

ENGINEERING, FACILITIES, AND EQUIPMENT

Biomedical Equipment Maintenance

Correction to Air Transportable Clinic (ATC) (3kW) Power Cable Assembly Article

AFMLL 04-97 contained an article *Update to ATC Generator Instructions*. Attachment 1, page 10 listed the necessary components to modify the power cable for the 3kW generator authorized in the Air Transportable Clinic (ATC) TA. However, a mistake was made in the nomenclature for the NEMA connector. The nomenclature should read:

NEMA L5-30P Connector (not NEMA 15-30P)

This is crucial when trying to purchase the item locally. We would like to thank SrA Gonzales at MacDill AFB FL, for identifying and reporting the error. (AFMLO/FOM-E, TSgt Steve Walker, DSN 343-4039)

Career Advisor's Corner

Career Development Courses (CDCs) - *What Do We Need To Do?*

I have received questions from the field about the Career Development Course for the Biomedical Engineering Technicians. These questions include:

- *When can I start?*
- *Do I really have two years to complete the CDC's?*
- *How long do I have to complete both A and B volume sets?*

There are many different ideas in the BMET community as to how long trainees have to complete CDC's, and when they can be ordered.

To simplify matters, all new trainees will have CDC's ordered during in-processing. Volume set A will be issued after trainees have been on station three months. Each trainee will complete one volume per month for both volume sets. This will be a total training time of four months for the four volumes in set A and four months for the four volumes in set B. Add two months for the end-of-course test for each volume set, A and B. The end result will be that CDC A and B course will be completed in ten months not to exceed a maximum time of twelve months.

Please ensure the local on-the-job training manager receives this article.

Contact CMSgt Alan Christian for questions or additional information. (AFMLO/FOM-E, CMSgt Alan Christian, DSN 343-4040)

Facilities Management

American Society for Healthcare Engineering (ASHE) Fax-on-Demand Service

Did you know you can receive certain American Society for Healthcare Engineering (ASHE) documents and information just by making a simple phone call? That's right! ASHE has a very user-friendly Fax-on-Demand Service. The phone number for this service is 1-800-PMG-FAX4 (1-800-764-3294). Once you're connected, just follow the instructions. First, you'll be asked to input the 6-digit code for the document you want. If you don't know the 6-digit code, you can request an index be faxed to you. (An excerpt of the index is included at **Attachment 1**, page 1 of this AFMLL.

You do not have to be a member of ASHE or have any kind of password to use this service. All you need is a fax machine. (AFMLO/FOM-F, Capt Rhonda Hillman, DSN 343-2117)

Health Facilities Management Magazine On-Line

Did you know you can access *Health Facilities Management (HFM)* Magazine via the World Wide Web? That's right! American Hospital Publishing, Inc. (AHPI) recently added *Health Facilities Management* Magazine to their home page. Not only can you view the most recent edition of *Health Facilities Management*, you can also search for articles that appeared in past issues of the magazine--as far back as the December 1995 issue. This service is extremely useful if you recall an article, but can't remember the exact title or issue it appeared in. Just type in a few key words and hit "Enter."

To access the American Hospital Publishing Home Page, use the following address:

<http://www.AmHPI.com/>

In addition to *Health Facilities Management* Magazine, there are several other professional journals available on this home page. They include:

- *Hospitals and Health Networks*
- *American Hospital Association (AHA) News*
- *Trustee*
- *Mary Grayson on Health Care*
- *Materials Management in Health Care (coming soon)*

Like *HFM*, you can search back issues for articles, just by typing in a key word.

The American Hospital Publishing, Inc. home page is available for use free of charge, and no password is required for access. So the next time you need some information quickly, you will have a very powerful resource at your fingertips. (AFMLO/FOM-F, Capt Rhonda Hillman, DSN 343-2117)

Carrying of Firearms in a U.S. Air Force Medical Facility

What do the following situations have in common?

- *An on-duty security policeman needs to pick up a prescription at the Medical Treatment Facility (MTF) over-the-counter pharmacy.*
- *An on-duty security policeman is scheduled for an eye exam at the MTF during their lunch hour.*

- *An on-duty security policeman is meeting friends for lunch in the MTF dining hall.*

They are all examples of situations when the security policeman must secure his or her weapon before entering the MTF.

Air Force Instruction 31-207, *Arming and Use of Force by Air Force Personnel*, 1 August 1995, implements Air Force Policy Directive 31-2, *Law Enforcement*. It gives war and peacetime requirements for arming U.S. Air Force personnel and the use of deadly force. It applies to military, civilian, and contract personnel, as well as military personnel from other U.S. military branches assigned or attached to Air Force units. The following paragraph pertains to MTFs:

Carrying Firearms in a U.S. Air Force Medical Facility. Only people performing official military duties that require them to be armed may bear a firearm in an Air Force medical treatment facility.

This paragraph means that unless a security policeman is responding to a shooting, burglary, hostage situation, or other incident, crime, or crisis situation occurring in the MTF, he or she may not carry a weapon into the MTF. This is true even if the security policeman will be in the MTF for just a few minutes, as would be the case in making an appointment, or picking up a prescription.

The above interpretation of AFI 31-207, paragraph 2.18, was requested from Headquarters, Air Force Security Forces Center, Kirtland AFB NM after several MTFs informed us that paragraph 2.18, as written, was unclear. By virtue of being “on duty,” most security personnel carry weapons. For this reason, paragraph 2.18 causes confusion. HQ AFSFC agreed to clarify the wording in a future update to the AFL. In the meantime, please follow this guidance if you are faced with this question. (AFMLO/FOM-F, Capt Rhonda Hillman, DSN 343-2117 or Capt Robert Zak, DSN 343-4031)

Facilities Management Information Survey

Look for the *1997 Facilities Management Information Survey* coming your way soon. This survey was initiated in order to assess the changes that have come about in the Facilities Management field since the last survey as well as update our database. The surveys were recently mailed out and you should have a copy by now. Please take the time to fill them out accurately and either fax (preferred method) or mail them back as soon as possible. (AFMLO/FOM-F, Capt Robert Zak, DSN 343-4031)

Quality Assurance

Food and Drug Administration (FDA) Recalls/Alert Notices

Attachment 2, paragraph 1, provides information on FDA medical equipment recalls and alerts. Personnel from clinical engineering, biomedical equipment maintenance, quality assurance, and safety should follow the guidance provided to ensure the effective maintenance and management of medical equipment. (AFMLO/FOM-P, Capt David Zemkosky, DSN 343-4028)

FDA Issued Warning on Rented or Leased Medical Devices

The FDA issued a letter dated April 17, 1997, warning users of rented or leased medical devices exchanged between healthcare facilities that the devices may not be properly cleaned, disinfected, or sterilized before delivery to a healthcare facility. FDA states that improper handling of devices between uses can contaminate facilities and expose individuals to infectious, biohazardous material and that organic matter remaining on equipment can

compromise sterilization. FDA states that two factors contributing to this hazard are failure of rental or leasing contracts between healthcare facilities and third parties to clearly identify the party responsible for cleaning, disinfecting, and sterilizing used medical equipment and failure to clarify whether healthcare facility personnel handling used equipment must clean, disinfect, and sterilize it before it is returned to the third-party supplier.

To reduce the risk of exposing patients and healthcare workers to contamination from medical devices that have not been properly cleaned, disinfecting, and sterilized, the FDA recommends that healthcare facilities (1) review all rental and leasing contracts or agreements to ensure that parties responsible for cleaning, disinfecting, and sterilizing equipment are clearly identified, (2) ensure that all personnel responsible for equipment cleaning are aware of their responsibilities and are properly trained and equipped, (3) review operating procedures of third-party suppliers responsible for equipment cleaning, disinfection, and sterilization to ensure that the third-party's facilities, equipment, processes, and personnel can adequately perform these operations, and ensure that the third-party is familiar with manufacturer instructions for device cleaning, disinfecting, and sterilization, (4) when third-party suppliers are responsible for cleaning, disinfecting, and sterilizing equipment, ensure that healthcare personnel responsible for returning the devices are properly trained and equipped to handle, package, and label contaminated equipment for shipment to the supplier, and (5) ensure that third-party suppliers that reprocess or refurbish devices between uses are familiar with the manufacturer's product specifications. Establish QA procedures to ensure that reprocessed or refurbished devices fulfill the manufacturer's specifications. FDA also reminds healthcare personnel working at facilities that are subject to FDA's user facility reporting requirements to report any adverse events resulting from improperly cleaned, disinfecting, or sterilized medical devices.

For further information regarding improperly cleaned, disinfected, and sterilized medical equipment, contact Nancy Pressly by mail at the Office of Surveillance and Biometrics, Center for Devices and Radiological Health, HFZ-510, 1350 Piccard Drive, Rockville, MD 20850; by fax at (301) 594-2968; or by e-mail at nap@cdrh.fda.gov. (AFMLO/FOM-P, Capt David Zemkosky, DSN 343-4028)

Medical Equipment Management

Suggestion to Modify the Life Support Products (LSP) Inc., Oxygen Regulator

The LSP positive pressure oxygen inhalator, suction, and aspirator unit (NSN 6515-01-276-6826) is configured to use an aluminum "D" or Jumbo "D" size oxygen cylinder. If the oxygen regulator is installed on a standard stock listed steel "D" cylinder (NSN 6505-00-132-5181), the lower Diameter Index Safety System (DISS) fitting ends up too close to the safety cap threads for attachment of the oxygen hose. The hose will not seat properly and results in leaking oxygen. This "straight" DISS fitting can be replaced with a "45 degree" DISS fitting to allow proper attachment of the oxygen hose. The replacement fitting should conform to the DISS standard for oxygen. DISS outlet valves are generally used with high-purity products, toxics, and corrosives. Valves equipped with DISS outlets provide a metal-to-metal seal with good leak integrity. The DISS outlet has a self-sealing dust plug and a primary check unit designed to seal when equipment is removed, and has a maximum working pressure of 200 psi (1,379 kPa). Since steel "D" cylinders are more readily available within the DoD inventory, this modification can reduce the number of unique cylinders required. Steel "D" cylinders also allow a safety cap to be installed, which affords an additional measure of safety during transportation.

Thanks to Leigh J. Keohan at Hurlburt Field for suggesting this modification which allows use of standard steel "D" cylinders with the LSP oxygen regulator.

If your facility adopts this suggestion, please complete an AF Form 1000-1, Suggestion Evaluation and Transmittal, citing the suggestion number (HURL-960212), and forward it to the originating base suggestion program office (16 SOW/MO, 417 Cody Ave., Hurlburt Field, FL 32544-5439). (AFMLO/FOM-E, Mr. Dave Baker, DSN 343-7487)

Medical Equipment Blanket Purchase Agreements (BPAs) Available from DVA On-Site Contracting Office

DVA Special Services at AFMLO has awarded several blanket purchase agreements (BPAs) against the Federal Supply Schedule (FSS) for defibrillators and patient monitors (see **Attachment 1**, page 2). FSS contract BPA's eliminate contracting and open market costs such as search for sources, the development of technical documents and solicitations, and the evaluation of bids and offers.

These BPAs were negotiated in an attempt to arm you with additional procurement tools that would provide the lowest price available. Any government contracting official may place calls against these BPAs by calling the respective company and referencing the BPA number. Your local contracting office can place calls against this BPA or you can forward your requirements to the VA contracting office at AFMLO.

These BPAs *guarantee the lowest price* available to the government for these items. Each agreement contains several equipment configurations and model numbers. *These BPAs are available for use*

by all government agencies. (AFMLO/FOM-P, Capt David Zemkosky, DSN 343-4028)

Shared Procurement Equipment Items Currently Available

AFMLL 04-97, Attachment 1, pages 1 and 2, contains a list of all current Shared Procurement contracts and optional contracts available through the Defense Personnel Support Center (DPSC). If you plan to order any of these items for your facility, use the specific ordering instructions and overall program guidance contained in AFMLL 04-96, pages CE-4 and CE-5. (AFMLO/FOM-P, Capt David Zemkosky, DSN 343-4028)

"Piggyback" Contracts Currently Available

AFMLL 16-96, Attachment 1, pages 4 and 5, contains a list of all current "piggyback" contracts currently available through DPSC. These contracts will allow facilities to "piggyback" requirements onto existing orders placed for specific quantities. Many of these contracts are designed to buy large quantities at reduced prices, and are written with the option of buying additional quantities at the same price. The list includes available quantities and "Order By" dates. To order, send your MILSTRIP requisitions to DPSC, and reference the contract number (from the listing) in the notes section. (AFMLO/FOM-P, Capt David Zemkosky, DSN 343-4028)

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