

**SN (NI) 2000/48**

**DATE: 4 January 2001**

**For Attention and Action by:  
Chief Executive of each HSS Trust  
General Manager/Chief Executive of each HSS Board  
Chief Executive of each Agency**



**HEALTH ESTATES  
ESTATE POLICY**

**NORTHERN  
IRELAND  
ADVERSE  
INCIDENT  
CENTRE**

**TITLE:**

**VENTILATORS: SIEMENS SERVO 300 &  
900 (all models): - Safety Alerts**

**MANUFACTURER/SUPPLIER**

Siemens

**PROBLEM**

Siemens (UK) have recently issued six safety alert letters, which should be brought to the attention of the relevant clinical staff.

**DISTRIBUTION**

This notice should be brought to the attention of all who need to know or be aware of it, including those listed below, in accordance with local procedures. This will include:

- Liaison Officers
- Risk Managers
- Health & Safety Officers/Advisors
- Device Managers
- Estates Managers
- Medical Directors
- Directors of Anaesthetics
- Nursing Directors
- Medical, Nursing and Care Staff
- Special Care Baby Units
- Medical Physics Servicing Departments
- Operating Theatre Managers
- EBME Departments
- Chairs of Primary Care Groups
- Coronary Care
- Intensive Care Units (Adults & Paediatric)

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

**SAFETY**

**NOTICE**

## ACTION

Ensure that all relevant clinical staff are aware of the following Siemens safety alert letters:

1. Safety Alert Letter 2000-06-13: Erratic function of the front panel potentiometers due to oxidation. (Additional function and pre-use checks).
2. Customer Notification Letter 1999-12-09: Triggering in Neonate patient range and "frozen" alphanumeric values. (Advice on trigger sensitivity levels and monitor display values).
3. Safety Alert Letter 2000-06-14: Unintentional change of alarm limits on the NO/NO<sub>s</sub> monitor alarm potentiometers on six monthly cycle).
4. Clinical Application Note 2000-06-15: Closed system suctioning in Intensive Care. (Highlights operational problems with closed system suctioning).
5. Clinical Application Note 2000-06-16 Closed system suctioning in Anaesthesia applications. (Highlights operational problems with closed system suctioning).
6. Customer Notification Letter 2000-04-27: Unexpected interruption of NO gas supply. (Advice on operation and monitoring with Nitric oxide units).

If you have not received these letters, please contact the manufacturer's representative listed below.

## BACKGROUND

Siemens (UK) have become aware of six safety alert/customer notification letters, which were not issued in the UK at the time of their publication. These notifications include revised operating recommendations/user manuals.

## ENQUIRIES

Enquiries to the manufacturer should be addressed to:

Mr Michael Raven  
Health & Safety Manager  
Siemens Medical Engineering  
Siemens House  
Oldbury Bracknell  
RG12 8FZ  
Tel: 01344 396529  
Fax: 01344 396534

Enquires to the NIAIC should quote the reference number SN(NI) 2000/48 and be addressed to:

Northern Ireland Adverse Incident Centre (NIAIC)  
Health Estates  
Estate Policy  
Stoney Road  
Dundonald  
Belfast BT16 1US

Marked for the attention of Mr Brian Godfrey

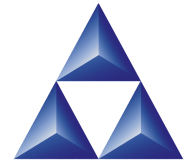
Tel: 02890 523714  
Fax: 02890 523900  
Email: [brian.godfrey@dhsspsni.gov.uk](mailto:brian.godfrey@dhsspsni.gov.uk)

Brian Godfrey  
NIAIC Manager

### HOW TO REPORT ADVERSE INCIDENTS

Adverse Incidents relating to medical devices, non-medical equipment, plant and buildings should be reported to NIAIC as soon as possible. Advice on how to report is given in Safety Notice SN (NI) 2000/NIAIC. If you are in doubt about how to report incidents, please speak to your liaison officer or contact NIAIC using the telephone number provided.

*Health Estates is an Executive Agency of the Department of Health, Social Services and Public Safety  
Aisíneacht Feidhmeannach don Roinn Sláinte. Serbhíst Sóisialta agus Sábháilteacht Phoiblí*



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