of the general standard applies, except as follows:

Replacement:

ISO 7000, Graphical symbols for use on equipment — Registered symbols

ISO 7010:2019, Graphical symbols — Safety colours and safety signs — Registered safety signs

ISO 15223-1:2016, Medical devices — Symbols to be used with medical device labels, labelling and information to be supplied — Part 1: General requirements

IEC 60601-1-2:2014, Medical electrical equipment — Part 1-2: General requirements for basic safety and essential performance — Collateral Standard: Electromagnetic disturbances — Requirements and tests

IEC 60601-1-6:2010+AMD1:2013, Medical electrical equipment — Part 1-6: General requirements for basic safety and essential performance — Collateral Standard: Usability

IEC 60601-1-8:2006+AMD1:2012, Medical electrical equipment — Part 1-8: General requirements for basic safety and essential performance — Collateral Standard: General requirements, tests and guidance for alarm systems in medical electrical equipment and medical electrical systems

IEC 61672-1:2013, Electroacoustics — Sound level meters — Part 1: Specifications

IEC 62304:2006+AMD1:2015, Medical device software — Software life cycle processes

Addition:

ISO 3744:2010, Acoustics — Determination of sound power levels and sound energy levels of noise sources using sound pressure — Engineering methods for an essentially free field over a reflecting plane

ISO 4871:1996, Acoustics — Declaration and verification of noise emission values of machinery and equipment

ISO 5356-1:2015, Anaesthetic and respiratory equipment — Conical connectors — Part 1: Cones and sockets

ISO 5359:2014, Anaesthetic and respiratory equipment — Low-pressure hose assemblies for use with medical gases

ISO 5367:2014, Anaesthetic and respiratory equipment — Breathing sets and connectors

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

ISO 8836:2014, Suction catheters for use in the respiratory tract

ISO 9000:2015, Quality management systems — Fundamentals and vocabulary

ISO 9360-1:2000, Anaesthetic and respiratory equipment — Heat and moisture exchangers (HMEs) for humidifying respired gases in humans — Part 1: HMEs for use with minimum tidal volumes of 250 ml

ISO 9360-2:2001, Anaesthetic and respiratory equipment — Heat and moisture exchangers (HMEs) for humidifying respired gases in humans — Part 2: HMEs for use with tracheostomized patients having minimum tidal volumes of 250 ml

ISO 14937:2009, Sterilization of health care products — General requirements for characterization of a sterilizing agent and the development, validation and routine control of a sterilization process for medical devices

ISO 16142-1:2016, Medical devices — Recognized essential principles of safety and performance of medical devices — Part 1: General essential principles and additional specific essential principles for all non-IVD medical devices and guidance on the selection of standards

ISO 17510:2015, Medical devices — Sleep apnoea breathing therapy — Masks and application accessories

ISO 17664:2017, Processing of health care products — Information to be provided by the medical device manufacturer for the processing of medical devices

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

ISO 19223:2019, Lung ventilators and related equipment — Vocabulary and semantics

ISO 23328-1:2003, Breathing system filters for anaesthetic and respiratory use — Part 1: Salt test method to assess filtration performance

ISO 23328-2:2002, Breathing system filters for anaesthetic and respiratory use — Part 2: Non-filtration aspects

ISO 80369-1:2018, Small-bore connectors for liquids and gases in healthcare applications — Part 1: General requirements

ISO 80601-2-55:2018, Medical electrical equipment — Part 2-55: Particular requirements for the basic safety and essential performance of respiratory gas monitors

ISO 80601-2-74:2017, Medical electrical equipment — Part 2-74: Particular requirements for basic safety and essential performance of respiratory humidifying equipment

IEC 60068-2-27:2008, Environmental testing — Part 2-27: Tests — Test Ea and guidance: Shock

IEC 60068-2-31:2008, Environmental testing — Part 2-31: Tests — Test Ec: Rough handling shocks, primarily for equipment-type specimens

IEC 60068-2-64:2008, Environmental testing — Part 2-64: Tests — Test Fh: Vibration, broadband random and guidance

IEC 60529:1989+AMD1:1999+AMD2:2013, Degrees of protection provided by enclosures (IP Code)

IEC 60601-1:2005+AMD1:2012, Medical electrical equipment — Part 1: General requirements for basic safety and essential performance

IEC 60601-1-10:2007, Medical electrical equipment — Part 1-10: General requirements for basic safety and essential performance — Collateral Standard: Requirements for the development of physiologic closed-loop controllers

IEC 60601-1-11:2015, Medical electrical equipment — Part 1-11: General requirements for basic safety and essential performance — Collateral Standard: Requirements for medical electrical equipment and medical electrical systems used in the home healthcare environment

IEC 60601-1-12:2014, Medical electrical equipment — Part 1-12: General requirements for basic safety and essential performance — Collateral Standard: Requirements for medical electrical equipment and medical electrical systems intended for use in the emergency medical services environment

IEC 60601-2-2:2017, Medical electrical equipment — Part 2-2: Particular requirements for the basic safety and essential performance of high frequency surgical equipment and high frequency surgical accessories

IEC 62366-1:2015, Medical devices — Part 1: Application of usability engineering to medical devices

IEC 62570:2014, Standard practice for marking medical devices and other items for safety in the magnetic resonance environment