

CONSOLIDATED VERSION

VERSION CONSOLIDÉE



**Medical electrical equipment –
Part 2-52: Particular requirements for the basic safety and essential performance
of medical beds**

**Appareils électromédicaux –
Partie 2-52: Exigences particulières de sécurité de base et de performances
essentiels des lits médicaux**



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INTERNATIONAL
ELECTROTECHNICAL
COMMISSION

COMMISSION
ELECTROTECHNIQUE
INTERNATIONALE

REDLINE VERSION

VERSION REDLINE



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INTERNATIONAL ELECTROTECHNICAL COMMISSION

MEDICAL ELECTRICAL EQUIPMENT –

**Part 2-52: Particular requirements for the basic safety
and essential performance of medical beds**

FOREWORD

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This Consolidated version of IEC 60601-2-52 bears the edition number 1.1. It consists of the first edition (2009-12) [documents 62D/795/FDIS and 62D/815/RVD] and its amendment 1 (2015-03) [documents 62D/1186/FDIS and 62D/1232/RVD]. The technical content is identical to the base edition and its amendment.

In this Redline version, a vertical line in the margin shows where the technical content is modified by amendment 1. Additions and deletions are displayed in red, with deletions being struck through. A separate Final version with all changes accepted is available in this publication.

International standard IEC 60601-2-52 has been prepared by IEC subcommittee 62D: Electromedical equipment, of IEC technical committee 62: Electrical equipment in medical practice, and by ISO technical committee 173: Assistive products for persons with disability.

It is published as double logo standard.

This publication has been drafted in accordance with the ISO/IEC Directives, Part 2.

In this standard, 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 CLAUSE 3 OF THE GENERAL STANDARD, IN THIS PARTICULAR STANDARD OR AS NOTED: SMALL CAPITALS.

In referring to the structure of this standard, the term

- “clause” means one of the seventeen numbered divisions within the table of contents, inclusive of all subdivisions (e.g. Clause 7 includes subclauses 7.1, 7.2, etc.);
- “subclause” means a numbered subdivision of a clause (e.g. 7.1, 7.2 and 7.2.1 are all subclauses of Clause 7).

References to clauses within this standard are preceded by the term “Clause” followed by the clause number. References to subclauses within this collateral standard are by number only.

In this standard, 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 standard conform to usage described in Annex H of the ISO/IEC Directives, Part 2. For the purposes of this standard, the auxiliary verb:

- “shall” means that compliance with a requirement or a test is mandatory for compliance with this standard;
- “should” means that compliance with a requirement or a test is recommended but is not mandatory for compliance with this standard;
- “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 Annex AA.

A list of all parts of the IEC 60601 series, published under the general title *Medical electrical equipment*, can be found on the IEC website.

The committee has decided that the contents of the base publication and its amendment will remain unchanged until the stability date indicated on the IEC web site under "<http://webstore.iec.ch>" in the data related to the specific publication. At this date, the publication will be

- reconfirmed,
- withdrawn,
- replaced by a revised edition, or
- amended.

The contents of the corrigendum of September 2010 have been included in this copy.

IMPORTANT – The 'colour inside' logo on the cover page of this publication indicates that it contains colours which are considered to be useful for the correct understanding of its contents. Users should therefore print this document using a colour printer.

INTRODUCTION

In 1996, the IEC published the first edition of the particular standard for electrically operated hospital beds, IEC 60601-2-38. The publication was in response to demand in the field for a universal standard addressing HAZARDS specific to the safety of the hospital bed. Used in conjunction with a MANUFACTURER'S RISK ASSESSMENT, the standard was felt to be the current thinking on establishing a basic safety benchmark for industry.

An amendment of IEC 60601-2-38 issued in 1999 recognized the need to mitigate against a RISK of PATIENT entrapment in the SIDE RAILS, again combined with the use of the MANUFACTURER'S RISK ASSESSMENT. Although this improved the particular standard, it still was centered upon electrically operated hospital beds, and failed to take into account manually operated hospital beds and products in other medical environments.

In 2000, the EN 1970 standard (*Adjustable beds for DISABLED PERSONS – Requirements and test methods*) was published, which addressed beds used by DISABLED PERSONS to alleviate or compensate for a disability or handicap. This standard offered a broadened scope in conjunction with IEC 60601-2-38, but after the edition of Amendment 1 to IEC 60601-2-38, the opportunity presented itself to combine the two standards to a common, international standard.

As work began on the integration, the IEC adjusted its stance on BASIC SAFETY and ESSENTIAL PERFORMANCE, integrating them into the third edition of IEC 60601-1. It therefore became necessary to align the new standard with the third edition. The particular standard was given a new number, IEC 60601-2-52, and work began on alignment to third edition.

This particular standard, therefore, is the realization of much work in alignment, and scope adjustment between IEC 60601-2-38, EN 1970, and the third edition of IEC 60601-1. It represents the current thinking in BASIC SAFETY and ESSENTIAL PERFORMANCE of the MEDICAL BED as used to alleviate illness of PATIENTS and disability of DISABLED PERSONS. This is the effort of a joint working group of the IEC and the ISO.

MEDICAL ELECTRICAL EQUIPMENT –

Part 2-52: Particular requirements for the basic safety and essential performance of medical beds

201.1 Scope, object and related standards

Clause 1 of the general standard¹⁾ applies, except as follows:

201.1.1 * Scope

Replacement:

This International Standard applies to the BASIC SAFETY and ESSENTIAL PERFORMANCE of MEDICAL BEDS as defined in 201.3.212, intended for ADULTS, ~~hereafter referred to as MEDICAL BED,~~ as defined in ~~201.3.212~~ 201.3.219.

If a clause or subclause is specifically intended to be applicable to a MEDICAL BED 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 MEDICAL BED and to ME SYSTEMS, as relevant.

HAZARDS inherent in the intended physiological function of MEDICAL BED or ME SYSTEMS within the scope of this standard are not covered by specific requirements in this standard except in 7.2.13 and 8.4.1 of the general standard.

NOTE See also 4.2 of the General Standard.

201.1.2 Object

Replacement:

The object of this particular standard is to establish particular BASIC SAFETY and ESSENTIAL PERFORMANCE requirements for MEDICAL BEDS as defined in 201.3.212, intended for ADULTS as defined in 201.3.219.

201.1.3 Collateral standards

Addition:

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

IEC 60601-1-3, IEC 60601-1-8 and IEC 60601-1-10²⁾ do not apply. All other published collateral standards in the IEC 60601-1 series apply as published.

¹⁾ The general standard is IEC 60601-1:2005, *Medical electrical equipment – Part 1: General requirements for basic safety and essential performance*.

²⁾ 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*

201.1.4 Particular standards

Replacement:

In the IEC 60601 series, particular standards may modify, replace or delete requirements contained in the general standard and collateral standards as appropriate for the particular ME EQUIPMENT under consideration, and may add other BASIC SAFETY and ESSENTIAL PERFORMANCE requirements.

A requirement of a particular standard takes priority over the general standard.

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

The numbering of clauses and subclauses of this particular standard corresponds to that of the general standard with the prefix "201" (e.g. 201.1 in this standard addresses the content of Clause 1 of the general standard) or applicable collateral standard with the prefix "20x" where x is the final digit(s) of the collateral standard document number (e.g. 202.4 in this particular standard addresses the content of Clause 4 of the IEC 60601-1-2 collateral standard, 203.4 in this particular standard addresses the content of Clause 4 of the IEC 60601-1-3 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 the general standard or applicable collateral standard is replaced completely by the text of this particular standard.

"Addition" means that the text of this particular standard is additional to the requirements of the general standard or applicable collateral standard.

"Amendment" means that the clause or subclause of the general standard or applicable collateral standard is amended as indicated by the text of this particular standard.

Subclauses, figures or tables which 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 3.139, additional definitions in this standard are numbered beginning from 201.3.201. Additional annexes are lettered AA, BB, etc., and additional items aa), bb), etc.

Subclauses, figures or tables which 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, etc.

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

Where there is no corresponding clause or subclause in this particular standard, the clause or subclause of the general standard or applicable collateral standard, although possibly not relevant, applies without modification; where it is intended that any part of the general standard or applicable collateral standard, although possibly relevant, is not to be applied, a statement to that effect is given in this particular standard.

201.2 Normative references

NOTE Informative references are listed in the bibliography on page 81.

Clause 2 of the general standard applies except as follows:

Addition:

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

201.3 Terms and definitions

For the purposes of this document, the terms and definitions given in IEC 60601-1:2005 apply, except as follows:

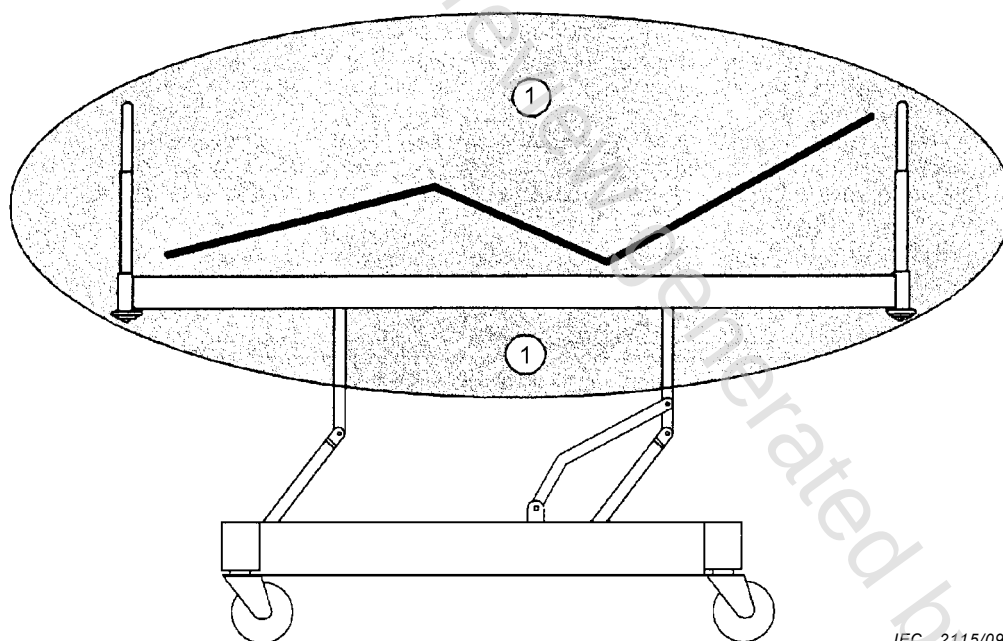
NOTE An index of defined terms is found beginning on page 82.

201.3.8

APPLIED PART

Addition:

The APPLIED PART includes all parts of the MEDICAL BED that are within reach of the PATIENT, even if they are underneath the MATTRESS SUPPORT SURFACE (see Figure 201.101)



IEC 2115/09

Key

1 Region of APPLIED PART including ACCESSORIES

Figure 201.101 – APPLIED PART

201.3.76

PATIENT

Replacement:

person undergoing a medical procedure or DISABLED PERSON