

Access to medical devices for Universal Health Coverage and achievement of SDGs

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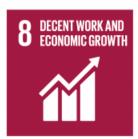


























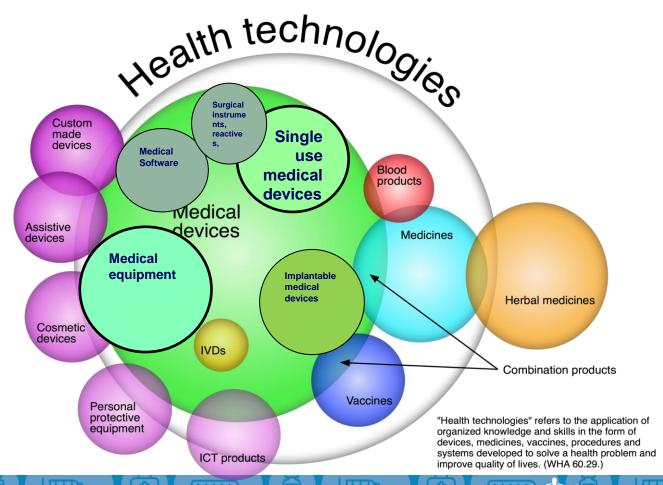








Definitions: Medical devices are health technologies that include: in vitro diagnostics, implantables, medical equipment, software, surgical instruments, ...





Medical devices need to be appropriate for each

Health Care Facility

- Terciary care
- Specialized hospital
- Regional hospital

- Secondary care
- District Hospital
- General Hospital

Primary care

- Health post
- Health center















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Medical equipment (niveau 3)

- Are medical devices that require installation, maintenance, callibration, consumables, spare parts.
- Their design, evaluation, procurement, planning, training, maintenance and decommissioning usually done by biomedical engineers.







Medical devices that do not need maintenance:

Single use devices

- Cathéters
- IV sets
- Syringes
- Condom
- Last secondes
- / minutes/ heures
- Incinérable, single use
- \$-\$\$







Implantables

- Prothesis
- Pacemaker
- Stent
- Intramedular
- Many years
- Biocompatible
- Patient monitoring
- \$\$- \$\$\$\$\$







The performance does not depend on the device itself but on the way they are used, this has to be safe and correct,

- Most medical devices require intermediary
- Device doctor/ nurse/ technician patient







More devices are being used by the persons themselves

Medical and assistive devices, point of care in vitro diagnostics, personal protective equipment, mobile apps w diagnostics.















10,000 Types of medical devices



- All medical equipment for patient care
- Diagnostic imaging
- Laboratory and pathology equipment
- Implantable medical devices
- Personal protective equipment Prosthesis and orthesis
- Quality assurance
- Radiation protection devices
- Single use devices (IV)
- Solutions and reagents
- Sterilization equipment
- Surgical instruments



























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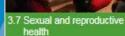


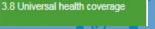


Medical devices are technologies indispensable to accomplish the health related SDGs: prevent, diagnose, treat, palliate, assist.

	· ·		<u> </u>
	SA	Target	Example of health technology/ medical device
		3.1 by 2030 reduce the global maternal mortality ratio	Blood pressure meters, pregnancy
	Y A	to less than 70 per 100,000 live births	tests, surgical instruments, cord clamps
3.1 Maternal mortality	3.2 Newborn and child mortality	3.2 by 2030 end preventable deaths of newborns and	Neonatal resuscitation devices,
A STATE OF THE STA		under-five children	warming devices/
			incubators, diagnostics
	11/1/2	3.3 by 2030 end the epidemics of AIDS, tuberculosis,	In vitro diagnostics to initiate the right
		malaria, and neglected tropical diseases and combat	treatment.
3.3 Communicable diseases	3.4 Noncommunicable diseases and mental health	hepatitis, water-borne diseases, and other	
~		communicable diseases	
	C OL	3.4 by 2030 reduce by one-third pre-mature mortality	Diagnostics: in vitro, blood glucose
		from non-communicable diseases (NCDs) through	meters, pathology; x raysimaging ,
		prevention and treatment, and promote mental health	Treatment: surgical instruments,
		and wellbeing	implants, radiotherapy, inhalers
3.5 Substance abuse	3.6 Road traffic injuries		chemotherapy, cardiac support
4		3.7 by 2030 ensure universal access to sexual and	From condoms to contraceptive
		reproductive health care services, including for family	devices
		planning, information and education, and the	

integration of reproductive health into national







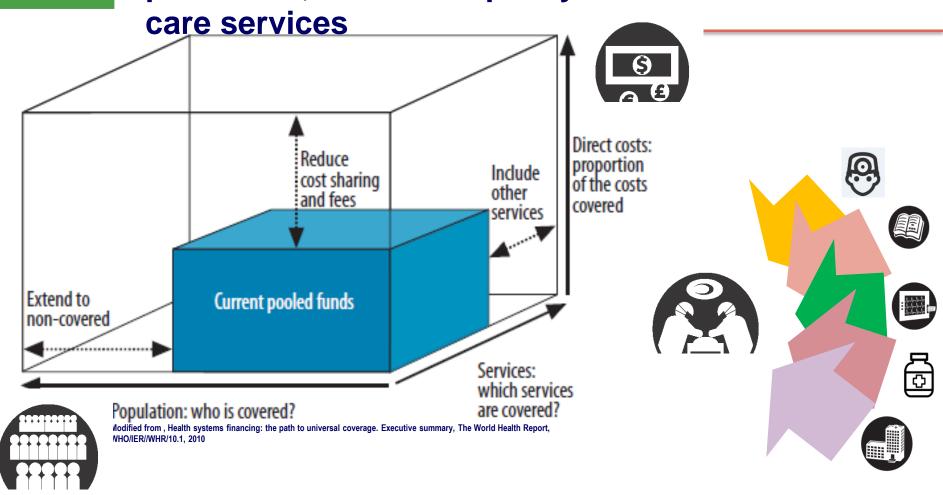




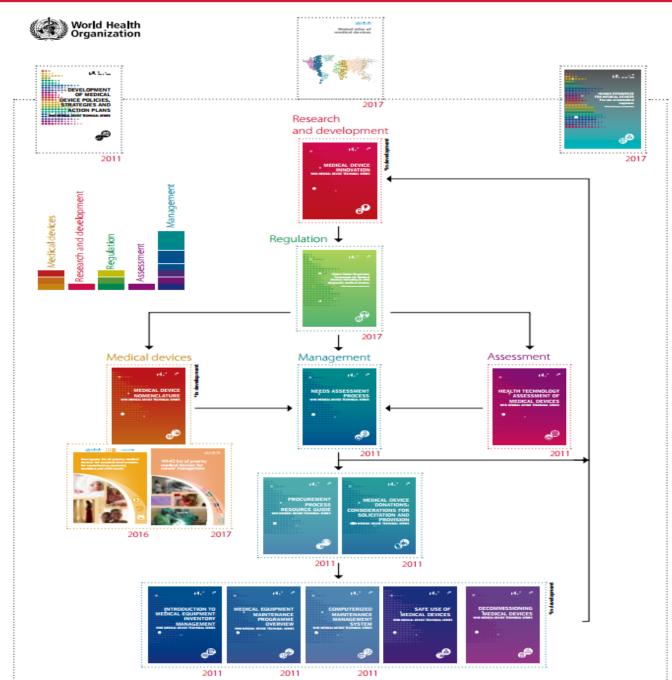
strategies and programmes



Medical devices are required to achive SDG3: universal health coverage, including financial risk protection, access to quality essential health-



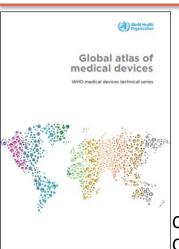




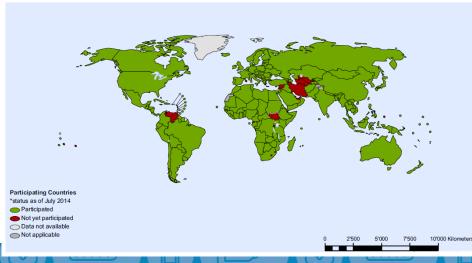




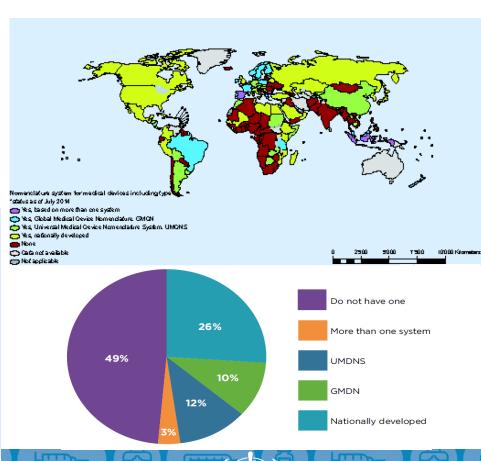
Global Atlas of Medical Devices 2017 includes global, regional and country profiles



Country participation in the Baseline Country Survey of Medical Devices



Nomenclature systems for medical devices





Government establishes national policies, regulates and selects and supplies medical devices

To define national policies

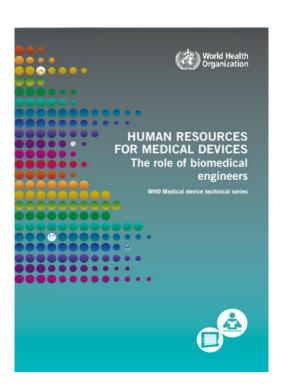
he medical device agenda within a national health policy



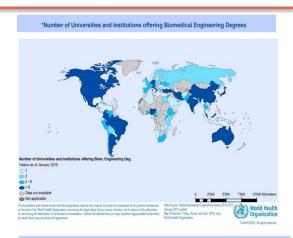


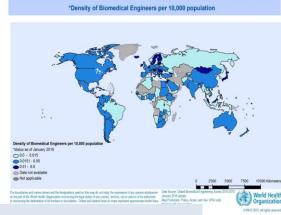


Pharmacists are to medicines as biomedical engineers are to medical devices!!.



- Country information on the number of biomedical engineers and technicians,
- Educational institutions
- Professional societies
- roles in the life cycle of a medical device, from conception to use.

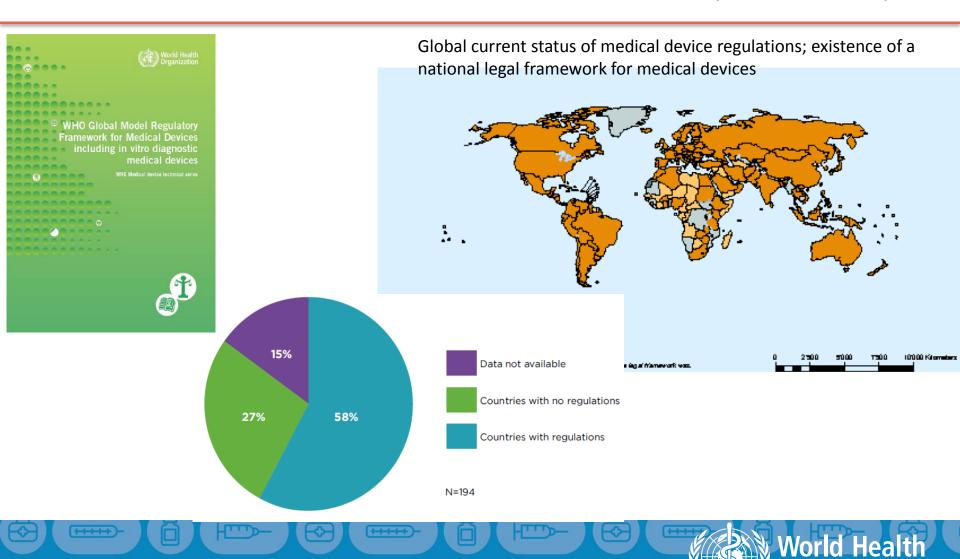




Biomedical engineers study: math, calculus, chemistry, biology, pathology, physiology, electronics, mechanics, physics, biochemistry, biomechanics, transducers, optics, ...



National regulatory authorities in the governments decide which medical devices can enter the local market. (WHA67.20)



Organization

2. Sequence of process to warranty access to appropriate and safe medical devices.

Health technology regulation

Safety performance and quality

Health technology assessment

Clinical
effectiveness
Ethics
Social issues
Organizational

Health technology management

Procurement
Selection
Training
Use



Health Systems

Need to perform HTA is higher where resources are limited

> Low income countries with low coverage

imary health ca interventions

HTA Define:

Essential medicines package, **Essential interventions**

mainly for MDG

Vaccination package

Prevention and some treatment.

Define which ones to add. and to whom.

Middle artigh income countries with medium coverage:

HTA for defining:

Package of interventions on prevention, promotion, and some on treatment and renabilitation.

HTA to define extension on:

NCD interventions

Vertical programs.

For specific populations.

Strong health system

Integrated -care

People-centered

Universal health coverage

High coverage:

Prevention, Diagnostic, Treatment, Rehabilitation, Palliative care, Home care

Medicines, Devices, interventions

or all: children, Adolescents Mothers and Ageing population

HTA to define innovative or extra services.

Fragile states: **HTA define:**

Basic packages

Emergency kits

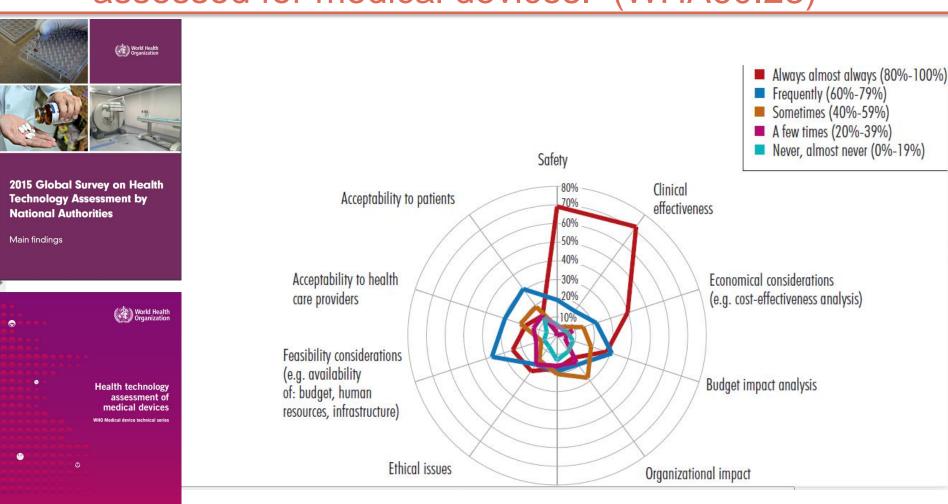
Disaster planning

Coverage and resources, define continuum of HTA activities.

location of different HITA activities relevance of activities changes by position



2015 WHO survey on national authorities on HTA indicated the following areas are/are not being assessed for medical devices. (WHA60.23)















World Health Organization

Lists of priority medical devices

http://www.who.int/medical devices/publications/priority med dev cancer management/en/

Medical devices

Medical devices

Policies and resolutions

Quality and safety regulations

Health technology assessment

Health technology management

Priority medical devices

Innovation

Country data

Global collaborations

Publications

Priority medical devices

List of priority medical devices



Core medical equipment refers to technologies that are commonly considered as important or necessary for specific preventive, diagnostic, treatment or rehabilitation procedures carried out in most health care facilities. WHO has been working, along with experts, collaborating centres and Member States, to develop several tools for better resource allocation, selection, incorporation and safe use.

Nomenclature of medical devices

Key initiatives

List of priority medical devices

Priority medical devices project

















List of medical devices by health care facility Specialized Hospital - Critical Medicine

Localization				Identification					
			Туре*			GMDN**		UMDNS***	
Area	Unit	Subunit	ME, MF, IN	AC	Name	Code	Term name	Code	Term name
Critical Medicine	Coronary Care Unit	Bed	ME		Bed scale	35321	Scale, patient, bed	13458	Scales, Patient, Underbed
Critical Medicine	Coronary Care Unit	Bed	ME		Blood pressure instrument	16156	Sphygmomanometer, aneroid	13106	Sphygmomanometers
Critical Medicine	Coronary Care Unit	Bed	ME		Cardiac output module	36561	Patient monitoring system module, cardiac output	20774	Physiologic Monitor Modules, Cardiac Output
Critical Medicine	Coronary Care Unit	Bed	ME		Examination light	36843	Light, examination, mobile	12276	Lights, Examination
Critical Medicine	Coronary Care Unit	Bed	ME		Flowmeter for oxygen therapy (with humidification)	37132	Flowmeter, oxygen therapy	11746	Flowmeters
Critical Medicine	Coronary Care Unit	Bed	ME		Hemodynamic parameters module		NA		NA
Critical Medicine	Coronary Care Unit	Bed	ME		Invasive blood pressure module	36550	Patient monitoring system module, blood pressure, invasive		NA
Critical Medicine	Coronary Care Unit	Bed	ME		Multichannel infusion pump	17634	Infusion pump, multichannel	17634	Infusion Pumps, Multichannel



9 Global NCD targets to be attained by 2025 (against a 2010 baseline) 25% relative

A 25% relative reduction in risk of premature mortality from cardiovascular disease, cancer, diabetes or chronic respiratory diseases

At least a 10% relative reduction in the harmful use of alcohol

A 10% relative reduction in prevalence of insufficient physical activity

reduction in prevalence of raised blood pressure or contain the prevalence of raised blood pressure















An 80%





A 30% relative reduction in prevalence of current tobacco use

> Halt the rise in diabetes and obesity

A 30% relative

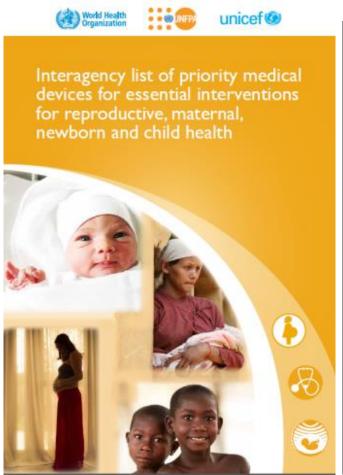
reduction in mean population intake of salt/sodium

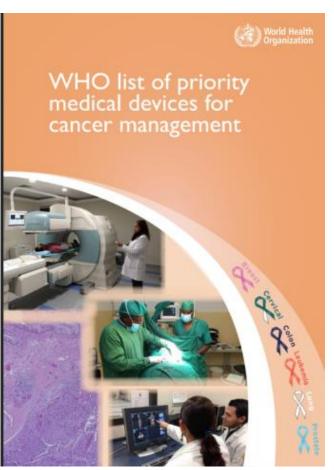
availability of the affordable basic technologies and essential medicines, incl. generics, required to treat NCDs

At least 50% of eligible people receive drug therapy and counselling to prevent heart attacks and strokes



Defining, Guidelines, Interventions, and medical devices by levels of care. Work on priority medical devices 2014- 2016





In development: 2017-2018

WHO list of priority medical devices for cardiovascular diseases

WING Madical device Legalest caring





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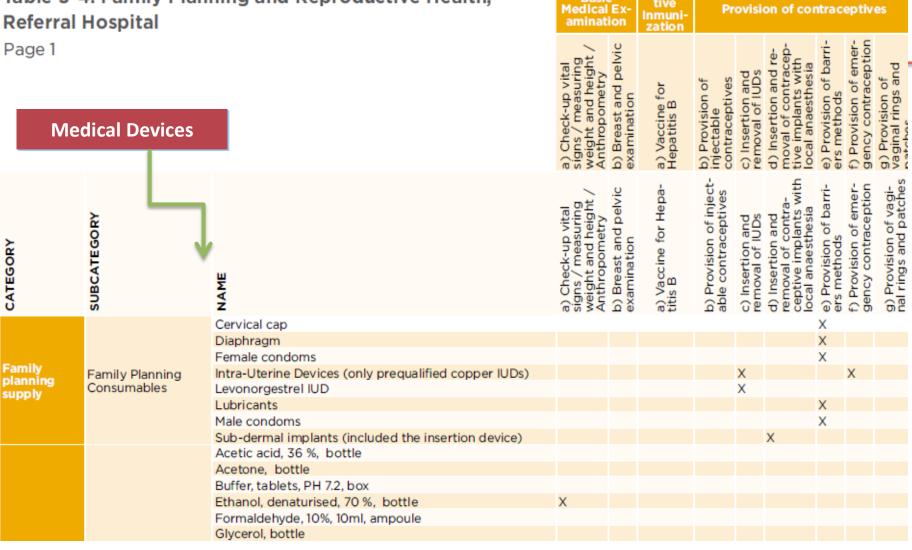
Interventions

Preven-

tive

Basic

Table 5-4: Family Planning and Reproductive Health, Referral Hospital













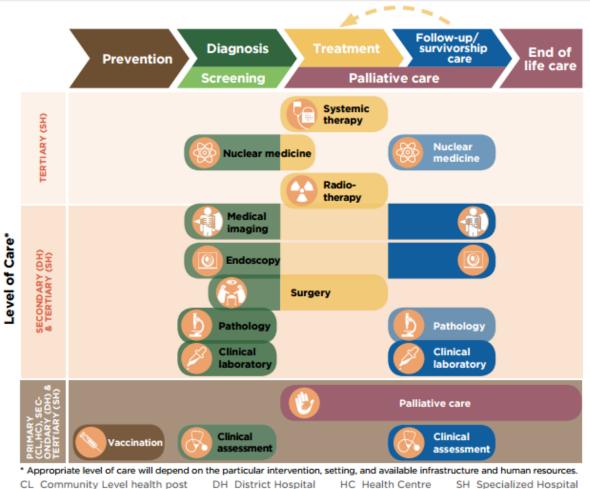






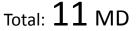


Definition of list of all priority medical devices for cancer management (continuum of care) to support to implement country cancer programs

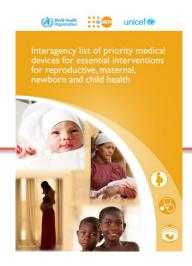












Total: **484** MD

	Total:	484
Intensive care		79
Inpatient care – child		47
Inpatient care – moth newborn	ner &	49
Surgery & anesthesia		83
Labor		67
Referral		101
Examination & diagno	osis	58



Total: 684 MD

Ĕ	Medical equipment	82
capital equipmen	Laboratory & pathology equipment	62
ာ မ	Quality assurance devices	28
<u> </u>	Surgical instruments	81
3	Total:	253
:	Laboratory & pathology eq.	26
oingie use, consumables	Personal protective eq. & clothing	22
	Radiation protection /monitoring devices	23
	Single use devices/disposables/medical supplies	179
<u> </u>	Solutions and reagents	108
2	Other (glassware, utensils, etc.)	70
	Software	3
	Total	424

GMDN – X-ray

Mobile specimen x-ray system, analogue (42279)

Mobile specimen x-ray system, digital (42280)

Stationary specimen x-ray system, analogue (42284)

Stationary specimen x-ray system, digital (42282)

Basic diagnostic x-ray system application software (40866)

Basic diagnostic x-ray system operation software (40821)

Diagnostic x-ray digital imaging system workstation application software (58473)

X-ray system tube support, ceiling mount (40946)

X-ray system tube support, floor stand (37076)

X-ray system tube support, gantry mount (40949)

X-ray system tube support, table mount (40951)

X-ray system tube support, wall mount (40947)

Basic diagnostic x-ray system table, non-powered (40654)

Basic diagnostic x-ray system table, powered (40655)

Total:

431



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Medical equipment for...

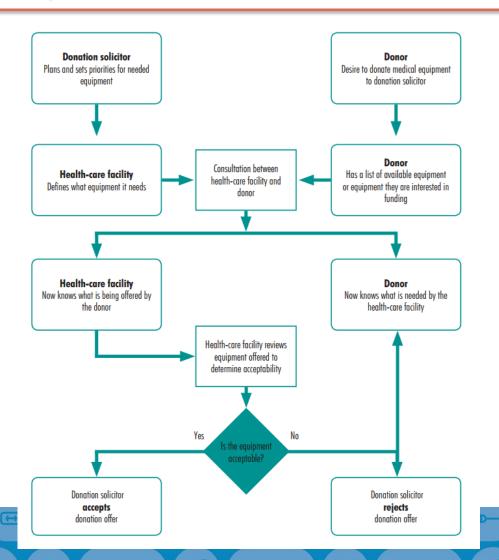
Using the priority list of medical devices, to determine the gaps: needs assessment

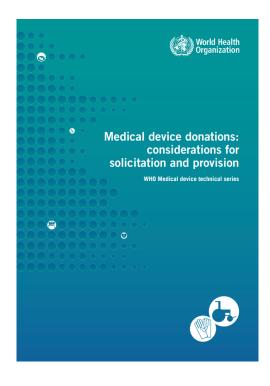
Defining, Guidelines, Interventions, and medical devices by levels of care Work on priority medical devices 2014- 2016 Figure 1. General needs ass 2017-2018 Generic standards and examples World Health Organization Level of care Clinical practice guidelines Medical device lists Needs assessment for Prioritization medical devices WHO Medical device technical series Budgetary Overall gap / Analysing/interpreting Prioritized need and HR situation Epidemiological needs/disease priorities Population data (demography, catchment area, patient rate) Service availability and accessibility Infrastructure situation Health technology / medical device situation Human resource situation Baseline data

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World Health Organization

Medical Device Donations represent more problems than benefits if wrongly done





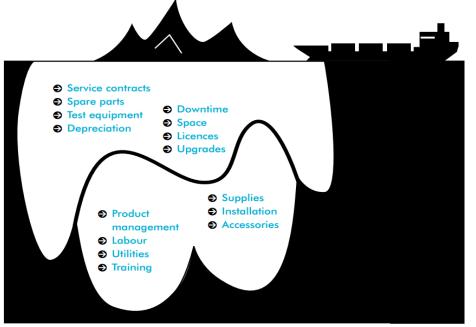


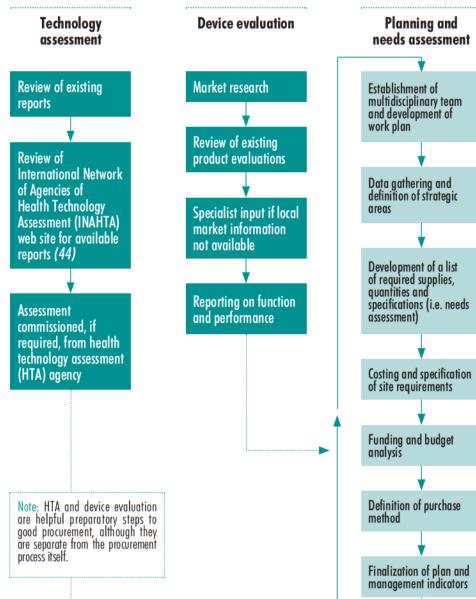


Procurement of medical devices



Figure 5.1 The hidden costs of medical devices





Technical specifications of Neonatal resuscitation devices

	1: Technical specifications for a self-inflating neonatal resuscitation
ag with	ı mask
1.1	Scope
1.2	Background for a neonatal resuscitation bag with mask
	1.2.1 Self-inflating bag
	1.2.2 Valve
	1.2.3 Mask
1.3	Standards and regulations compliance
1.4	Other considerations. 13
1	1.4.1 How to use a resuscitation bag with mask
	1.4.2 Reprocessing
	1.4.3 Storage and packaging. 15
	1.4.4 Maintenance
	1.4.5 Capacity-building and quality assurance related to the neonatal
	resuscitator
1.5	Key tender/request for quotation specifications for a neonatal
1.5	resuscitation bag with masks
	1.5.1 Neonatal resuscitation bag with mask specifications
	1.5.1 Neonatal resuscitation bag with mask specifications
	2: Technical specifications for a suction machine
2.1	Scope
2.2	Background for a suction machine
2.3	Equipment requirement
	2.3.1 Electrical suction machine
2.4	How to use an electrical suction machine
	2.4.1 Manual/foot-operated suction machines
2.5	Standards and regulations compliance
2.6	Other considerations
	2.6.1 Reprocessing
	2.6.2 Maintenance
	2.6.3 Suction catheter
2.7	Key tender/request for quotation specifications for a suction machine,
	electrically operated
	2.7.1 Suction machine specifications 23
	2.7.1 Odelion macrime specimentoris

Chapter :	3: Technical specifications for a suction device	25
Brief	description	25
3.1	Scope	25
3.2	Background	25
3.3	Standards and regulations compliance	26
3.4	Reprocessing	26
3.5	Maintenance	26
3.6	Capacity-building and quality assurance related to the suction devices 2	26
3.7	Key tender/request for quotation specifications for a suction bulb	27
	3.7.1 Single-use suction bulb specifications	27
	3.7.2 Suction device specifications	28

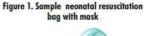
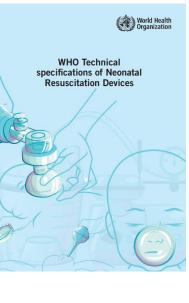




Figure 2. How to use a neonatal resuscitation bag with mask

























Technical specifications of oxygen concentrators

- http://www.who.int/medical_devices/publications/
- tech_specs_oxygen-concentrators/en/

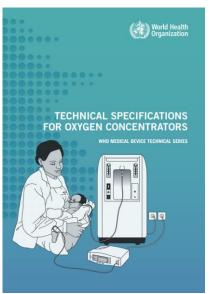
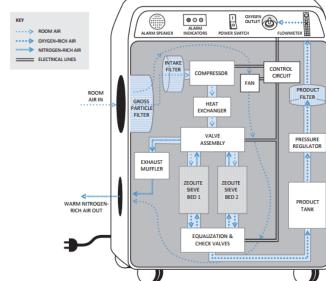


Figure 1. Process flow and components of a typical oxygen concentrator

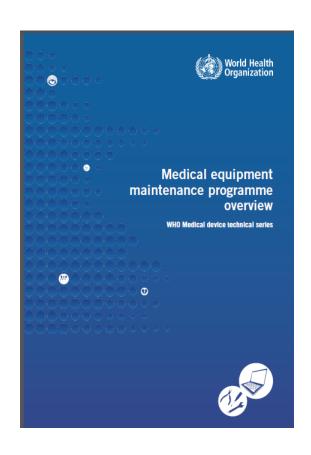


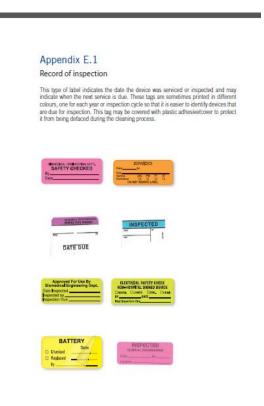
Source: Provided by PATH (2015).

	Purp	ose of use				
	14	Clinical or other purpose	Provide positive air pressure ventilation to newborn babies with asphyxia, babies who experience respiratory arrest, apnoea or respiratory distress requiring assisted ventilation, and babies who require assisted ventilation during procedures.			
	15	Level of use (if relevant)	Health centre/district hospital/provincial hospital/specialized hospital/other health facilities that include maternity services.			
	16	Clinical department/ward (if relevant)	Nursing services, surgery, paediatrics, emergency medicine, obstetrics, intensive care unit, labour and delivery room.			
	17	Overview of functional requirements	The resuscitator is used to ventilate newborns with a body weight less than 5 kg. The resuscitator can be used to efficiently maintain ventilation, or as resuscitation in other critical situations.			
	Tech	nical characteristics				
18		Detailed requirements	A resuscitator is used to ventilate a neonate with a body weight of less than 5 kg. It is operated by hand and ventilation can be done with ambient air or with oxygen. A resuscitator can be totally disassembled, and is easy to clean and disinfect. All a parts are manufactured from high-strength, long-life materials that require no special maintenance or storage conditions. A resuscitator is supplied as a complete set with: • non-rebreathing patient valve with a pressure limiting valve so that airway pressure does not exceed 4.5 kPa (45 cmH ₄ ,0) and can transmit an airway pressure of at least 3 kPa (=30 cmH ₂ ,0); • masks, translucent, in two different sizes: Size 0 (preterm and low-birth-weight baby), round type, outer diameter 35–50 mm; Size 1 (term baby), round type, outer diameter 50–65 mm silicone rubber or any material fulfilling at least the standards ISO 10993-1:2009; ISO 10993-5:2009; ISO 10993-10:2010, or equivalent; or classified as USP Class V; • compressible self-refilling ventilation bag: silicone rubber or any other material fulfilling ISO 10651-4; • bag size: 200–320 mL; intake valve with an optional nipple for 0, tubing: polycarbonate/polysulfone or any other material fulfilling the ISO 10651-4 or any other equivalent; • bag made of silicone and valve made of polycarbonate or polysulfone or any other sterilizable material complying with ISO 10651-4 or equivalent • material: polycarbonate/polysulfone or any other sterilizable material			
	19	Displayed parameters	fulfilling at least ISO 10651-4. N/A			
	20	User adjustable settings				
Physical/chemical characteristics		ical/chemical characteristics				
	21	Components (if relevant)	Self-inflating neonatal resuscitation bag with masks for preterm and term babies. Patient valves with pressure relief valves o 45 cmH $_{\rm 2}$ 0.			
	22	Mobility, portability (if relevant)	Portable and mobile.			
)	23	Raw materials (if relevant)	Recommended material is silicone rubber for the bag and mask and polycarbonate/polysulfone for the valves. Any material fulfilling ISO 10993-1:2009; ISO 10993-5:2009; ISO 10993-10:2010 or equivalent or USP Class V is also recommended.			
	Utili	ty requirements				
	24	Electrical, water and/or gas supply	N/A			

(if relevant)

Maintenance of medical equipment





Appendix D.2 Equipment inspection forms

l			Hyper/Hypo	thermia Machi	ne .		
l			Functional check	k and inspection form			
l	Locatio	on:		Control num	ber;		
	Man	ufacturer:		Model:			
		item		OK? (Y/N)	Action needed	Action taken (date/initials)	
	on of chassis?						
b. Conditio	on of attachmen	nt plug?					
_	on of line cord a						
	on of Indicator I	ights and alars	16				
e. Flow		Mode	GPM				
		Heating					
l		Cooling					
		Flow swi	tch activation				
£ Level tw	itch activation						
g. Cold wa	ter reservoir co	ntrok					
h. Blanket	water temperat	ture controller					
Set point Display Thermon		Thermometer					
	SS deg F						
	77 deg F						
SDS dag F							
Display wi	thin 1 deg C (1.1	BF) of set poin	t				
Thermom	eter within 1 de	gC(LBF) of s	et point				
L	High temperate	ure back-up th	ermotat				
	Shut down rela	y set point					
Thermor	meter verificatio	on test					
k. Patient	temperature dis	tplay test					
Probe resistance Patient temp display							
	1355		37°C±0.3°C				
1667 32 °C±0.3 °C							
L. Low temperature backup thermostat							
m. Ground	resistance less	than 0.5 ohm					
n. Leakage current							
	Chassis (groun		10 uA				
	Chassis (ungro	sunded)	100 uA				
Patient probe 50 uA							

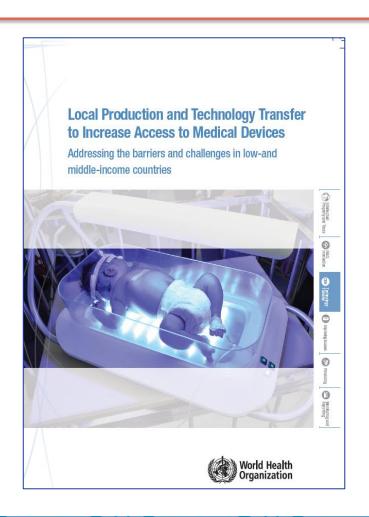
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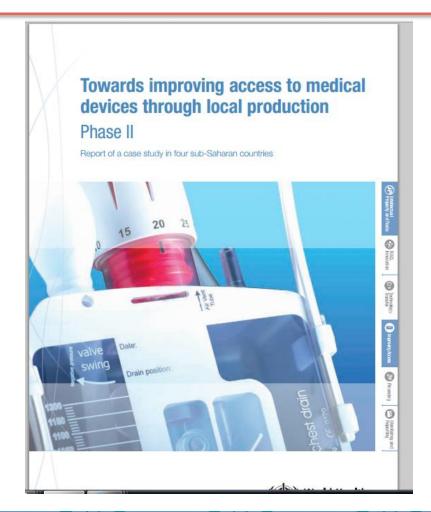
74 Medical equipment maintenance programme overvi

Medical equipment maintenance programme overview



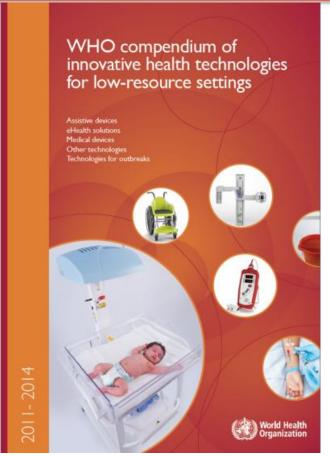
Local production and technology transfer to increase access to medical devices.







Research, development and innovation: WHO Compendium of Innovative Health Technologies for Low Resource Settings



Infant radiant warmer for primary care

Health problem addressed

Nearly 2/3 of all newborn deaths (4 million annually) occur in 10 countries, India being largest contributor with 876,000, Lack of skilled personnel, infrastructure and affordability are big challenges to providing primary care. Hypothermia at birth is one of the most significant risk factors of neonatal mortality irrespective of birth weights and gestational ages. Urgent action is needed to address the issue of neonatal deaths and progress on MDG4, since 40% of under 5 deaths are in new-borns.

Infant radiant warmer with uniform heating: the warmer features a patented "J-profile design that reflects heat uniformly to the bed for more thermal stability. Reduced heat loss: the heater is made with a cartridge (Calrod-like) technology that allows for rapid warming of cold surfaces, thus helping to reduce cold stress for the babies. Safe contact with the patient: All patient contact surfaces are made with biocompatible materialschosen to be gentle on the baby's delicate skin. Rugged: The warmer's electrical system is engineered to operate without a voltage stabilizer and can withstand voltage fluctuations of upto 390V. Clear observation: With a LED-based observation lamp emitting a whit



Many cheap warmers available in the market are unreliable, break down frequently and do not deliver the desired level of clinical performance. There are others that are feature heavy and very highly priced and much beyond the buying capacity of primary care buyers. With Calrod technology for the best clinical outcomes, ruggedness and reliability (unique 5 years

Suitability for low-resource settings

Designed for a low resource health facility with poor infrastructure (intermittent power power fluctuations, no electricity). low-skilled nurses, lack of space, low purchasing power. Easy to use: the device is plug-in and use requires minimal training. Rugged & Reliable; can withstand voltage fluctuations up to 390V. Comes with 5 year maintenance warranty. The temperature probe is made of Keylar (material used to make bullet proof yests) Affordable: Low purchase price, low maintenance & service costs. So far, the warmer has been installed in many challenging environments across India and ASEAN with poor room air temperature control, constant power outages, rugged environment and a limited availability of skilled clinicians. The rugged and reliable design was well suited to the challenging environment and usage conditions.

Plug in the assembled unit to a power source and switch on the device. The warmer performs a self test, then switch ON in the manual heating mode. Use this mode to pre-heat, if needed. Place the baby on the mattress in the bassinet and attach

CE certified (CE 01236). Biocompatible: All surfaces coming in contact with the patient are biocompatible (EN ISO 10993-1:2009/AC:2010). EN 60601 regulations - MedicalElectrical Equipment. The product conforms to RoHS requirements (residues of hazardous substances). Other EN 62366 - Medical devices, EN 62304 - Medical Device software, EN 980 - Symbols for use in the labeling, EN 1041.

Future work and challenges

The product is low cost and meant for low resource settings. One of the obstacles is government specifications and tenders. The documents need to be updated with new technologies so that the product can reach the markets it is actually meant for

User: Intended for use by a physician, nurse, or midwife Training: Basic training manual (quick reference guide) provided and video available

Maintenance: No scheduled maintenance required

Setting: Designed for rural and urban indoor settings and in primary, secondary and tertiary level health care facilities. Energy and Facility requirements: Requires a continuous power Supply of 230V and an environment within the range of

Weight (kg): 37

Dimensions: 1500mm x 800mm x 800mm

Other features: mobile Year of commercialization: 2014

Currently sold in: India, Malaysia, Indonesia, Vietnan

Contact Sumit Mehrotra | Email lowresourcesetting@gmail.com | Telephone 918040886511 | Web www.gehealthcare.com

Source: http://www.who.int/medical devices/innovation/compendium/en/, 15.09.2016









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Centro Nacional de Excelencia Tecnológica en Salud



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CENTRO PARA EL CONTROL ESTATAL
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International Federation for Medical and Biological Engineering A member of the International Union on Physical and Engineering Science in Medicine (IUPESM)





World Federation for Ultrasound in Medicine and Biology

WFUMB helps bring sustainable ultrasound programs to the underserved areas of the world to improve global healthcare through collaboration, communication, and education.









QUALITY

WHO Publications on the safe and quality use of medical devices, example ultrasound

http://www.who.int/medical_devices/publications/en/



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dimensional A-, B-, and M-mode, B- mode two-dimensional, three-, fourdimensional and Doppler ultrasound. This is followed by a chapter on examination techniques. The subsequent fourteen chapters deal in turn with the diagnostic ultrasonography of each of the main organs of the body.

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 WHO catalogue of health technologies publications 中 pdf, 3.16Mb

- Country information
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Country information

Global Atlas of medical devices 2017

WHO Global Model Regulatory Framework for Medical Devices including in vitro diagnostic medical devices

Baseline country survey on medical devices 2011

First WHO Global Forum on Medical Devices: context, outcomes and future actions

2011

Policy

Development of Medical Device Policies

Package WHO medical device technical series (8 documents)

Innovation

Compendium of innovative health technologies for low-resource settings. 2011-2014: Assistive devices, eHealth solutions, medical devices, other technologies, technologies for outbreaks

Compendium of Innovative Health Technologies for Low-resource Settings

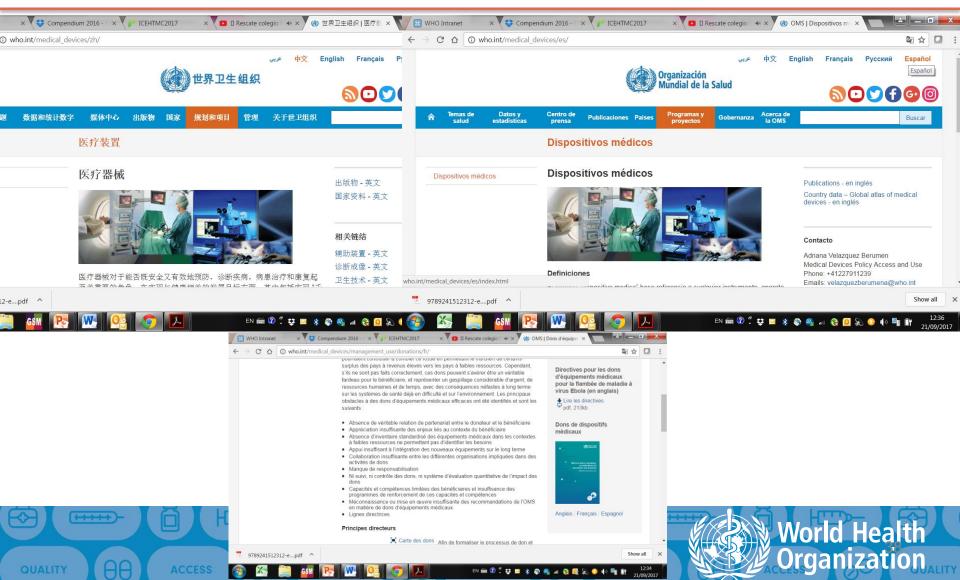
Medical Devices and eHealth Solutions

Compendium of New and Emerging Health Technologies

Innovative Technologies that Address Global Health Concerns



who.int/medical_devices/en/ in English, Spanish, Chinese and French



WHO MEdical Devices Information System (WHO-MEDEVIS) elements

Medical Devices innovation

- Research and development
- Innovative technologies for low resource settings

Medical Devices

- Risk level
- Nomenclature
- Quality standards
- Product standards Products cleared

Assessment

- Cost effectiveness
- Country assessment by technology

- Clinical interventions
- Sub-interventions

INFORM ATION

Medical Devices

- Name
- Nomenclatures
- Other names
- Definition
- Purpose of use

Medical devices per type of Health facility

- Health post,
- Health center
- District hospital
- Specialized hospital
- Outpatient clinics
- Guidelines for guantification

Management (procurement and supply to safe use)

- Technical specifications for procurement and donations
- Image (catalogue)
- Costs (budget planning)
- Maintenance routines
- Operation Safety concerns

Market product

- Pre-qualified products list
- Models and Vendors (options that comply specs)
- Links to other databases

World Health Organization

ACCESS

QUALITY ACCESS QUALITY

Conclusions

Science and technology are evolving daily, so are medical devices that need to be designed, regulated, assessed, managed and use properly.

Medical devices

- Are indispensable for health care provision and need to be appropriate to the setting
- Are not pharmaceuticals, do not achieve systemic biochemical changes
- Can be 1 mm to 4 mts; last 1 second or 30 years; weigh 1 gram or 1 ton..
- Require special training to be used appropriately,
- Some require maintenance and spare parts
- Require collaborative work from biomedical engineers with doctors, nurses, laboratory technicians, radiographers, IT, hospital managers.... to help in the selection, supply, training and best use of medical devices.
- Are necessary to provide universal health coverage and to achieve the health related Sustainable Development Goals.

Much work needs to be done in this area, specially in LMIC to ensure access!!



Thank you!



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medicaldevices@who.int

