



DEFECT & INVESTIGATION CENTRE

FOR ACTION BY:

Chief Executive of each HSS Trust
General Manager/Chief Executive of each HSS Board
General Manager/Chief Executive of each Agency

Stoney Road Dundonald Belfast
Northern Ireland BT16 1US

Telephone 028 90 523714
Facsimile 028 90 523900

HN(NI) 2000/14

Date: 17 July 2000

Product	:	ANGENIEUX AX CB OPERATING LIGHT INSTALLED PRIOR TO 1988
Manufacturer/ Supplier	:	Angenieux
Problem	:	An incident has occurred with an Angenieux AX14 4CB (Counter Balanced) operating theatre light in which the counter balanced arm ball joint failed, causing the light to fall. This particular model is fitted with end stops and has not been manufactured since 1987,
Action	:	Identify the model involved and take action as in Section 2 overleaf.

HAZARD

1. ATTENTION CHIEF EXECUTIVES/GENERAL MANAGERS

This notice should be brought to the immediate attention of all who need to know, or be aware of it including those listed below, in accordance with local procedures, and immediate action should be taken as detailed aside:

- Medical Directors
- Risk Managers
- Theatre Managers
- Surgeons
- Safety Liaison Officers
- Supplies Officers
- Estates Managers
- Authorised Persons (LV)
- Operating Theatre Staff

Boards/Trusts should ensure that if appropriate, this information is passed to **ALL** persons having the responsibility for premises registered under "THE REGISTERED HOMES (NI) ORDER 1992".



An Executive Agency of the Department of Health
and Social Services and Public Safety

2. IMMEDIATE ACTION

Have any Angenieux AX CB operating light ball joints inspected for cracks at the earliest opportunity by your usual service agent. If any cracks are discovered, the unit should be taken out of use immediately.

Only units fitted with end stops need to be checked. To determine whether end stops are fitted, rotate the ball joints to see if more than 360° rotation is achievable. If this is the case, no further action needs to be taken.

3. BACKGROUND

An Angenieux AX14 4CB operating light fell to the floor after a failure of the mounting which forms part of the arm casting. The particular unit involved had stops fitted to prevent full 360° rotation. The unit in question was 13 years old and had been regularly serviced by the hospital's normal service agent.

Inspection for cracking involves dismantling the ball unit and should be carried out by a service organisation. The cracking is thought to be related to the presence of an end stop and units which do not have an end stop have no requirement to be inspected. Production of the operating light model AX CB fitted with end stops ceased in 1987.

ALM has been responsible for the supply of Angenieux lights in the UK since January 1998. They do not service all of the lights within the UK.

4. ENQUIRIES

ALM Hospital Equipment Ltd
15 Northside Business Park
Hawkins Lane
Burton-On-Trent
Staffordshire
DE14 1DB

Tel: 01283 566233
Fax: 01283 511955

Enquiries regarding this notice should be addressed as follows:

NORTHERN IRELAND DEFECT & INVESTIGATION CENTRE (NIDIC)
Health Estates
Estate Policy
Stoney Road
Dundonald
Belfast BT16 1US *marked for the attention of Mr Brian Godfrey*

Tel: 028 90 523714
Fax: 028 90 523900
Email: brian.godfrey@dhsspsni.gov.uk

Yours faithfully

BRIAN GODFREY
Defect Centre Manager

HOW TO REPORT DEFECTS

Professional Estate Letter PEL(93)36 issued by Estate Services Directorate, on 27th July 1994 advises Health and Social Services Boards, HSS Trusts and agencies how to notify HPSS about accidents with and defects in medicinal products, buildings and plant and other medical and non medical equipment and supplies.

NORTHERN



IRELAND

HN(NI)2000/14

HAZARD

Title:

**ANGENIEUX AX CB OPERATING LIGHT INSTALLED
PRIOR TO 1988**

ACTION BY:

(A) BOARD/TRUST

Address/Address Stamp

This document was forwarded to the relevant Department/Personnel for action on _____ (date)

(B) RECIPIENT [Please return to the Issuing Authority **at (A) above**, after completed action]

Receipt of the document is acknowledged and appropriate action completed on _____ (date)

Signature _____ Position

Name (please print)

Address

(C) COMMENTS ON ACTION TAKEN