University of Washington Medical Center 1959 NE Pacific Street. Seattle, WA 98195 Transfusion Services Laboratory Policies and Procedures Manual Original Effective Date: 09-30-2019

Number: EQ-0011.01

Revision Effective Date:

TITLE: Equipment Preventative Maintenance Requirements

PURPOSE:

 To provide a schedule and mechanism to ensure equipment is maintained according to manufacturer and regulatory laboratory standards and readily available to equipment operators. To maintain and document timely review of equipment maintenance records.

PRINCIPLE & CLINICAL SIGNIFICANCE:

Equipment used in the testing of patient and donor samples and handling, storing and manufacturing of blood components must be cleaned and maintained according to a defined schedule. At a minimum, written policies and procedures for maintenance and cleaning must be in-line with manufacturer's recommendations. Equipment used in measurement should be calibrated routinely against a known standard. In addition to manufacturer recommendation and laboratory standards, the Code of Federal Regulations specifies minimum calibration frequency for some equipment. A written schedule should include all requirements and when sources differ, the most restrictive or frequent recommendation applies.

Maintenance, function checks and calibrations must be documented and reviewed monthly to ensure and demonstrate compliance. A written and posted Equipment Maintenance Schedule provides a visual mechanism to monitor and ensure equipment is properly maintained and calibrated per requirements. Records of maintenance should be reviewed monthly and should readily available for review by inspectors or assessors and for laboratory staff to verify maintenance is up-to-date prior to use.

POLICIES:

Maintenance Requirements:

- Equipment is validated before use and after repairs, as appropriate. Initial validation includes installation, operation, and performance qualification as applies to the device.
 Validation after repair may not include all aspects of the initial validation and is dependent on service performed.
 - Initial validation is reviewed and approved by the TSL Medical Director, TSL Operation Manager and TSL Quality Manager
- Equipment used for testing patient and donor samples and storing, handling and manufacturing of blood components is maintained, calibrated, and function checks performed according to manufacturer's recommendations, Code of Federal Regulation and laboratory standards.
- Written policies and procedures for performing maintenance, calibration and function checks are maintained for individual types of equipment and not included in this document.
- All Transfusion Services staff is responsible for using only equipment that is maintained and calibrated according to the Equipment Preventative Maintenance Schedule and required quality control is performed and up to date prior to use. It is the responsibility of each individual to ensure maintenance is up-to-date on any equipment used.
- Appendix 1: Equipment Maintenance Requirements and Equipment Preventative Maintenance Schedule provide visual guides of the frequency and tasks required for each type of equipment.

| TITLE: Equipment Preventative Maintenance | Number: |
|---|------------|
| Requirements | EQ-0011.01 |

 Equipment not maintained according to the Equipment Preventative Maintenance Schedule will not be utilized for testing or manufacturing of blood components until requirements are met.

Documentation and Record Review:

- The **Equipment Preventative Maintenance Schedule** is posted in a location easily visible to all staff.
- Maintenance performed by Transfusion Service Laboratory staff is documented on the appropriate form.
- Maintenance performed by UWMC internal contracted entities, UWMC Scientific Instruments or UWMC Operation and Maintenance Refrigeration department, or outside service providers should be documented by the service personnel and the service record submitted to a TSL manager for review
- Maintenance performed on blood storage equipment by UWMC Operation and Maintenance Refrigeration department is recorded on the appropriate form and a copy is sent to the TSL Operation and Quality Manager.
- Maintenance performed by outside contracted entities should be documented per service
 provider specification and a copy left with in the TSL. There may be some instances where
 service provider policies require internal completion or review of the form prior to providing
 the TSL a copy of the record. In such instances, the due date and method of delivery
 should be confirmed prior to the service technician leaving the site.
- Supervisory review and assessment of maintenance, calibration and function check records is performed at least monthly.
- Completed records are retained in labeled binders and stored where accessible to all TSL staff. After 2 years retention, records may be archived and can be retrieved from the archives when needed.

REFERENCES:

- Manufacturer Operating & Service Manuals
- Technical Manual, current edition, Bethesda, Maryland, AABB
- All Common Checklist University of Washington Medical Center, current edition, Northfield, IL, College of American Pathologists
- Code of Federal Regulation, Title 21, Food and Drugs Administration, current edition, Government Printing Office, Washington, DC

RELATED DOCUMENTS:

SCHEDULE Equipment Preventative Maintenance Schedule

FORM Cell Washer & Scale QC

FORM Bench Equipment

FORM Blood Component Storage Temperature

FORM COBE 2991 Quarterly Function Check

FORM Irradiator Monthly Maintenance Log

FORM Plasma Thawer Quarterly & Annual Maintenance Form

FORM Refrigerated Centrifuge QC

FORM Serologic Centrifuge Calibration Worksheet

FORM Thaw Bath & Heat Block QC Form

FORM Thermometer Calibration Worksheet

FORM Vision Maintenance

FORM TSL Refrigeration Quarterly Maintenance

FORM Platelet Incubator/Agitator Maintenance

| TITLE: Equipment Preventative Maintenance | Number: |
|---|------------|
| Requirements | EQ-0011.01 |

| UWMC SOP Appro | oval: | |
|-------------------------------|-------------------|------|
| UWMC CLIA Medical Director | | |
| | Mark H. Wener, MD | Date |
| Transfusion Service Manager | | Date |
| | Nina Sen | |
| Compliance Analyst | | Date |
| | Christine Clark | |
| Transfusion Service | | Date |
| Medical Director | Monica Pagano, MD | Date |
| UWMC Biennial R | eview: | |
| | | |
| | | Date |
| | | Date |
| | | |

| TITLE: Equipment Preventative Maintenance | Number: |
|---|------------|
| Requirements | EQ-0011.01 |

APPENDICES:

Appendix 1: Equipment Maintenance Requirements

| | Equipment Maintenance Requirements Frequency | | | | | | | |
|--|---|--|--|-----------|---|-----------------------------|--|--|
| Equipment | Daily | Weekly | Monthly | Quarterly | As Needed | Biannually | Annually | |
| Liquid Thermometer | | | | | | | Verification with NIST | |
| Plasma Thawer Digital Thermometer | | | | | Clean | | Calibration | |
| Fluke | | | | | Verification of accuracy each time a new wire probe is used | | Calibration | |
| Tachometer | | | | | | | Calibration | |
| Stopwatch | | | | | | | Verification with NIST | |
| Timers | | | | | | | Verification with NIST | |
| Weights | | | | | Clean | | Calibration | |
| Genesis Rapidweld | | | Clean | | | | PM by manufacturer service rep | |
| Genesis Tube Sealer | | Clean | | | Adjustment of tubing seal thickness, and replacement of the splash guard and the fuse is strongly recommended | | | |
| Scale | Verify calibration | | | | Clean | | | |
| Dry Bath | Temperature Verification | | Clean | | Clean | | | |
| Megafuge Centrifuge | | | Clean rotor, buckets and accessories, clean filter mat | | | Tach and Timer Checks | | |
| Serofuges | | Clean, check rotor for wear and corrosion | | | Replace rotor | Tach and Timer Checks | Optimal Spin Time Calibration | |
| Cell Washers | Inspect tubing, drain and saline fill volume | Flush the system, clean the fill ports | Inspect rotor, tube holders, Clean exterior | | Replace tube holder inserts Replace rotor every 4 years | Tach and Timer Checks | Optimal Spin Time Calibration Replace | |

TITLE: Equipment Preventative Maintenance Requirements

Number: EQ-0011.01

| Equipment | Frequency | | | | | | | |
|----------------------------|---|---|---|--|--|-----------------------------|--|--|
| | Daily | Weekly | Monthly | Quarterly | As Needed | Biannually | Annually | |
| | | | | | | | supply, drain, and pump tubing. | |
| Cobe Cell Processor | | | Periodic Clean, Check overflow bottle | Quarterly Function Check | Cleaning – routine (after every procedure) | | PM by manufacturer service rep | |
| Refrigerated Centrifuge | | Clean housing, chamber, rotors, accessories Check rotor seating | Check rotor and accessories for wear and corrosion, Lubricate trunnions | | Replace rotor when expired | Tach and Timer Checks | | |
| Irradiator | | | Inspection & cleaning Download of previous month irradiation verification checks | | | Dosimetry Testing | PM by manufacturer service rep | |
| Ortho Workstation | Temperature Check, Speed Display check, | | | | Cleaning including under the incubator, replace fuses, | Tach and Timer Checks | | |
| Ortho Vision | Probe decontamina tion | Liquid system decontamina tion Pump test | Instrument cleaning, Image area cleaning, data backup | | | | PM by manufacturer service rep | |
| Plasma Thawer | Temperature verification | Clean and replace water | | PM- includes high alarm check, lubrication of moving parts and check/calibra tion of temperature controller | | | Calibration of electronic thermometer and check bearings | |
| Refrigerators | Temperature Verification | Change Temperature Charts | | PM – includes alarm checks, calibration of temperature monitor, and annual PM | | | Performed Quarterly | |
| Freezers | Temperature Verification | Change Temperature Charts | | PM – includes alarm checks, calibration of temperature monitor, and annual PM | | | Performed Quarterly | |
| Platelet Incubator | Temperature Verification | Change Temperature Charts | | PM – includes alarm checks, | | | Agitator PM: all other Maintenance performed | |

| TITLE: Equipment Preventative Maintenance | Number: |
|---|------------|
| Requirements | EQ-0011.01 |

| Equipment | Frequency | | | | | | | |
|-------------------|-----------|---------------------------|---------|---|-----------|------------|---|--|
| | Daily | Weekly | Monthly | Quarterly | As Needed | Biannually | Annually | |
| | | | | calibration of temperature monitor & temperature controller and annual PM | | | quarterly | |
| TempTrak | | | | | | | Calibration QARA Verification of probe settings | |
| Microscopes | | | | | | | Performed by Scientific Instruments | |
| Eye Wash | | Check water pressure flow | | | | | | |
| Pipette | | | | | | | Calibration | |
| Data Logger | | | | | | | Replaced when calibration expires | |
| Temptrak Pager | | Battery check | | | | | | |