

## Anaesthetic Machines Maintenance

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**Functional Sub group** Corporate Administration - Asset Management  
Personnel/Workforce - Occupational Health & Safety

**Summary** States requirements re checking, maintenance and repairing of anaesthetic machines.

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**Applies to** Area Health Services/Chief Executive Governed Statutory Health Corporation, Board Governed Statutory Health Corporations, Affiliated Health Organisations - Non Declared, Dental Schools and Clinics, Government Medical Officers, Private Hospitals and Day Procedure Centres, Public Hospitals

**Distributed to** Public Health System, Dental Schools and Clinics, Government Medical Officers, Health Professional Associations and Related Organisations, NSW Department of Health, Public Hospitals, Private Hospitals and Day Procedure Centres

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### Director-General

This Policy Directive may be varied, withdrawn or replaced at any time. Compliance with this directive is **mandatory** for NSW Health and is a condition of subsidy for public health organisations.

**CIRCULAR**

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**MAINTENANCE OF ANAESTHETIC MACHINES**

Hospitals are aware of the need to maintain anaesthetic machines in perfect working order and of the importance of checking their operation **before each use**. Suppliers of anaesthetic machines normally provide a "protocol" for checking the operation of the patient circuit, and a copy of this document should be located with each machine. These checks can and must be made by hospital staff.

An excellent protocol has been developed by the Faculty of Anaesthetists, Royal Australasian College of Surgeons, and this has been adopted for use by at least one major manufacturer which has supplied machines in New South Wales. In the case of "Boyles" machines supplied by C.I.G. Medishield Ramsay, the protocol is printed on a laminated board and is known as Part 512060.

Hospitals using "Boyles" anaesthetic machines should ensure that the protocol is retained with each machine. Additional copies of the document may be obtained from C.I.G. Medishield Ramsay if required.

Faults detected by use of the protocol may be corrected by the anaesthetist, but if repairs to the anaesthetic machine are required these should only be carried out by qualified specialist personnel.

**SERVICE ARRANGEMENTS:**

Many hospitals take advantage of service contracts arranged with the suppliers of machines. In several major hospitals there is a high level of skill available to undertake local servicing, and repairs and maintenance of anaesthetic machines is carried out routinely at those hospitals.

Distributed in accordance with circular list(s):

A 101    B            C 108    D 67    E 16  
F            G 37    H            I 23    J 76  
K            L 20    M            N            P            Q

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In accordance with the provisions incorporated in the Accounts and Audit Determination, the Board of Directors, Chief Executive Officers and their equivalents, within a public health organisation, shall be held responsible for ensuring the observance of Departmental policy (including circulars and procedure manuals) as issued by the Minister and the Director-General of the Department of Health.

Whilst recognising that such routine servicing of anaesthetic machines is undertaken by hospitals which employ qualified specialist technicians, the Department of Health emphasises the need for absolute care being taken and for only spare parts which are recommended by the manufacturers being used. Hospitals without appropriately trained and qualified Technical staff should have the work done by the qualified personnel from the respective suppliers.

Apart from the need to ensure that maximum patient safety is maintained at all times, there is a medico-legal implication involved in determining the precise allocation of duties in respect to the maintenance of anaesthetic machines. It is imperative that there be no confusion regarding the range of work to be undertaken routinely by qualified hospital staff and that which is to be effected only by the suppliers.

**Please bring the contents of this Circular to the attention of all staff involved with the use and maintenance of anaesthetic machines.**

D.T. Richmond  
Secretary