Greetings everyone!

It is hard to believe that it has only been a few weeks since the turn of the decade! It feels like we are already halfway through the year - planning for our HIMSS and AAMI Symposiaums, as well as many other membership events is already well on its way. And we are already looking at 2021 and beyond!

But first I want to take a few moments to wish you all a Happy New Year and thank all of you who contributed to ACCE over the last decade. The names are too many to mention in this newsletter. We have had many committee chairs and members, as well as many presidents and board members. However I want to single out Jennifer Jackson and Mario Castaneda who led ACCE into the new (past) decade. Their vision was essential to what ACCE is today, a thought-leading professional organization with a national and international presence like never before.

Staying on that thought-leading topic, I was honored to attend the College of Healthcare Information Management Executives (CHIME) CIO Boot Camp in Phoenix, AZ late in the year. While there, I was able to establish many relationships with different industry executives, mostly in Information Technology and Services, but not limited to that. I also set some time aside to discuss ACCE and CHIME synergies with CHIME CEO Russell Branzell. While we recognize the differences, it also seems that our organizations are similar in many ways. Both of our organizations are comprised of leaders in their respective industries who are pushing the envelope in what we do. Our mission is also similar in many ways. We advance healthcare by promoting safe and effective application of knowledge and technology. Aware of these synergies we agreed to continue our discussion on how ACCE and CHIME can collaborate moving forward, how ACCE can benefit from world leading speakers in CHIME and how CHIME can leverage the knowledge of ACCE members. We want to also discuss sending more ACCE members to attend different Boot Camps offered by CHIME for only IT Executives. Stay tuned - there will be more to come on this topic.

Our Education Committee has been working hard to put a great lineup of topics and speakers for the HIMSS and AAMI Symposiaums. The HIMSS Symposium will be in Orlando, on March 9th 2020 at 9AM. The symposium will be focusing on Cybersecurity for Medical Devices and Systems, giving us insights into the regulatory world around security, and how to address different escalations related to medical device cybersecurity. The Committee has also identified a list of topics for the AAMI Symposium in New Orleans, which will be published shortly.

In New Orleans, this year in June, we will also celebrate ACCE’s 30 Year Birthday! It is a big milestone for our organization, so we hope to see all of you there! We will have a membership
President

(Continued from page 1)

event on June 13th in the evening, so please mark your calendars already! We know how busy it can get in these events. Our conference planning team is hard at work to make the event an informative one as well as (most importantly) a fun event for all. Please join us there!

And last but not least, I wanted to announce that I am very pleased Bhaskar Iduri has joined us as the new BOK/CE Committee Chair. We are very pleased to have this industry leader dedicate precious time to ACCE and to help advance the profession by leading the BOK/CE Committee. Thank you Bhaskar!

Happy New Year to you all! I hope this is a great and productive year for you, and hope to see you in the different ACCE Events throughout the year!

Ilir Kullolli, President, ACCE
president@accenet.org

Volunteers wanted!

If you would you like to volunteer for ACCE, please complete this volunteer survey.

Volunteers are needed to write ACCE News articles, participate on a variety of important committees and assist in various other roles.

Gary Barkov was recently appointed Vice President, Healthcare Technology Management for Advocate Aurora Health (AAH). AAH is based in Downers Grove, IL and Milwaukee, WI, and is the ninth largest not-for-profit healthcare system in the US, with 28 hospitals and over 500 ambulatory locations. Barkov joined the organization in 2009, and previously served as HTM Operations Director and Multi-Site Clinical Engineering Manager. In his new role, Barkov oversees strategic capital planning, service and maintenance, cybersecurity, human factors, and interoperability of over $2B of medical technology.

Gary Barkov, VP, Health Technology Management
Advocate Aurora Health

ACCE News

ACCE News is the official newsletter of the American College of Clinical Engineering (ACCE).

Managing Editor
Jim Keller
jpkillerjr@verizon.net

Co-Editors
Ted Cohen
tedcohen@pacbell.net
Ismael Cordero
icordero@ECRI.org

Circulation & Address Corrections
Suly Chi, ACCE Secretariat
Secretariat@accenet.org

ACCE News is a benefit of ACCE membership; nonmembers may subscribe for $75 per year.

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The 3rd International Clinical Engineering and Health Technology Management Congress (III ICEHTMC) was held in Rome, Italy on October 20-23, 2019. Previous ICEHTMCs were held in 2015 in Hangzhou, China, and in 2017 in Sao Paulo, Brazil.

This Congress serves as the most important event organized by the Clinical Engineering Division of IFMBE (CED) - https://ced.ifmbe.org/. Since its inception, the ICEHTMC have gathered professionals from across the globe to share their knowledge with international attendees. For III ICEHTMC, new milestones were reached, including 1,000 participants from 70 countries, with over 20 members of ACCE involved.

The ICEHTMC proved to be a great opportunity to bring together global experts, biomedical and clinical engineers, academics, politicians and decision-makers, representatives of the med-tech industry, and all those involved with the wide variety of health technologies that are shaping the way healthcare is being delivered today and in the future.

The Congress covered a wide spectrum of topics, from clinical risk management to health technology assessment, from ICT and medical informatics to international standards and regulations, from maintenance and health operations to the development of innovative devices, as well as many other relevant topics.

The overall goal of the event was to share experiences and best practices on the global impact that health technologies have on healthcare quality and effectiveness in different settings. The program highlighted worldwide experts and key opinion leaders, including the ministers of health of two countries.

The Congress was locally sponsored by the Italian Clinical Engineering Association, who led the congress preparation and sponsor development, including a highly innovative presentation selection process with awards for the top papers in each of 12 categories. These top presentations will also be published in the Global Clinical Engineering Journal. Prior to the Congress, the Congress proceedings were published by the Journal. Key Congress documents include: (1) full report; (2) program and venue; (3) event presentations; (4) Video recordings of presentations; and (5) Photos from the event.

The Congress was preceded by regional meetings of attendees based in six WHO country groups: Americas, Europe, Middle East North Africa, Africa, Southeast Asia, and Western Pacific. Together, these groups developed a consensus draft Global CE Action Plan for 2020-2021, led by Dr. Yadin David, and further fine-tuned with regional meetings in December 2019 and January 2020.

A Sunday evening Reception followed the Summit at the beautiful Palazzo Rospigliosi.

The Monday and Tuesday (October 20-21) Congress in Center Europa was located inside the campus of the Faculty of Medicine of the University Cattolica del Sacro Cuore of Rome, located next door to the Hospital Gemelli, one of the largest health facil...
(Continued from page 3)

ities in Italy, and allowing 5 simultaneous separate tracks of presentations and discussions as needed.

On Tuesday October 22, the Congress closed with an announcement that AAMI was selected as the Fall 2021 4th ICEHTMC host at a site on the east coast of the United States. More information about this event will be coming soon. Please plan to join us!

After the Congress, on Wednesday October 23, we had the unbelievable opportunity to see the Pope in St. Peters Square, with AIC and Congress leaders Stefano Bergamasco and Lorenzo Leogrande from Italy having a personal audience. Many Congress participants were able to see the Pope’s Papal Audience that morning.

In summary, we believe that the ICEHTMC will continue to be the most important networking and knowledge hub for international participants in more editions in the future. Plan to join us for the IV ICEHTMC in the USA in the Fall of 2021, as we expect CE representatives from over 100 countries!

Tom Judd, IFMBE CED Board Chairman
Judd.Tom@gmail.com

Italian Clinical Engineering leaders Stefano Bergamasco and Lorenzo Leogrande meeting Pope Francis on October 23 (the insignia in the photo indicates this is an official Vatican picture)

ICEHTMC Congress participants in St Peters Square at the Vatican on October 23

Clinical Engineering Certification Program

**Purpose:** The purpose of certification is to promote healthcare delivery improvement through the certification assessment of competency of professionals who support and advance patient care by applying engineering and management skills to healthcare technology.

The certification process includes the establishing and measuring:

a) the level of knowledge

b) the ability to communicate that knowledge

c) the ability to use that knowledge to solve problems in healthcare technology that are required for certification as a clinical engineer and requiring continued personal and professional growth in the practice of clinical engineering to maintain certification.
AAMI Update: Recruiting the Next Generation

AAMI Exchange 2020

Registration is now open for the premier global health technology event, AAMI Exchange 2020, taking place in historic New Orleans, LA, June 12–15. The AAMI Exchange provides a forum for broad conversations among these stakeholders on the ever-changing industry of medical technology.

AAMI Exchange 2020 will feature more than 80 education sessions with more than 130 world-class speakers and industry experts and over 200 industry-leading brands and exhibitors. Attendees can network with 2,500 healthcare technology and sterilization professionals and earn up to 15 ACI continuing education units (CEUs). For more information and to register, visit www.AAMIExchange.org.

Ask The Joint Commission

Do you have a burning question about a Joint Commission regulation, standard, or practice?

Here’s your chance to ask all of your questions and have them answered by The Joint Commission (TJC) team. Just submit your question and name to www.aami.org/AskTJC, and be on the lookout for the answer to your question in AAMI’s weekly Ask the Joint Commission post in AAMI Connect (http://connect.aami.org) and in AAMI’s journal, BI&T (www.aami.org/BIT).

Hitting the Road for HTM

AAMI staff members traveled to several cities and states in 2019 to meet with healthcare technology management (HTM) professionals and spread the word about careers in HTM. Their visits included state HTM association meetings from Massachusetts to Florida, as well as youth leadership and professional conferences, such as a Girl Scout gathering in Bedford, NH, and the MD Expo in Houston, TX, and Baltimore, MD.

CBET Review Course in April

AAMI will again offer its popular review course to help biomedical equipment technicians (BMETs) prepare for the Certified Biomedical Equipment Technician (CBET) certification exam.

The eight session CBET Study Course will be held every Monday and Wednesday evening, 7–9:00 p.m. EST starting Monday, April 6 and ending Wednesday, April 29. All sessions are recorded, so you can begin the study course at any time up until the end date.

These intensive online sessions cover each area of the CBET exam outline, including anatomy and physiology, public safety in the healthcare facility, fundamentals of electricity and electronics, healthcare technology and function, healthcare technology problem solving, and healthcare information technology.

For more information and to register, visit www.aami.org/Certification.

Recurrenting the Next Generation

With fewer qualified candidates in the hiring pool and an aging workforce, recruiting new healthcare technology management (HTM) professionals is more important than ever.

To make promoting HTM easier, AAMI created “HTM in a Box,” a free online presentation to inform students and the public about career opportunities in HTM. HTM in a Box contains three presentation modules that are tailored to specific age groups: middle school, high school, and adults.

“It’s important to get the word out because we need to increase the HTM personnel pipeline. HTM in a Box helps users do that by giving them a resource with a standard and strong message about the field,” said Danielle McGeary, vice president of HTM at AAMI, who spearheaded the project with the Technology Management Council and demonstrated the resource at HTM events around the country.

In addition to the presentation modules, the HTM in a Box webpage has links to other free resources that make it easier to promote HTM careers. These include a list of HTM academic programs in the U.S. by state, a printable HTM career brochure, a document with tips and sample text for contacting schools and an orientation video for using HTM in a Box.

You can download HTM in a Box and several other resources at www.aami.org/HTMinaBox.

2020 International Standards Conference

Registration is now open for the April 2020 International Conference on Medical Device Standards and Regulations (ISC 2020). This year, meeting topics will focus on the health technology life cycle and delivering better patient outcomes. ISC 2020 is hosted by AAMI, the Food and Drug Administration (FDA), and the British Standards Institution.

The conference’s keynote speakers will be Jeffrey Shuren, director of the FDA’s Center for Devices and Radiological Health, and Graeme Tunbridge, director of devices at Medicines and Healthcare products Regulatory Agency in London, UK. Other ISC 2020 schedule highlights include a deep dive into the European Union’s impending implementation of the Medical Device Regulation and a workshop on compliance with the FDA Accreditation Scheme for Conformity Assessment program.

ISC 2020 will take place in Arlington, VA, at the AAMI Center for Excellence and the neighboring Westin Arlington Gateway Hotel from April 20 to 23. For more information and to register, visit www.aami.org/ISC.

HTM Compliance Program “Starter Kit”

So, you want to develop a compliance program for your HTM department. But where do you start?

Technology Management Council Member and ACCE President Elect

A few weeks ago, I obtained an electronic copy of the newly published Clinical Engineering Handbook, Second Edition and I was motivated to share my initial impressions along with presenting the general scope and content of the book to my clinical engineering colleagues.

The first edition of this book launched in 2004 was under the leadership of ACCE Fellow member Joseph Dyro. From the moment I obtained that book, it quickly became my go-to reference for clinical engineering matters, especially for my international training activities. In fact, through ORBIS International, I provided over 100 copies of the book to clinical engineering trainees and colleagues all over the globe.

Ernesto Iadanza led this equally ambitious current edition. Iadanza is the Chairman of the Health Technology Assessment Division at the IFMBE, and Chairman of the Education and Training Committee at the IUPESM. He is also an Adjunct Professor in Clinical Engineering at the University of Florence (Italy), and member of IFMBE, EMBS, IEEE.

Clinical engineers play an increasingly important role as translators between the medical, engineering and business professions. In addition, they influence procedures and policies at research facilities, universities, and in private and government agencies. Adriana Velazquez, Senior Advisor of Medical Devices at the World Health Organization (WHO) highlights this role in the book's preface. Velazquez notes that "Through evidence-based understanding of the 'system lifecycle' of medical innovations, clinical engineers can help to integrate the vertical intelligences of the various sectors in a more methodical and proactive manner", and that "This 'lifecycle' intelligence is an essential professional resource for any 21st-century healthcare innovator, manufacturer, planner, care provider, or relevant government agency."

The book presents a definitive, comprehensive, and up-to-date resource on clinical engineering. It covers traditional practices, such as healthcare technology management, medical device service, and technology application. Readers will also find valuable information on the newest research and groundbreaking developments in clinical engineering, such as health technology assessment, disaster preparedness, decision support systems, human factors engineering, mobile medicine, success stories in clinical engineering, and prospects and guidelines on the future of clinical engineering.

167 leading international experts with ties to IFMBE, IUPESM, Global CE Advisory Board, IEEE, and more collaborated on this book. I was amazed, but certainly not surprised, that many of the contributors are members of ACCE.

The content is divided into 127 chapters and grouped into 13 sections:

Section 1: Clinical engineering
Section 2: Worldwide clinical engineering practice
Section 3: Healthcare technology management
Section 4: Management
Section 5: Safety
Section 6: Professionalism, education, and ethics
Section 7: Medical devices: Design, manufacturing, evaluation, and control
Section 8: Medical devices: Utilization and service
Section 9: Management of digital healthcare, information systems, and health informatics innovations
Section 10: Engineering the clinical environment
Section 11: Medical device standards, regulations, and the law
Section 12: Health technology assessment
Section 13: Introduction to human factors

This book is bound to become, as the first edition did, a valuable and frequently used resource for researchers, professionals, students of clinical engineering and biomedical engineering; health technology managers, healthcare managers, and healthcare organizations. I strongly recommend grabbing a copy.

Ismael Cordero,
Co-Editor ACCE News
ismaelcordero@me.com
<table>
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<tr>
<th>Date</th>
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<th>Synopsis</th>
<th>Speakers</th>
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<tr>
<td>2/13/2020</td>
<td>Incident Investigation in the Hospital</td>
<td>Medical device incident investigation in the hospital is part of the culture of safety. When safety events occur in the hospital, a series of actions take place to ensure the patient and staff are safe, and the events are analyzed/investigated and reported accordingly. Reporting can be internal, within the hospital or external to the manufacturer and FDA, depending on the type and severity of the event. Medical device reporting helps improve patient safety and meet regulatory requirements. HTM professionals typically carry out the analysis and investigation, or in certain situations, an outside consultant is hired to assist. In this webinar, we will review the steps that take place when an incident occurs in the hospital which involves medical devices or clinical technology. We will also provide an overview of healthcare incidents, types of events, Outline of an institutional policy to include important elements, device regulation, and culture of safety. Case studies will also be presented as part of the webinar.</td>
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<td>Salim Kai</td>
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<td>3/12/2020</td>
<td>Business Continuity and Disaster Recovery for CE-IT</td>
<td>Today, safe and effective application of clinical systems requires integrity and availability of medical systems. In order to maintain services at a high level, business continuity and disaster recovery (BCDR) planning cannot be ignored. In this Symposium, Sam Buhrow will address this shift in Clinical IT practice. We will cover topics such as BCDR best practices and regulation, as well as practical vetted processes for applying these principles in your organization. We will discuss alignment with supply chain as well as incident management and forensics for the worst case scenario.</td>
<td>Sam Buhrow</td>
</tr>
<tr>
<td>4/9/2020</td>
<td>Healthcare IT Public Policy</td>
<td>Everyday outside of our hospitals there is a fight taking place for public policy that can have devastating impacts on patient care. In this webinar two prominent lobbyists from CHIME will provide background to the process of bringing advocacy for topics such as Cybersecurity, Telemedicine and Interoperability, and provide information on how you can participate in advocating for greater visibility of issues in Healthcare.</td>
<td>Mari Savickis</td>
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And a special thanks to Erik Decker and Rob Suarez for presentation on the Healthcare Sector Coordinating Council Joint Security Plan and Health Industry Cybersecurity Practices documents. A lot of information was provided for anyone interested in helping to secure their organization from harm. We would also like to thank Chad Waters with ECRI, David Soffer with Well Span Health, and Keith Whitby from Mayo Clinic for their panel discussion on legacy equipment, and how we can work to better support difficult transitions from out-of-support software. It builds confidence in the community knowing that we are taking ownership of these critical issues, and working to improve cybersecurity in medical equipment.

Danielle Cowgill & Eric Aring
Education Committee co-chairs
educationchair@accenet.org

Next Webinar: February Educational Webinar
"Incident Investigation in the Hospital"

Date/Time:
Thursday, February 13, 2020
12:00pm - 1:00pm (ET)

Presenter:
Salim Kai, MS, BS, AAS, CBET
Senior Director of Biomedical Engineering
Children’s Hospital of Philadelphia
International Committee Report: Outreach Continues in Colombia

Continuing the effort of expanding ACCE’s international outreach, the International Committee completed an additional mutual collaboration and assistance agreement. The new agreement was signed with the Colegio Colombiano de Ingeniería Clínica (COLCINC) of Colombia. It is actually the revision and upgrade of a prior agreement that ACCE had with COLCINC since June 2018, giving both sides additional rights and assistance.

Including this agreement with Colombia, in 2019 the International Committee has completed eleven agreements with similar organizations in other countries. These results show the commitment and diligence of its members and the strong support of the ACCE Board.

The International Committee would also like to announce the retirement of its longest serving member and former chair, Antonio Hernandez. Antonio has contributed extraordinarily to the advancement of clinical engineering worldwide, particularly south of the USA. His leadership and extensive relationship with foreign colleagues will be missed.

Binseng Wang, IC Chair
International.chair@accenet.org

2020 SCHOLARSHIP COMPETITION

The American College of Clinical Engineering will award one scholarship to a student studying to become a CLINICAL ENGINEER. The Scholarship of $1,500 will be awarded at 2020 ACCE members meeting/Awards reception in June 2020, in New Orleans, LA.


To enter the competition, go to https://www.surveymonkey.com/r/2020-scholarship or scan the QR code.

Apply for Scholarship

Antonio Hernandez, former ACCE International Committee Chairman, and its longest server member, has announced his retirement.
Integrating the Healthcare Enterprise (IHE): The 2020 Connectathon

IHE hosted its 2020 Connectathon the week of January 20, 2020 in Cleveland, OH. The Connectathon is the best opportunity for vendors to test their HL7 message passing capabilities to each other in a neutral environment. Monitors evaluate the testing. They are volunteers that have no affiliation with the participating companies which ensures fairness and neutrality.

ACCE is a co-sponsor of the Patient Care Devices (PCD) domain of IHE. This year Connectathon attendance was down compared to recent prior years, including PCD. 51 different organizations participated, testing 1,413 different actors (message senders/receivers). PCD had 23 companies participate, including some new companies and one company that brought pre-production equipment. Overall, PCD participants submitted 280 tests. All of which included several HL7 messages.

The main highlights this year were:

New participants – Vocera and Allscripts were brand new to the Connectathon and heavily involved with PCD testing. A third company added PCD to its list of areas to test, but was unable to participate because of technical issues.

Waveform Tests – Waveform message passing remains optional, but five companies chose to test how well they could pass a live waveform to a consumer. More importantly, the waveform work is now mature enough that we are testing more than just the waveform arriving. We’re now evaluating the rest of the message to ensure other information isn’t lost.

Quiet Hospital Initiative – To aid in managing alarm fatigue, PCD members are working together to minimize distracting alerts and alarms. The Quiet Hospital initiative enables remotely pausing alarms/alerts. A clinician still needs to come to the bedside to address the notice. Our members are being very careful to not eliminate critical alarms, but to minimize distracting ones. I always visualize an alarm going off in a patient room while family members are there. The notice may be trivial or passing, but they have no way to know that. Panic often ensues. Improving alarms minimizes that risk and helps nursing staff focus on the most critical issues.

I’m always amazed at how collaborative the Connectathon process is. During the year and during the Connectathon, rivalries are left at the door. This process is extremely collaborative. An example from last week: A new participant had some specific questions about a message that failed and how to fix it. We went to one of his competitors and they sat down and quickly resolved the problem. This is what hooked me into this work – after decades of competitors ‘trashing’ each other to get our business, it was a huge relief to have a bunch of engineers and programmers sit down together to solve a challenge.

A final note: I am looking to fully retire. If you are interested in some fun part-time work, I’m in the market for a replacement. I hope to pass the reins fully in July 2021 and would like to have someone ready by then. Please feel free to contact me at PCD@ACCENet.org.

And a really final note: All of us involved with IHE PCD thank ACCE for its ongoing support. We couldn’t do it without your help.

Paul R. Sherman CCE, FACCE
Technical Program Manager, IHE PCD
314 422 2688
paulrshermancc@gmail.com
CCE Prep: AEM Programs

Welcome to the second in a new series of CCE Prep columns. In this column we will be providing sample questions and other information about preparation for the CCE examination. The sample questions are based on topics from the ACCE Body of Knowledge survey and the CCE Study Guide, version 8. Answers and rationale for the answers will also be provided. Note that the authors of this column do NOT have any affiliation with the CCE Board of Examiners and have no access to the actual exam questions. If you have specific topics you would like us to cover in this column, or if you are a CCE and you would like to write sample questions for this column, please contact the ACCE News editors.

AEM (Alternative Equipment Maintenance) programs have the potential to save PM (planned maintenance) time while preserving patient safety and complying with requirements from CMS (Centers for Medicare and Medicaid Services) and accrediting organizations (like The Joint Commission). This column addresses some of the characteristics required for an AEM program. It’s written by Matt Baretich, author of AAMI’s AEM Program Guide (2018).

Sample questions:

1. Can high-risk medical equipment be put into an AEM program?
   a) Yes
   b) No

2. What types of medical equipment cannot be put into an AEM program?
   a) Equipment subject to federal or state law or Medicare conditions of participation that require following manufacturer recommendations or more stringent maintenance requirements.
   b) Medical laser devices.
   c) Imaging and radiologic equipment.
   d) None of the types of medical equipment listed above can be put into an AEM program.

3. The requirement for 100% compliance with PM schedules allows which of the following exceptions?
   a) Medical equipment that is in use.
   b) Medical equipment that cannot be located.
   c) Both of the exceptions listed above are allowed.
   d) No exceptions are allowed.

Correct answers:
1: a.
2: d.
3: c.

Explanations:

Questions on the CCE written exam are multiple choice, but we’re showing only two choices in the first example question to make a point: there is no prohibition against putting high-risk medical equipment into an AEM program. When making AEM-related decisions, it may be prudent to take extra care with high-risk medical equipment. For example, you might be cautious about making large changes from manufacturer recommendations. Or you might want to do some in-depth research or get the opinion of an expert.

Keep in mind that putting a medical device into the AEM program does not mean eliminating PM (planned maintenance) or making major changes. For example, if manufacturer recommendations call for a 10-step PM procedure, you could consider making a minor change to a single activity or its frequency. The point is to base your AEM decision-making on good data and sound engineering judgment.

The “taboo list” — types of medical equipment that cannot be put into an AEM program — includes all of the items listed in the sample question. At present, there do not seem to be any restrictions in federal law or CMS regulations. As a practicing clinical engineer, you should make yourself aware of any state law that might apply here. However, the CCE written exam will focus on national requirements rather than state-specific rules.

The definition of “medical laser devices” is straightforward, focusing primarily on surgical lasers. As used for AEM-related decision-making, “imaging and radiologic equipment” refers to both diagnostic imaging equipment — e.g., X-ray, CT, MR, ultrasound — and radiation therapy equipment (e.g., linear accelerators).

There is a fourth item on the taboo list: “New medical equipment with insufficient maintenance history to support the use of AEM strategies.” Because AEM decision-making must be data-driven, you can’t make good decisions without adequate data. The regulations do not spell out exactly what that means in practice, so engineering judgment is important in deciding when enough is known to support AEM decision-making.

To be true to our objectives for providing safe and effective medical equipment for patient care, we should implement policies that support on-schedule PM whenever possible and that we keep track of the times when it’s not possible so we don’t allow equipment to fall through the cracks.

References:


Matt Baretich, PhD, CCE
mfb@baretich.com
ACCE is an official Collaborator of HIMSS20

As such, ACCE Members receive the members discount to attend! To receive the $200 discount, go to Register Now. and select American College of Clinical Engineering from the “Conference Collaborating Organizations” drop down in the registration process, and enter the code “H20COLLAB”

Attend these can’t miss events at HIMSS20

ACCE CE-IT Symposium

“Business Continuity and Disaster Recovery for CE-IT

Date: Monday, March 9, 2020, 9:00 AM – 4:30 PM
Location: Hyatt Regency Orlando, Bayhill 21
Description: The American College of Clinical Engineering was formed to establish a standard of competence for Clinical Engineers, promote excellence in clinical engineering practice, and promote safe and effective application of science and technology in patient care. Today, safe and effective application of clinical systems requires integrity and availability of medical systems.

In order to maintain services at a high level, business continuity and disaster recovery (BCDR) planning cannot be ignored. In this Symposium, we will have nationally and internationally recognized speakers and engineers who will address this shift in clinical engineering practice. We will cover topics such as BCDR best practices and regulation, as well as practical vetted processes for applying these principles in your organization. We will discuss alignment with supply chain as well as incident management and forensics for the worst-case scenario.

Complimentary! Pre-registration required. To register, click here

For detailed program & speakers, click here

For more HIMSS information, turn to page 12
**ACCE Education Session# 181**

**Balancing Costs for Resource Intensive Remediation**

**Time:** Wednesday, March 11, 2020. 2:30pm – 3:30pm  
**Location:** Orlando Convention Center, Room: W304A  
**Description:** Despite the high value of patient data and the increased costs and frequency of breaches it is often difficult to quantify the required resources to remediate medical device vulnerabilities. A single large health system may include 30,000-40,000 pieces of clinical equipment from over 3,000 medical device manufacturers, spanning roughly 8,000 in make and models. Clinical equipment vulnerability remediation even with vendor support, careful planning and attention to resources is a must so there is no impact to patient care services or the normal workflows of stakeholders. This increase in required resources and attention to downtime can be difficult to justify to senior leader management, even when automated tools and high availability designs are both common and expected. This session will focus on how health systems can build partnership with other stakeholders in the clinical equipment ecosystem, in order to quantify vulnerability remediation. Vetted practices and approaches will be discussed during this session.

**Learning Objectives:** Assess security vulnerability risk using quantitative methods; estimate costs of labor and for vulnerability remediation; construct internal processes for making risk mitigation decisions

**Speakers:**  
Axel Wirth, Chief Security Strategist, MedCrypt  
Priyanka Upendra, Quality & Compliance Program Director, Banner Health

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**Health Technology Alliance & American College of Clinical Engineering Awards Reception**

**Date/Time:** Tuesday, March 10, 2020; 6:00 PM – 8:00 PM EST  
**Location:** Orange County Convention Center/ Room# W306A

Network with ACCE members, experts from Clinical Engineering, Health Technology Management, and Health Technology Alliance - all are welcome to attend!

Join Ilir Kullolli, President/ACCE and Steven Wretling, CTIO/HIMSS in congratulating the 2020 ACCE/HIMSS Excellence in Clinical Engineering and Information Technology Synergies Award recipient.

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Welcome New Members

We welcome our newest members, approved by Membership Committee and supported by the Board of Directors:

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<th>Name</th>
<th>Class</th>
<th>Job Title</th>
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<td>Mitchell DuBuc</td>
<td>Candidate</td>
<td>Graduate Student/Clinical Engineer Intern</td>
<td>UCONN/Stanford Children’s</td>
<td>CT/USA</td>
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<tr>
<td>Emily Mengel</td>
<td>Candidate</td>
<td>Clinical Engineer</td>
<td>WakeMed Health &amp; Hospitals</td>
<td>NC/USA</td>
</tr>
<tr>
<td>Adam Shannon</td>
<td>Institutional/Individual</td>
<td>Sr. Manager, Technology Management</td>
<td>Banner Health</td>
<td>AZ/USA</td>
</tr>
<tr>
<td>John (Jack) Casey</td>
<td>Candidate</td>
<td>Graduate Student</td>
<td>UCONN</td>
<td>TX/USA</td>
</tr>
<tr>
<td>Brian Anderson</td>
<td>Individual</td>
<td>Senior Manager</td>
<td>Accenture, LLP</td>
<td>USA</td>
</tr>
<tr>
<td>Francisco Rodriguez-Campos</td>
<td>Institutional/Individual</td>
<td>Senior Project Officer</td>
<td>ECRI Institute</td>
<td>PA/USA</td>
</tr>
</tbody>
</table>

Congratulations goes to: Dean Skillicorn, Project Manager at Allina Health, who was upgraded to Individual Level.

AAMI Update continued

(Continued from page 5)


AAMI’s HTM Live! Webinar Series

AAMI has launched a new, webinar series just for healthcare technology management professionals, called HTM Live! This series of free webinars connects HTM professionals from around the world with experts who will discuss many of the biggest issues facing the profession, from medical device cybersecurity to reducing alarm fatigue.

Visit www.aami.org/events for these webinars and other upcoming events from AAMI. Webinars are recorded and can be downloaded later. For more information email dmcgeary@aami.org.

Seeking Participants for AAMI’s Mentorship Program

AAMI’s Mentorship Program pairs early-career and seasoned HTM professionals for a year-long mentoring relationship. Are you interested in becoming a mentor or protégé? Visit www.aami.org/Mentorship for more information and to participate.

AAMI Staff
ECRI Institute and the Institute for Safe Medication Practices (ISMP) have successfully completed plans to join forces. ISMP is now an ECRI Institute affiliate. By joining together, the two patient safety leaders have created one of the largest healthcare quality and safety entities in the world, driving greater value to the healthcare organizations across all care settings.

ECRI Institute and ISMP are globally respected, nonprofit organizations that promote patient safety by sharing adverse effects, near misses and unsafe conditions, including ones associated with pharmaceutical product and medical device use. Four out of five U.S. hospitals rely on ECRI Institute’s data and recommendations to protect patients from unsafe practices and ineffective products. During its 25 year history, ISMP has improved clinical practice and informed public policy changes, including drug labeling, packaging, and administration practices. This affiliation strengthens our capabilities and accelerates the creation of additional value for those we serve throughout healthcare, most importantly, patients.

Under the terms of the affiliation agreement, ISMP will operate as a wholly-owned subsidiary of ECRI Institute. Both organizations retain their core missions and business operations, and seek opportunities to collaborate and develop new products and services. This affiliation is the natural evolution of a stronger partnership between two leading organizations dedicated to improving patient safety,

We will now be able to work more closely together to share lifesaving information and further a vision where safe, high-quality healthcare is more readily available.

About the Institute for Safe Medication Practices
The Institute for Safe Medication Practices (ISMP) is the only 501c (3) nonprofit organization devoted entirely to preventing medication errors. ISMP is known and respected as the gold standard for medication safety information. For more than 30 years, it also has served as a vital force for progress. ISMP’s advocacy work alone has resulted in numerous necessary changes in clinical practice, public policy, and drug labeling and packaging. Among its many initiatives, ISMP runs the only national voluntary practitioner medication error reporting program, publishes newsletters with real-time error information read and trusted throughout the global healthcare community, and offers a wide range of unique educational programs, tools, and guidelines. Learn more at www.ismp.org.

Free Webinar - Top 10 Health Technology Hazards for 2020
February 12, 2020, 1:00-2:00 PM, ET

Don’t miss this informative overview of ECRI’s annual Top 10 health technology hazards that warrant priority attention for the coming year.

The list highlights problems that the organization’s analysts have determined can occur, can lead to patient harm, and—importantly—can be prevented if appropriate measures are taken.

Who Should Attend?
• Health Technology Managers

Ismael Cordero, Senior Project Engineer icordero@ecri.org
Jennifer Nichols (CMIA chair and ACCE member) opened the conference at the Welcome Breakfast with a warm welcome to all the attendees, providing a brief overview of the education sessions, and introduced the keynote speaker from the FDA.

**Keynote**

The keynote was given by Julie Morabito, Assistant Director with the Medical Product Safety Network (MedSun) in CDRH’s Office of Clinical Evidence and Analysis, Division of Clinical Science and Quality. Julie talked about her interaction with a fellow clinical engineer from a healthcare delivery organization that helped build a CMMS data analysis tool. The FDA team evaluated vast amount of data from the CMMS to assess the effectiveness and safety of the medical devices. The daily repair and maintenance logs documented by healthcare technology management professionals helped screen performance issues of the medical devices, such as, infusion pumps, bedside monitors, etc. This collaboration with healthcare delivery organizations and with the healthcare technology management community has allowed the team to develop a new approach to complement existing methods of safety signals detection.

**AEM Best Practices**

ACCE member, Nader Hammoud, Biomedical Engineering Manager at John Muir Health, provided attendees with simple and vetted information to start an AEM program. Nader discussed the elements of performance within The Joint Commission Environment of Care standards around alternative equipment maintenance (AEM). He provided a process approach so HTM departments can start an AEM program and continuously assess the AEM risk through evidence-based methods. Practical tips about type of equipment to use for AEM, policy verbiage, approval chain for AEM, and including at a very minimum an annual assessment of AEM were discussed. To conclude the session, Nader discussed the electrical safety measures outlined in Title 22 for California and measures outlined in NFPA 99 (2012). The session included continuous interaction between Nader and the attendees.

**Battery Management in Healthcare**

ACCE member Eben Kermit, Stanford University Health, opened the session with a YouTube video of lithium ion battery failures and why they are not allowed on airplanes. He discussed the energy type and energy density that is disseminated from the different fuel sources used in our infrastructure. Scott Sikes with Interstate Batteries talked about different batteries used in the healthcare environment — Battery 101. Shelf life and chemistry characteristics of secondary-rechargeable batteries were discussed as applicable in the healthcare environment. 65% of fires in waste management facilities were caused by batteries. They cause a fire and rise to a temperature of 1,900 degrees Fahrenheit. Scott described the reasons why batteries get overheated due to additional friction when not disposed of with care. He also discussed risk reduction methodologies, namely, inspection during PM/SM schedules, proper disposal, and procurement from trusted sources.

**Cybersecurity Challenges for Networked Medical Devices**

Cybersecurity Challenges for Networked Medical Devices, presented by Jovito Gonzalez, Christopher Hsieh, Jin Matsumoto, Brandon White, and moderated by ACCE President-elect Prayanka Upendra, was well attended, with active engagement from the attendees, and with numerous positive feedback to and from the panelists.

ACCE thanks Jenn Nichols and CMIA for the opportunity to collaborate.

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**Suly Chi, ACCE Secretariat**

[secretariat@accenet.org](mailto:secretariat@accenet.org)
**Why CEs should attend ICE 2020, Scottsdale, AZ, February 9-11**

The Imaging Conference & Expo (ICE) offers CE-HTM professionals with an opportunity for interprofessional and interorganizational collaboration. Quite often we find imaging and non-imaging personnel working in silos. This leads to increased service response time, increased process variation, limited knowledge sharing, and lack of the 3 C’s — communication, collaboration, and coordination.

The continuing education and networking sessions at ICE provide insights around many issues affecting the CE-HTM department, which includes imaging and non-imaging personnel.

Clinical engineers from ACCE’s institutional member Banner Health is presenting on four topics:

- CT Radiation Dose Tracking and Optimization
- Starting an Imaging Apprenticeship Program
- MRI Artifact Troubleshooting
- Leadership – Proven Fundamentals and Practices

The Imaging Conference & Expo will be held at the Hilton Scottsdale Resort & Villas in Scottsdale, Arizona on February 9-11, 2020. Hospitals employees, military personnel, and students are able to register for free with a promo code: 20ICESCOTTSDALE.

Perry Kirwan & Priyanka Upendra
Perry.Kirwan@bannerhealth.com

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**ACCE 2020 Membership Renewal**

Thank you for being an ACCE member!
Membership Renewal for January through December 2020 is due now.

To renew your 2020 membership online with PayPal, please [click here](https://accenet.org/Members/Pages/default.aspx?from=login) or go to [https://accenet.org/Members/Pages/default.aspx?from=login](https://accenet.org/Members/Pages/default.aspx?from=login).

To renew by postal mail, please remit your renewal check to:

ACCE
5200 Butler Pike,
Plymouth Meeting, PA 19462

If you need an e-invoice, please contact ACCE Secretariat at [secretariat@accenet.org](mailto:secretariat@accenet.org)
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ACCE News
Volume 30 Issue 1: January — February 2020

ACCE Calendar

2/10/2020
Deadline for 2020 ACCE Hall of Fame Nominations
For more details, click here

2/10/2020
Deadline for entry in the ACCE Scholarship Competition
application form

2/10/2020
HIMSS Advanced registration deadline

2/13/2020
Webinar: Incident Investigation in the Hospital

3/4/2020
SABI2020 - 22nd Argentine Congress of Bioengineering and 11th Argentine Conference of Clinical Engineering
Location: Piriapolis, Uruguay
For more information and to register, click here

3/9/2020 — 3/13/2020
HIMSS20
Orlando FL

3/9/2020
COMPLIMENTARY! ACCE CE-IT Symposium (pre-HIMSS 20):
Business Continuity and Disaster Recovery (BCDR) for CE-IT
Hyatt Regency Orlando, Orlando, FL
Pre-register today

3/10/2020
Health Technology Alliance/ACCE Awards reception (@HIMSS20), sponsored by Enlighted
Orange County Convention Center
RSVP Today

6/12/2020—6/15/2020
AAMI Exchange
New Orleans
Register today

6/13/2020
ACCE 30th Anniversary/Members meeting reception
New Orleans

Journal of Clinical Engineering Subscriptions for ACCE Members

The Journal of Clinical Engineering is a compilation of articles, papers, and extensive manuscripts relevant to clinical/biomedical engineering or biomedical technology. Subject matter directly relates to the engineering or technology involved in patient care and treatment or technology in the broad field of health care delivery.

ACCE members receive a discounted subscription to the Journal of Clinical Engineering for only $99! (Originally $313). You must login to the ACCE website to view the code. Then visit LWW.com to enter code.