Singapore Standards Council

SS IEC 60601-1-10 : 2018
IEC 60601-1-10:2007+A1:2013, IDT
(ICS 11.040)

SINGAPORE STANDARD

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

Published by

Enterprise Singapore

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This Singapore Standard was approved on 15 November 2018 by the Biomedical and Health Standards Committee under the purview of the Singapore Standards Council.

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The National Mirror Working Group on IEC SC62D MT20, appointed by the Technical Committee to assist in the preparation of this standard, comprises the following experts who contribute in their *individual capacity*:

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Secretary	:	Mr Kevin Tan
Members	:	Mr Peter Haywood
		Dr Ho Teck Tuak
		Mr Watson Ong
		Mr Peh Ruey Feng
		Prof Tong Yen Wah

The organisations in which the experts of the National Mirror Working Group are involved are:

Advent Access Pte Ltd
AWAK Technologies Pte Ltd
Kidney Dialysis Foundation
National University of Singapore
Temasek Polytechnic
The Institution of Engineers, Singapore

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National Foreword

This Singapore Standard was prepared by the National Mirror Working Group on IEC SC62D MT20 appointed by the Technical Committee on Medical Devices under the direction of the Biomedical and Health Standards Committee.

This standard is identical with IEC 60601-1-10:2007+A1:2013, “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”, published by the International Electrotechnical Commission.

Attention is drawn to the following:

1. Where appropriate, the words “International Standard” shall be read as “Singapore Standard”.

2. Where reference to a particular part of IEC 60601 is made, the appropriate Singapore Standard (which is an identical adoption of that part of IEC 60601) shall be referenced. The reference to other International Standards shall be replaced by the following Singapore Standards:

International Standard	Corresponding Singapore Standard
ISO 14971	SS ISO 14971
ISO 14001:2004	SS ISO 14001 : 2015
ISO 14040:2006	SS ISO 14040 : 2017

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

NOTE

1. *Singapore Standards (SSs) and Technical References (TRs) are reviewed periodically to keep abreast of technical changes, technological developments and industry practices. The changes are documented through the issue of either amendments or revisions.*

2. *An SS or TR is voluntary in nature except when it is made mandatory by a regulatory authority. It can also be cited in contracts making its application a business necessity. Users are advised to assess and determine whether the SS or TR is suitable for their intended use or purpose. If required, they should refer to the relevant professionals or experts for advice on the use of the document. Enterprise Singapore shall not be liable for any damages whether directly or indirectly suffered by anyone or any organisation as a result of the use of any SS or TR.*

3. *Compliance with a SS or TR does not exempt users from any legal obligations.*

INTERNATIONAL ELECTROTECHNICAL COMMISSION

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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

FOREWORD

1) The International Electrotechnical Commission (IEC) is a worldwide organization for standardization comprising all national electrotechnical committees (IEC National Committees). The object of IEC is to promote international co-operation on all questions concerning standardization in the electrical and electronic fields. To this end and in addition to other activities, IEC publishes International Standards, Technical Specifications, Technical Reports, Publicly Available Specifications (PAS) and Guides (hereafter referred to as "IEC Publication(s)"). Their preparation is entrusted to technical committees; any IEC National Committee interested in the subject dealt with may participate in this preparatory work. International, governmental and non-governmental organizations liaising with the IEC also participate in this preparation. IEC collaborates closely with the International Organization for Standardization (ISO) in accordance with conditions determined by agreement between the two organizations.
2) The formal decisions or agreements of IEC on technical matters express, as nearly as possible, an international consensus of opinion on the relevant subjects since each technical committee has representation from all interested IEC National Committees.
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8) Attention is drawn to the Normative references cited in this publication. Use of the referenced publications is indispensable for the correct application of this publication.
9) Attention is drawn to the possibility that some of the elements of this IEC Publication may be the subject of patent rights. IEC shall not be held responsible for identifying any or all such patent rights.

This Consolidated version of IEC 60601-1-10 bears the edition number 1.1. It consists of the first edition (2007) [documents 62A/576/FDIS and 62A/585/RVD] and its amendment 1 (2013) [documents 62A/888/FDIS and 62A/896/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.

This publication has been prepared for user convenience.

International standard IEC 60601-1-10 has been prepared by IEC subcommittee 62A: *Common aspects of electrical equipment used in medical practice*, of IEC technical committee 62: *Electrical equipment in medical practice*, and ISO subcommittees SC1: *Breathing attachments and anaesthetic machines*, and SC3: *Lung ventilators and related devices* of ISO technical committee 121: *Anaesthetic and respiratory equipment*.

It is published as double logo standard.

This first edition constitutes a collateral standard to IEC 60601-1: *Medical electrical equipment – Part 1: General requirements for safety and essential performance* hereafter referred to as the general standard.

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

In the 60601 series of publications, collateral standards specify general requirements for safety applicable to:

– a subgroup of MEDICAL ELECTRICAL EQUIPMENT (e.g. radiological equipment); or

– a specific characteristic of all MEDICAL ELECTRICAL EQUIPMENT, not fully addressed in the general standard (e.g. ALARM SYSTEMS).

In this collateral 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 COLLATERAL STANDARD OR AS NOTED: SMALL CAPITALS.

In referring to the structure of this standard, the term

– “clause” means one of the eight numbered divisions within the table of contents, inclusive of all subdivisions (e.g. Clause 8 includes Subclauses 8.1, 8.2, etc.);

– “subclause” means a numbered subdivision of a clause (e.g. 8.1, 8.2 and 8.2.1 are all subclauses of Clause 8).

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

Clauses, subclauses and definitions for which a rationale is provided in informative Annex A are marked with an asterisk (*).

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

NOTE The attention of National Committees is drawn to the fact that equipment manufacturers and testing organizations may need a transitional period following publication of a new, amended or revised IEC or ISO publication in which to make products in accordance with the new requirements and to equip 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.

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 publication using a colour printer.

INTRODUCTION

The use of PHYSIOLOGIC CLOSED-LOOP CONTROLLERS in ME EQUIPMENT and ME SYSTEMS are expected to provide a successful strategy to improve PATIENT safety and reduce healthcare costs [9][10][11][12][13] [1)]. New RISKS that are not directly addressed by previous standards are emerging in the development of this equipment. MANUFACTURERS employ a variety of methods to validate the safety and integrity of control systems with varying degrees of success. Classical methods of software VALIDATION for PHYSIOLOGIC CLOSED-LOOP CONTROLLERS can be insufficient to ensure performance with acceptable RISKS under all clinical and physiologic conditions.

1) Figures in square brackets refer to the Bibliography.

INTRODUCTION TO THE AMENDMENT

The first edition of IEC 60601-1-10 was published in 2007. This amendment is intended to update the references to IEC 60601-1:2005 to include Amendment 1:2012, to update IEC 60601-1-6:2006 to IEC 60601-1-6:2010, including its Amendment 1 and to update references to IEC 60601-1-8:2006 to include its Amendment 1:2012. This amendment also removes the normative reference to IEC 62304:2006. This collateral standard made reference to IEC 62304 because elements of the software process were not fully covered by Clause 14 of IEC 60601-1:2005. Amendment 1 to IEC 60601-1:2005 incorporates the needed software process requirement into Clause 14. Therefore, it is redundant and potentially confusing to have IEC 62304 explicitly called out in this collateral standard.

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

1 Scope, object and related standards

1.1 * Scope

This International Standard applies to the BASIC SAFETY and ESSENTIAL PERFORMANCE of MEDICAL ELECTRICAL EQUIPMENT and MEDICAL ELECTRICAL SYSTEMS, hereafter referred to as ME EQUIPMENT and ME SYSTEMS.

This collateral standard specifies requirements for the development (analysis, design, VERIFICATION and VALIDATION) of a PHYSIOLOGIC CLOSED-LOOP CONTROLLER (PCLC) as part of a PHYSIOLOGIC CLOSED-LOOP CONTROL SYSTEM (PCLCS) in ME EQUIPMENT and ME SYSTEMS to control a PHYSIOLOGIC VARIABLE.

NOTE A PHYSIOLOGIC VARIABLE can be a body chemistry (e.g. electrolytes, blood glucose), a physical property (e.g. PATIENT temperature, electrophysiologic, hemodynamic), or a pharmaceutical concentration.

This collateral standard applies to various types of PCLC, e.g. linear and non-linear, adaptive, fuzzy, neural networks.

This collateral standard does not specify:

– additional mechanical requirements; or

– additional electrical requirements.

This collateral standard applies to a closed-loop controller (see Figure 1) that sets the CONTROLLER OUTPUT VARIABLE in order to adjust (i.e., change or maintain) the measured PHYSIOLOGIC VARIABLE by relating it to the REFERENCE VARIABLE.

A closed-loop controller that maintains a physical or chemical VARIABLE, using feedback that is not measured from a PATIENT, is outside the scope of this standard.

1.2 Object

The object of this collateral standard is to specify general requirements that are in addition to those of the general standard and to serve as the basis for particular standards.

1.3 Related standards

1.3.1 IEC 60601-1

For ME EQUIPMENT and ME SYSTEMS, this collateral standard complements IEC 60601-1.

When referring to IEC 60601-1 or to this collateral standard, either individually or in combination, the following conventions are used:

- "the general standard" designates IEC 60601-1 alone (IEC 60601-1:2005+A1:2012);
- "this collateral standard" designates IEC 60601-1-10 alone (IEC 60601-1-10:2007 +A1:2013);
- "this standard" designates the combination of the general standard and this collateral standard.

1.3.2 Particular standards

A requirement in a particular standard takes priority over the corresponding requirement in this collateral standard.

2 Normative references

The following documents, in whole or in part, are normatively referenced in this document and are indispensable for its application. For dated references, only the edition cited applies. For undated references, the latest edition of the referenced document (including any amendments) applies.

IEC 60601-1:2005, *Medical electrical equipment – Part 1: General requirements for basic safety and essential performance*
Amendment 1:2012

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

IEC 60601-1-8:2006, *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*
Amendment 1:2012

IEC 62366:2007, *Medical devices – Application of usability engineering to medical devices*

ISO 14971, *Medical devices – Application of risk management to medical devices*