



BSI Standards Publication

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

National foreword

This British Standard is the UK implementation of EN 60601-1-10:2008+A2:2021. It is identical to IEC 60601-1-10:2007, incorporating amendment 1:2013 and amendment 2:2020. It supersedes BS EN 60601-1-10:2008+A1:2015, which is withdrawn.

The start and finish of text introduced or altered by amendment is indicated in the text by tags. Tags indicating changes to IEC text carry the number of the IEC amendment. For example, text altered by IEC amendment 1 is indicated by **A1** **A1**.

The UK participation in its preparation was entrusted to Technical Committee CH/62/1, Common aspects of Electrical Equipment used in Medical Practice.

A list of organizations represented on this committee can be obtained on request to its committee manager.

This publication has been prepared under a mandate given to the European Standards Organizations by the European Commission and the European Free Trade Association. It is intended to support requirements of the EU legislation detailed in the European Foreword. A European Annex, usually Annex ZA or ZZ, describes how this publication relates to that EU legislation.

For the Great Britain market (England, Scotland and Wales), if UK Government has designated this publication for conformity with UKCA marking (or similar) legislation, it may contain an additional National Annex. Where such a National Annex exists, it shows the correlation between this publication and the relevant UK legislation. If there is no National Annex of this kind, the relevant Annex ZA or ZZ in the body of the European text will indicate the relationship to UK regulation applicable in Great Britain. References to EU legislation may need to be read in accordance with the UK designation and the applicable UK law. Further information on designated standards can be found at www.bsigroup.com/standardsandregulation.

For the Northern Ireland market, UK law will continue to implement relevant EU law subject to periodic confirmation. Therefore Annex ZA/ZZ in the European text, and references to EU legislation, are still valid for this market.

UK Government is responsible for legislation. For information on legislation and policies relating to that legislation, consult the relevant pages of www.gov.uk.

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Amendments/corrigenda issued since publication

Date	Text affected
30 June 2015	Implementation of IEC amendment 1:2013 with CENELEC endorsement A1:2015. Annex ZA updated
31 August 2021	Implementation of IEC amendment 2:2020 with CENELEC endorsement A2:2021. Annex ZA updated

**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
(IEC 60601-1-10:2007)**

Appareils électromédicaux -
Partie 1-10: Exigences générales
pour la sécurité de base
et les performances essentielles -
Norme collatérale: Exigences
pour le développement des régulateurs
physiologiques en boucle fermée
(CEI 60601-1-10:2007)

Medizinische elektrische Geräte -
Teil 1-10: Allgemeine Festlegungen
für die Sicherheit einschließlich
der wesentlichen Leistungsmerkmale -
Ergänzungsnorm: Anforderungen
an die Entwicklung von physiologischen
geschlossenen Regelkreisen
(IEC 60601-1-10:2007)

This European Standard was approved by CENELEC on 2008-03-01. CENELEC members are bound to comply with the CEN/CENELEC Internal Regulations which stipulate the conditions for giving this European Standard the status of a national standard without any alteration.

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This European Standard exists in three official versions (English, French, German). A version in any other language made by translation under the responsibility of a CENELEC member into its own language and notified to the Central Secretariat has the same status as the official versions.

CENELEC members are the national electrotechnical committees of Austria, Belgium, Bulgaria, Cyprus, the Czech Republic, Denmark, Estonia, Finland, France, Germany, Greece, Hungary, Iceland, Ireland, Italy, Latvia, Lithuania, Luxembourg, Malta, the Netherlands, Norway, Poland, Portugal, Romania, Slovakia, Slovenia, Spain, Sweden, Switzerland and the United Kingdom.

CENELEC

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

Central Secretariat: rue de Stassart 35, B - 1050 Brussels

Foreword

The text of document 62A/576/FDIS, future edition 1 of IEC 60601-1-10, prepared by SC 62A, Common aspects of electrical equipment used in medical practice, of IEC TC 62, Electrical equipment in medical practice, and ISO SC 1, Breathing attachments and anaesthetic machines, and SC 3, Lung ventilators and related devices, of ISO TC 121, Anaesthetic and respiratory equipment, was submitted to the IEC-CENELEC parallel vote and was approved by CENELEC as EN 60601-1-10 on 2008-03-01

The following dates were fixed:

- latest date by which the EN has to be implemented
at national level by publication of an identical
national standard or by endorsement (dop) 2008-12-01
- latest date by which the national standards conflicting
with the EN have to be withdrawn (dow) 2011-03-01

This European Standard has been prepared under a mandate given to CENELEC by the European Commission and the European Free Trade Association and covers essential requirements of EC Directive 93/42/EEC. See Annex ZZ.

This European Standard constitutes a collateral standard to EN 60601-1:2006, hereafter referred to as the general standard.

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: in roman type;
- *test specifications: in 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: IN 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 (*).

Annexes ZA and ZZ have been added by CENELEC.

Endorsement notice

The text of the International Standard IEC 60601-1-10:2007 was approved by CENELEC as a European Standard without any modification.

In the official version, for Bibliography, the following notes have to be added for the standards indicated:

ISO 9000	NOTE	Harmonized as EN ISO 9000:2005 (not modified).
ISO 14001	NOTE	Harmonized as EN ISO 14001:2004 (not modified).
ISO 14021	NOTE	Harmonized as EN ISO 14021:2001 (not modified).
ISO 14040	NOTE	Harmonized as EN ISO 14040:2006 (not modified).

European foreword to amendment A1

The text of document 62A/888/FDIS, future IEC 60601-1-10:2007/A1, prepared by SC 62A "Common aspects of electrical equipment used in medical practice" of IEC/TC 62 "Electrical equipment in medical practice" and ISO/SC 1 "Breathing attachments and anaesthetic machines" and ISO/SC 3 "Lung ventilators and related devices" of ISO/TC 121 "Anaesthetic and respiratory equipment" was submitted to the IEC-CENELEC parallel vote and approved by CENELEC as EN 60601-1-10:2008/A1:2015.

The following dates are fixed:

- latest date by which the document has to be (dop) 2016-01-14
implemented at national level by
publication of an identical national
standard or by endorsement
- latest date by which the national (dow) 2018-12-31
standards conflicting with the
document have to be withdrawn

Attention is drawn to the possibility that some of the elements of this document may be the subject of patent rights. CENELEC [and/or CEN] shall not be held responsible for identifying any or all such patent rights.

This document has been prepared under a mandate given to CENELEC by the European Commission and the European Free Trade Association, and supports essential requirements of EU Directive.

For the relationship with EU Directive 93/42/EEC, see informative Annex ZZ, included in EN 60601-1-10:2008.

Endorsement notice

The text of the International Standard IEC 60601-1-10:2007/A1:2013 was approved by CENELEC as a European Standard without any modification.

European foreword to amendment A2

The text of document 62A/1394/FDIS, future IEC 60601-1-10/A2, prepared by SC 62A "Common aspects of electrical equipment used in medical practice" of IEC/TC 62 "Electrical equipment in medical practice" was submitted to the IEC-CENELEC parallel vote and approved by CENELEC as EN 60601-1-10:2008/A2:2021.

The following dates are fixed:

- latest date by which the document has to be implemented at national (dop) 2022-01-16
level by publication of an identical national standard or by endorsement
- latest date by which the national standards conflicting with the (dow) 2024-07-16
document have to be withdrawn

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Any feedback and questions on this document should be directed to the users' national committee. A complete listing of these bodies can be found on the CENELEC website.

Endorsement notice

The text of the International Standard IEC 60601-1-10:2007/A2:2020 was approved by CENELEC as a European Standard without any modification.

Annex ZA (normative)

Normative references to international publications with their corresponding European publications

The following documents are referred to in the text in such a way that some or all of their content constitutes requirements of this document. For dated references, only the edition cited applies. For undated references, the latest edition of the referenced document (including any amendments) applies.

NOTE 1 Where an International Publication has been modified by common modifications, indicated by (mod), the relevant EN/HD applies.

NOTE 2 Up-to-date information on the latest versions of the European Standards listed in this annex is available here: www.cenelec.eu.

Replace Annex ZA by the following one:

<u>Publication</u>	<u>Year</u>	<u>Title</u>	<u>EN/HD</u>	<u>Year</u>
IEC 60601-1	2005	Medical electrical equipment - Part 1: General requirements for basic safety and essential performance	EN 60601-1	2006
-	-		+ corrigendum Mar.	2010
+ A1	2012		+ A1	2013
-	-		+ A12	2014
+ A2	2020		+ A2	2021
IEC 60601-1-6	2010	Medical electrical equipment - Part 1-6: General requirements for basic safety and essential performance - Collateral standard: Usability	EN 60601-1-6	2010
+ A1	2013		+ A1	2015
+ A2	2020		+ A2	2021
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		-
+ A1	2012		+ A1	2013
-	-		+ AC	2014
+ A2	2020		+ A2	2021
IEC 62366-1	2015	Medical devices - Part 1: Application of usability engineering to medical devices	EN 62366-1	2015
-	-		+ AC	2015
+ A1	2020		+ A1	2020
ISO 14971	2019	Medical devices – Application of risk management to medical devices	EN ISO 14971	2019
ISO 9000	-	Quality management systems – Fundamentals and vocabulary	EN ISO 9000	2015

Annex ZZ
(informative)

Coverage of Essential Requirements of EC Directives

This European Standard has been prepared under a mandate given to CENELEC by the European Commission and the European Free Trade Association and within its scope the standard covers all relevant essential requirements as given in Annex I of the EC Directive 93/42/EEC.

Compliance with this standard provides one means of conformity with the specified essential requirements of the Directive concerned.

WARNING: Other requirements and other EC Directives may be applicable to the products falling within the scope of this standard.

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INTERNATIONAL ELECTROTECHNICAL COMMISSION

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.
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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.

The text of this collateral standard is based on the following documents:

FDIS	Report on voting
62A/576/FDIS	62A/585/RVD

Full information on the voting for the approval of this collateral standard can be found in the report on voting indicated in the above table. In ISO, the standard has been approved by 18 P-members out of 19 having cast a vote.

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
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- “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 this publication will remain unchanged until the maintenance result 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

A2 NOTE The attention of users of this document 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 mandatory implementation nationally not earlier than 3 years from the date of publication. **A2**

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.

INTRODUCTION to Amendment 1

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. 

INTRODUCTION to Amendment 2

The first edition of IEC 60601-1-10 was published in 2007 and amended in 2013. Since the publication of IEC 60601-1-10:2007+A1:2013, the IEC Subcommittee (SC) 62A Secretariat has been collecting issues from a variety of sources including comments from National Committees. At the November 2015 meeting of IEC/SC 62A in Kobe, Japan, the subcommittee initiated a process to identify high-priority issues that need to be considered in an amendment and should not wait until the second edition of IEC 60601-1-10, which is presently targeted for publication sometime after 2024.

Those issues selected for inclusion on the final "short list" to be addressed in Amendment 2 were those approved by a 2/3 majority of the National Committees present and voting at the Frankfurt meeting of SC 62A. At the meeting held on 10 October 2016, 13 items were presented to the National Committees present. All 13 items received the required 2/3 majority of the National Committees present and voting and have been included in the "short list" for consideration in preparing Amendment 2. All remaining issues have been placed on a "long list" for consideration in the second edition of IEC 60601-1-10.

The "short list" of issues was documented in the design specification for Amendment 2. As IEC 60601-1-10 was jointly developed with ISO/TC 121/SC 3, the work was assigned to IEC/SC 62A-ISO/TC 121/SC 3 Joint Working Group (JWG) 5. JWG 5 was directed to consider each issue described in Clause 6 of the design specification and develop an appropriate solution for the identified problem. That final solution in this amendment can encompass any technical solution proposed by the author of the issue or it can involve a different solution developed by the expert group. The expert group can also have recommended that no change to the standard was justified by the problem statement.

1) Figures in square brackets refer to the Bibliography.