INTERNATIONAL STANDARD

ISO 7886-1

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Sterile hypodermic syringes for single use —

Part 1:
Syringes for manual use

Seringues hypodermiques stériles, non réutilisables —
Partie 1: Seringues pour utilisation manuelle

Reference number
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Contents

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Annexes

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.

Draft International Standards adopted by the technical committees are circulated to the member bodies for voting. Publication as an International Standard requires approval by at least 75 % of the member bodies casting a vote.

International Standard ISO 7886-1 was prepared by Technical Committee ISO/TC 84, *Medical devices for injections*, Sub-Committee SC 1, *Syringes, needles and intravascular catheters for single use*.

This first edition of ISO 7886-1 cancels and replaces ISO 7886:1984. It was decided to divide the Standard into two parts, ISO 7886-1 retaining essentially the scope of ISO 7886:1984, and ISO 7886-2 (in course of preparation) being applicable to sterile, single-use syringes for use with power-driven syringe pumps. The major differences between this part of ISO 7886 and ISO 7886:1984 are as follows.

a) In order to reflect the demand for syringes of sizes other than those listed in ISO 7886:1984, this part of ISO 7886 does not specify a range of syringe sizes and allows the syringes to be marked with graduations at greater than the nominal capacity.

b) An informative annex on forces required to operate the syringe plunger has been introduced.

c) The tests for toxicity given in ISO 7886:1984 have been replaced by an informative cross-reference to ISO 10993-1.

d) The informative annex on test methods for compatibility between syringes and injection fluids has been revised.

e) This part of ISO 7886 permits the use on package labelling of the ISO symbol for "do not re-use", but continues to require the written word. Manufacturers are encouraged to use the symbol so as to increase familiarity with it among purchasers and users.

ISO 7886 consists of the following parts, under the general title *Sterile hypodermic syringes for single use*:

— *Part 1: Syringes for manual use*

— *Part 2: Syringes for use with syringe pumps*

Annexes A, B, C and D form an integral part of this part of ISO 7886. Annexes E, F, G, H and J are for information only.

Introduction

This part of ISO 7886 does not give requirements or test methods for freedom from biological hazard. Guidance on biological tests relevant to hypodermic syringes is given in ISO 10993-1, and it is suggested that manufacturers take this guidance into account when evaluating products. Such an evaluation should include the effects of the process whereby the syringes are sterilized. However, national regulations may exist in some countries, and these will override the guidance in ISO 10993-1.

Materials to be used for the construction of syringes are not specified as their selection will depend to some extent upon the design, process of manufacture and method of sterilization employed by individual manufacturers. Guidance on some aspects of the selection of materials is given in annex E.

The materials of the syringe should be compatible with injection fluids. If this is not the case, the attention of the user should be drawn to the exception by labelling the primary container. It is not practicable to specify a universally acceptable test method for incompatibility. However, recommended methods are given in annex F. These test methods can be regarded only as a means of indicating compatibility. The only conclusive test is that of an individual injection fluid with a specific syringe.

Manufacturers of pharmaceuticals use solvents in injectable preparations. Such solvents should be tested by the manufacturer of the injectable preparation for any possible incompatibility with the materials frequently used in syringe construction. The types of material that have received wide acceptance are included in annex E. If an incompatibility exists, the injection should be suitably labelled. The impossibility of testing any one injection fluid with all available syringes is recognized and it is strongly recommended that regulatory authorities and relevant trade associations should recognize the problem and take appropriate measures to assist manufacturers.

Hypodermic syringes specified in this part of ISO 7886 are intended for use with hypodermic needles specified in ISO 7864.

This part of ISO 7886 does not cover syringes for the injection of insulin (see ISO 8537).

In some countries, national pharmacopoeia or government regulations are legally binding and their requirements may take precedence over this part of ISO 7886.

Sterile hypodermic syringes for single use —

Part 1:
Syringes for manual use

1 Scope

This part of ISO 7886 specifies requirements for sterile single-use hypodermic syringes made of plastics materials and intended for the aspiration of fluids or for the injection of fluids immediately after filling.

It excludes syringes for use with insulin (see ISO 8537), single-use syringes made of glass, syringes with needles permanently attached, syringes for use with power-driven syringe pumps, syringes pre-filled with the injection by the manufacturer and syringes supplied with the injection as a kit for filling by a pharmacist.

NOTE 1 A second part of ISO 7886 is being prepared to cover syringes for use with power-driven syringe pumps.

2 Normative references

The following standards contain provisions which, through reference in this text, constitute provisions of this part of ISO 7886. At the time of publication, the editions indicated were valid. All standards are subject to revision, and parties to agreements based on this part of ISO 7886 are encouraged to investigate the possibility of applying the most recent editions of the standards indicated below. Members of IEC and ISO maintain registers of currently valid International Standards.

ISO 594-1:1986, *Conical fittings with a 6 % (Luer) taper for syringes, needles and certain other medical equipment — Part 1: General requirements.*

ISO 594-2:1991, *Conical fittings with a 6 % (Luer) taper for syringes, needles and certain other medical equipment — Part 2: Lock fittings.*

ISO 3696:1987, *Water for analytical laboratory use — Specification and test methods.*

ISO 8601:1988, *Data elements and interchange formats — Information interchange — Representation of dates and times.*

3 Definitions

For the purposes of this part of ISO 7886, the following definitions apply.

3.1 nominal capacity: Capacity of the syringe as designated by the manufacturer.

NOTE 2 Examples are 1 ml, 5 ml, 50 ml.

3.2 graduated capacity: Volume of water at (20 ± 5) °C [or, for tropical countries (27 ± 5) °C] expelled from the syringe when the fiducial line on the piston traverses a given scale interval or intervals.

3.3 total graduated capacity: Capacity of the syringe at the graduation line furthest from the zero graduation line.

NOTE 3 The total graduated capacity may be equal to, or greater than, the nominal capacity.

3.4 maximum usable capacity: Capacity of the syringe when the piston is drawn back to its furthest functional position.

3.5 fiducial line: Line circumscribing the end of the piston for determining the capacity corresponding to any scale reading of the syringe.

4 Nomenclature

The nomenclature for components of hypodermic syringes for single use is shown in figure 1.