

National foreword

This British Standard is the English language version of EN 12022:1998.

jges.con The UK participation in its preparation was entrusted to Technical Committee CH/23, Cardiovascular implants, dialysis systems and oxygenators, which ha responsibility to:

- aid enquirers to understand the text;
- present to the responsible international/European Imittee any enquiries on the interpretation, or proposals for keep the UK interests informed;
- monitor related international and European developments and promulgate them in the U

A list of organ epresented on this committee can be obtained on request to its secre

Cross-references

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Summary of pages

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This European Standard was approved by CEN on 10 June 1998.

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CEN

European Committee for Standardization Comité Européen de Normalisation Europäisches Komitee für Normung

Central Secretariat: rue de Stassart 36, B-1050 Brussels

Foreword

This European Standard has been prepared by Technical Committee CEN/TC 205, Non-active medical devices, the Secretariat of which is held by BSI.

This European Standard shall be given the status of a national standard, either by publication of an identical text or by endorsement, at the latest by July 1999, and conflicting national standards shall be withdrawn at the latest by July 1999.

This European Standard is based on ISO 7199 Cardiovascular implants and artificial order(s) Blood-gas exchangers (oxygenators), persecular Technical Committee TC 150 of the International Organization for Standardization.

According to the CEN/CENELEC Internal Regulations, the national standards organizations of the following countries are bound to implement this European Standard: Austria, Belgium, Czech Republic, Denmark, Finland, France, Germany, Greece, Iceland, Ireland, Italy, Luxembourg, Netherlands, Norway, Portugal, Spain, Sweden, Switzerland and the United Kingdom.

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1

Introduction

This European Standard is intended to ensure that devices designed to effect the exchange of gases in support of, or as a substitution for the normal respiratory function of the lungs have been adequately tested for both their safety and function, and that extracorporeal device characteristics are appropriately disclosed when labelling the device.

This European Standard therefore contains recommended procedures to be used for evaluational extracorporeal blood-gas exchangers. Type test procedures for determination of the gas transfer, blood cell damage and heat exchanged tenormance are described, although limits for these characteristics are not specified. Ready identification of the performance characteristics should, however, assist the user in the selection of a blood-gas exchanger which will suit the needs of the patient.

This European Standard also includes minimum reporting requirements, which will allow the user to compare performance characteristics of blood-gas exchangers of different designs in a standard way.

This European Standard makes reference to other standards where methods for determination of characteristics common to medical devices can be found.

No provisions have been made for quantification of microbubble generation or for non-formed elements of bovine blood, due to the fact that there is currently no consensus regarding satisfactorily reproducible test methods.

Requirements for animal and clinical studies have not been included in this European Standard. Such studies can be part of a manufacturer's quality system.

This European Standard contains only those requirements that are specific to blood-gas exchangers. Non-specific requirements are covered by references to other standards listed in the normative references section. Since non-toxicity is anticipated to be the subject of a future standard, this European Standard does not cover non-toxicity.

1 Scope

This European Standard specifies requirements for sterile, single-use, extracorporeal blood-gas exchangers intended for supply of oxygen to, and removal of carbon dioxide from, the blood of humans.

This European Standard also applies to heat exchangers that are integral parts of blood-gas exchangers and to external equipment unique to the use of the device.

This European Standard does not apply to:

- implanted blood-gas exchangers;
- liquid exchangers;
- extracorporeal circuits (blood tubing);
- separate heat exchangers;
- separate ancillary devices.

2 Normative references

This European Standard incorporates, by dated or undated reference, provisions from other publications. These normative references are dited at the appropriate places in the text and the publications are listed hereafter. I indated references, subsequent amendments to or revisions of any of these publications apply to this European Standard only when incorporated in it by amendment or revision. For undated references, the latest edition of the publications referred to applies.

EN 550, Sterilization of medical devices — Validation and routine control of ethylene oxide sterilization.

EN 552, Sterilization of medical devices — Validation and routine control of sterilization by radiation.

EN 554, Sterilization of medical devices — Validation and routine control of sterilization by moist heat.

EN 556, Sterilization of medical devices — Requirements for medical devices to be labelled "Sterile".

EN ISO 10993-1, Biological evaluation of medical devices — Part 1: Evaluation and testing. (ISO 10993-1:1997)

EN ISO 10993-7, *Biological evaluation of medical devices* — Part 7: Ethylene oxide sterilization residuals.

(ISO 10993-7:1995)

EN ISO 10993-11, Biological evaluation of medical devices — Part 11: Test for systemic toxicity. (ISO 10993-11:1993)

EN 46001, Quality systems — Medical devices: Particular requirements for the application of EN ISO 9001.

EN 46002, Quality systems — Medical devices: Particular requirements for the application of EN ISO 9002.

3 Definitions

For the purposes of this European Standard, the following definitions apply.

3.1

blood-gas exchanger

extracorporeal device designed to temporarily supplement, or be a substitute for, the respiratory function of the lung

3.2

blood pathway

paths of the blood-gas exchanger containing blood during intended clinical use

3.3

bovine blood

whole, or diluted with physiological saline solution, anticoagulated blood from cattle

3.4

gas pathway

parts of the blood-gas exchanger containing the ventilation gas during intended clinical use

3.5

heat exchanger

component that is intended to control the temperature of the circulating blood and/or priming solution

3.6

heat exchanger performance factor

ratio R of the difference between the temperature of the blood at the inlet of the blood-gas exchanger and the temperature of the water at the inlet of the heat exchanger, using the following equation:

$$R = \frac{B_{\rm To} - B_{\rm Ti}}{W_{\rm Ti} - B_{\rm Ti}}$$

where:

- $B_{\rm To}$ is the temperature of the blood at the outlet of the blood-gas exchanger;
- is the temperature of the blood at the inlet of $B_{\rm Ti}$ the blood-gas exchanger; and
- is the temperature of the water at the inlet of W_{Ti} the heat exchanger.

3.7

integral part

part that is connected to the blood-gas exchanger so that it cannot normally be separated by the user

3.8

operating variables

setting of parameters which affect the function of the device

3.9

platelet percentage reduction

percentage reduction of platelets, compared to a baseline level, contained in a circuit incorporating a blood-gas exchanger less the percentage reduction in an identical control circuit without a blood-gas exchanger as a function of time

3.10

plasma-free haemoglobin generation

concentration of plasma-free haemoglobin in a circuit incorporating a blood-gas exchanger less the concentration in an identical control circuit without a blood-gas exchanger as a function of time

3.11

white blood cell percentage reduction

percentage reduction of white blood cells contained in a circuit incorporating a blood-gas exchanger less the percentage reduction in an identical control circuit without a blood-gas exchanger as a function of time

4 Requirements

4.1.1 Sterility and non-pyrogenicity The blood pathway shall be sterile in the pyrogenic. Compliance shall be verified for the pyrogenic.

4.1.2 Biocompatibili

Parts of the moon pathway shall be biocompatible with respect to their intended use.

(Annual of the shall be verified in accordance with 5.2.2.) 4.2 Physical characteristics

4.2.1 Blood pathway integrity

When tested in accordance with **5.3.1**, the blood pathway shall not leak.

4.2.2 Heat exchanger fluid pathway integrity

When tested in accordance with **5.3.2**, the heat exchanger fluid pathway shall not leak.

4.2.3 Blood volumes

When tested in accordance with **5.3.3**, the volume of the blood pathway shall be within the tolerance specified by the manufacturer (see 6.3).

4.2.4 Connectors

Connectors for connection to the blood pathway shall, when tested in accordance with 5.3.4, allow a secure connection.

NOTE 1 Connectors of a type that allows connection of tubes with an inner diameter of 4,8 mm, 6,3 mm, 9,5 mm or 12,7 mm, or a type that complies with Figure 1 of EN 1283:1996, or a type that complies with EN 1707 have been used.

When tested in accordance with 5.3.4, the gas inlet connection to the gas pathway shall not separate.

Connectors for the heat exchanger fluid pathway shall be capable of connection using fast couplings.

NOTE 2 Connectors corresponding to Figure 3 of EN 1283:1996 are considered as one way to comply with this requirement.

4.3 Performance characteristics

4.3.1 Blood-gas exchanger oxygen and carbon dioxide transfer rates

When determined in accordance with **5.4.1**, the oxygen and carbon dioxide transfer rates shall be within the range of values specified by the manufacturer (see **6.3**).

4.3.2 Heat exchanger performance factor

When determined in accordance with **5.4.2**, the heat exchanger performance factors shall be within the range of values specified by the manufacturer (see 6.3).

4.3.3 Blood cell damage

When determined in accordance with 5.4.3, the increased concentration of plasma-free haemoglobin and the percentage reduction of platelets and white blood cells shall be within the range of values specified by the manufacturer (see 6.3).

4.3.4 Time-dependent performance changes

When determined in accordance with **5.4.1**, the oxygen and carbon dioxide transfer rates shall be within the range of values specified by the manufacturer (see 6.3).

5 Compliance tests and measurements

5.1 General

performed with the device under test prepared according to the manufacturer's instruction for intended clinical use

Operating variables shall be cified by the manufacturer for intended clinical use unless otherwise specified in this European Standard.

Unless otherwise stated in this European Standard, the temperature of test liquids shall be (37 ± 1) °C.

If the relationship between variables is non-linear, sufficient determinations shall be made to permit valid interpolation between data points.

The test or measurement procedures are to be regarded as reference procedures. Other procedures can be accepted provided that the alternative procedure has been shown to be of comparable precision and reproducibility.

5.2 Biological characteristics

5.2.1 Sterility and non-pyrogenicity

Compliance shall be verified by inspection of the manufacturer's documentation on sterilization and pyrogen testing, which shall be in accordance with EN 550, EN 552, EN 554, EN 556 and EN ISO 10993-11, as applicable.

5.2.2 Biocompatibility

Compliance shall be verified by test or by inspection of the manufacturer's documentation on biocompatibility for the finished device, which shall be in accordance with EN ISO 10993-1 and EN ISO 10993-7.

5.3 Physical characteristics

5.3.1 Determination of blood pathway integrity

5.3.1.1 Test liquid

The test liquid shall be water.

5.3.1.2 Procedure

Place the device under test in an appropriate test circuit. Subject the blood pathway of the device to a pressure which is 1,5 times the maximum pressure specified by the manufacturer for intended clinical use (see 6.3). If no maximum pressure is specified, the test shall be performed at 40 kPa. Maintain this pressure for 6 h, or as long as is specified by the manufacturer for intended clinical use (see 6.3), and visually inspect the device for the emergence of water.

5.3.2 Determination of heat exchanger find pathway integrity 5.3.2.1 Test liquid The test liquid shall be rate 5.3.2.2 Proceedings



Place the device under test in an appropriate test viscilit subject the heat exchanger fluid pathway to a pressure which is 1,5 times the maximum pressure specified by the manufacturer for intended clinical use (see 6.3). If no maximum pressure is specified, the test shall be performed at 350 kPa. Maintain this pressure for 6 h, or as long as is specified by the manufacturer for intended clinical use (see 6.3), and visually inspect the device for emergence of water.

5.3.3 Blood volumes

5.3.3.1 Test liquid

The test liquid shall be bovine blood or water.

5.3.3.2 Procedure

The volume of the blood pathway shall be determined over the range of operating variables specified by the manufacturer for intended clinical use (see 6.3).

5.3.4 Connectors

5.3.4.1 Procedure

The connection shall be assembled in accordance with the manufacturer's instructions for use.

The connection shall withstand an axial pull force of 15 N for 15 s without separating.

5.4 Performance characteristics

5.4.1 Oxygen and carbon dioxide transfer rates

5.4.1.1 Test media

The test liquid for the blood pathway shall be bovine blood. The test medium for the gas pathway shall be gas of known oxygen, nitrogen and carbon dioxide concentrations.

5.4.1.2 Procedure

Place the device under test in an appropriate test circuit. Perform tests using the following blood inlet conditions during determination of oxygen and carbon dioxide transfer rates:

- oxyhaemoglobin percentage: (65 ± 5) %;
- haemoglobin: (12 ± 1) g/dl;
- base excess: (0 ± 5) mmol/l;
- pCO₂: (6,0 ± 0,7) kPa.

Oxygen and carbon dioxide transfer rates shall be determined over the manufacturer's specified range of operating variables (see 6.3).

Between each set of requirements, the blood flow shall be kept at the maximum specified by the manufacturer for intended clinical use (see 6.3).

Determination of oxygen and carbon dioxide transfer rates shall be made at the initiation of the test. For time-dependent determinations, measurements shall be performed at initiation of the test and then at 1 h, 3 h and 6 h after the start of the test. As applicable, further determinations shall be made at 6 h intervals.

NOTE 1In vitro tests as well as tests using cattle are acceptable.NOTE 2The blood can be exchanged for fresh blood as requiredin oxygen and carbon dioxide transfer measurements.

NOTE 3 Data need not be collected at the conditions specified. Approximations obtained by reasonable interpolation are accepted.

5.4.2 Heat exchanger performance factor

5.4.2.1 Test liquid

The test liquid for the blood pathway shall be to blood or water.

5.4.2.2 Procedure

Place the device under test in an appropriate test circuit. Perform the test in vitro under the following conditions:

- blood inlet temperature, B_{Ti} : (30 ± 1) °C;
- water inlet temperature, W_{Ti} : (40 ± 1) °C.

The determination of heat exchanger performance factors shall be made over the manufacturer's specified range of operating variables (see **6.3**).

5.4.3 Blood cell damage

5.4.3.1 Test media

The test liquid for the blood pathway shall be heparinized bovine blood. The test median for the gas pathway shall be gas of suitable oxygen, nitrogen and carbon dioxide concentrations

5.4.3.2 Procedure

Two sets of propertate, identical circuit components, including pump, connecting tubing, a reservoir (astatistical by the manufacturer and of suitable size whative to the device under test) and a heat exchanger, shall be assembled. The device under test shall be placed in one of the circuits. The blood pathway test liquid volumes shall, at the initiation of the test, be within 1 % of each other. Perform the test in vitro using the conditions given in Table 1, and taking samples for the measurement of parameters as given in Table 2.

Table 1 —	Conditions	for	blood	cell	damage to	est

Item	Level	Maximum variation
Blood flow rate	The maximum specified by the manufacturer for intended clinical use (see 6.3), or 6 l/min, whichever is smaller	±5 %
Gas flow rate	The maximum specified by the manufacturer for intended clinical use (see 6.3)	±5 %
pCO_2	5,3 kPa	±0,7 kPa
Base excess	0	±5 mmol/dl
Blood glucose	10 mmol/dl	±5 mmol/dl
Haemoglobin	12 g/dl	±1 g/dl

Table 2 — Test samples for blood cell d

Parameter	Prior to test	10 min	30 min	180 min	360 min
Plasma-free haemoglobin	X		X	X	X
WBC	X		X	X	X
Platelets	X		X	X	X
Blood-gas values:		X	X	X	X
pCO_2					
pO_2					
pH					
Base excess					
Haemoglobin	X	X	X	X	X
Glucose	X				
ACT	X				
Temperature	X	X	X	X	X
Flow rates	X	X	X	X	X

6 Information supplied by the manufacturer

6.1 Information to be given on the blood-gas exchanger

The following information shall be given on the blood-gas exchanger:

e) the minimum and op ir levels, where appropriate.

6.2 Information to be given on the packaging

6.2.1 Information to be given on the unit container

The following information shall be visible through or given on the unit container:

- a) the manufacturer's name and address;
- b) description of contents;
- c) model designation;
- d) statement on sterility and non-pyrogenicity;
- e) expiry date;
- f) batch, lot or serial number designation;
- g) statement to read instructions before use;
- h) special handling or storage conditions;
- i) statement on single-use.
- NOTE Symbol 4.1 of EN 980:1996 can be used.

6.2.2 Information to be given on the shipping container

The following information shall be given on the shipping container:

a) the manufacturer's name and address;

b) description of contents, including number of units;

- c) model designation;
- d) statement on sterility and non-pyrogenicity;
- e) expiry date;

f) special handling, storage or unpacking instructions.

6.3 Information to be given in the accompanying documents

6.3.1 Each shipping container shall contain an "Instructions for Use" leaflet with the following information:

a) the manufacturer's address and telephone or telefax number;

- b) model designation;
- c) required ancillary equipment;

d) instructions on necessary, special or procedures as applicable;

e) directions for placing the bloo xchanger in a support or operational

f) placement, uring of tubing connection

c) model designation;
d) the direction of blood and/or gas another water flows, if necessary;
e) the minimum purpose of additional entry or exit

- - j) direction of blood, gas and water flows;
 - k) general operating procedures for normal use;

1) a recommended procedure for intraoperative replacement of a blood-gas exchanger;

m) maximum and minimum recommended blood flow rates;

n) maximum and minimum operating volumes of the blood pathway, including any integral reservoir;

- o) maximum and minimum specified gas flow rates;
- p) heat exchanger performance factors;
- q) residual blood volume;
- r) oxygen and carbon dioxide transfer rates;

s) pressure limitations for blood, water and gas pathways;

t) a statement that the following information is available upon request:

- sterilization method;
- a list of materials of the blood pathway;
- data on plasma leakage across any semi-permeable membrane, if applicable;

blood pathway pressure drop at the maximum blood flow rate specified by the manufacturer for intended clinical use;

gas pathway pressure drop at the maximum blood and gas flow rates specified by the manufacturer for intended use;

- data related to blood cell damage;
- data on particle release from the blood-gas exchanger;
- relevant tolerances for data presented.

6.3.2 The following information shall be given in the accompanying documents in a prominent form:

- a) pressure limitations;
- b) flow rate limitations;
- c) blood level limitations;
- d) other device limitations.

7 Packaging

Packaging shall comply with the appropriate requirements of EN 46001 or EN 46002.

Annex A (informative)

Bibliography

EN 980, Terminology, symbols and information provided with medical devices — Graphical symbols for use in the labelling of medical devices.

EN 1283:1996, Haemodialysers, haemofilters and haemoconcentrators.

EN 1707, Conical fittings with a 6 % (Luer) taper for syringes, needles and certain other medical devices Part 2: Lock fittings.

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