

# ACCE News

Newsletter of the American College of Clinical Engineering

September - October 2018

Volume 28 Issue 5



## **In Memoriam, David P. Harrington**

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## President's Message



Greetings from California!

I would like to thank the ACCE Board members, Committee chairs and members, and other staff members who have been busy working on the goals and mission of ACCE.

### Dave Harrington

I am very sorry to report to the members the passing away of one of our founding members David Harrington. As for many in Clinical Engineering, Dave had been my mentor and a very generous friend and colleague. He helped me in so many ways in my professional career. For many years, Dave and I alternatively (every other month) wrote articles in 24x7 magazine on CBET and CCE Preparation topics. Dave was a prolific writer and had been

writing for 24x7 magazine for a very long period of time. He encouraged me to write and wrote a letter of support on my behalf to the Editor in Chief. His articles were helpful to hundreds of BMETs to obtain the CBET certification. Julie Kirst (who was the Editor in Chief of 24x7 magazine at that time) shared her thoughts about Dave to me, "Dave was a valued board member of 24x7 and when I was the editor he was a never-ending source of information and guidance. I appreciated his humor and knowledge and I was grateful for all of his support. He will be missed."

Dave was part of the faculty of the inaugural 2006 CCE Review Course in Washington DC. He not only taught in the course but supported me in my role as Course Coordinator. Dave was the faculty for the first ACCE CCE Review Teleconference Series. He was on the CCE Review Course faculty for many years and helped many future clinical engineers obtain their CCE.

### New ACCE Student Scholarship

The ACCE Board at its August Board meeting approved to start a new ACCE Student Scholarship (value \$1,500) for students pursuing a Biomedical/Clinical Engineering degree. Please look for more information and details in the coming months.

### 4th Global Clinical Engineering Day: 10/21/2018

Join ACCE and post your success stories in applying Health Technology in Patient Care to ACCE Blog.

### HIMSS19 Conference & Exhibition

ACCE is an official Collaborator of HIMSS19. ACCE members can use the code COLLAB19 to receive a \$200 discount of regular registration fee. For more details please see the ACCE website.

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# In Memoriam, David P. Harrington, PhD

Widely known for his long-time role as the author of the “View from the Penalty Box” column for this newsletter, David P. Harrington, passed away on September 27, 2018 at the age of 77.

Dave, a resident of Medway Massachusetts since 1965, died at Milford Regional Medical Center surrounded by his loving family. He was the beloved husband of Dorothy (Geary) Harrington since 1964. Besides his wife, he is survived by three sons, Sean Harrington and his wife Alison Gustafson of Hingham MA, Bryan Harrington and his wife Cheryl of Bellingham, MA, and Todd Harrington and his wife Britt of Bellingham, MA, and by six grandchildren, Conor, Camryn, Meghan, Elliot, Patrick and Kathryn.

Dave worked in medical engineering at New England Medical Center for many years. He taught biomedical engineering at the Franklin Institute for 20 years and also at Wentworth, MIT, TUFTS and Boston University. He was also very involved in the biomedical community, locally, nationally, and internationally, had published over 100 articles and had worked with Mother Teresa while in India.

Donations can be made in his memory to the Medway Fire & EMS Assoc., 44 Milford St., Medway, MA 02053.



**Dave Harrington**  
**August 22, 1941 – September 27, 2018**  
**Clinical Engineer, Humanitarian, Mentor**  
**“Let’s get out there and make things work, we need to do better!”**



David Harrington and Sam Downing, set up a Philips bedside monitor in the emergency room.

In 1992, Dave travelled to Calcutta, India to assist local biomedics to install and repair equipment in a hospital for the city’s poor and neglected. He heard the venerable Mother Teresa speak an inspiring phrase to him that he has never forgotten: *“Helping others is the greatest thing a person can do with their life”*.

Inspired by Mother Teresa, Harrington and a team assembled by Assist International ventured to the heart of Transylvania to take part in a memorable install at a children’s hospital in Cluj, Romania.

*“We started on a Friday, worked some of Saturday, came back on Monday, and had the units up and running on Tuesday. We installed and wired a total of 18 monitors in that time frame while the units still had patients in them”,* said Harrington.

In 2005, Dave was the Robert L. Morris Humanitarian Award recipient for providing global humanitarian aid. Dave had established joint ventures and contracts between companies and medical schools and teaching hospitals. His knowledge in medical instrumentation allowed him to participate in upgrading intensive care units and operating rooms in Uganda, an emergency room and communication systems in Romania, nurseries in China to name a few noble contributions. *“His passion, and truly dynamic personality, touched the hearts of those that worked with him.”*, noted Izabella Gieras, former ACCE President.



Dave receiving the Robert Morris Humanitarian Award from Jennifer Ott, ACCE President in 2005.

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# Testimonials to Dave Harrington



Left to right: Dave with Manny Furst, Binseng Wang and Bryanne Patail in 2005

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## Testimonials from Dave's Clinical Engineering colleagues and friends:

**Manny Furst:** Dave was a pillar of our community, and his leadership was important to all of our success.

**Bryanne Patail:** My dear colleague, we have known each other since the 1970's. Dynamic pressure calibration of the Electrodyne PR 18 invasive blood pressure monitoring module was probably our first collaboration. "I appreciate and enjoy your contributions to ACCE News column titled 'From the Penalty Box' articles. My sincere and heartfelt condolences to your family."

**Binseng Wang:** I first met Dave in the late 1980s when I was working in Brazil and came to attend the AAMI meetings. At that time, there was always an international session where foreign visitors shared their challenges and successes with their North American colleagues and, together, we looked for potential solutions. These discussions eventually grew into the Advanced Clinical Engineering Workshops (ACEWs) organized by ACCE and Dave was one of the leaders of these endeavors.

I got to know Dave better after I immigrated to the US and had the privilege of working with him on a few projects. We collaborated on the first ACEW held in Washington DC and the second held in

Boston. Dave was particularly instrumental in the success of the second one being the local host. Subsequently, Dave and I joined a few other ACCE members to write the ACCE Donation Guidelines using his extensive experience in donating equipment to developing countries. These Guidelines were eventually incorporated into the World Health Organization's guidelines. I also had the privilege of serving with him on the ACCE Hall of Fame nominations review committee when it was first established.

I always admired Dave's energy and dedication to the profession. Even after he retired from work, he would continue to write columns for 24x7 magazine and ACCE Newsletter, always providing good advice to the younger professionals. In addition, he also had a nice smile and a great sense of humor when we met in person. I will miss him tremendously.

**Larry Fennigkoh:** Dave was not only a pioneer in the field of clinical engineering, he was also a feisty trailblazer who was always challenging and reminding us of how important we were to healthcare. He continued to remain very active through his blogs and editorials even after his retirement. My deepest and heartfelt condolences to the family as well.

**Tom Judd:** What a great man and friend! Not only to us, but the poor and oppressed around the world ... through his humanitarian work with the American Medical Resources Foundation (AMRF) and others.

**Ray Zambuto:** Dave was one of those for whom you can truly say, "They broke the mold." He was one of the pioneers of our industry, educating hundreds of young men and women at Franklin Institute, prior to his many years with us at Technology in Medicine. Always insightful, he could quickly cut to the chase in many



areas and was passionate about the profession. "The Penalty Box" is empty. We will miss you, Dave.

**Hank Stankiewicz:** Dave was a great mentor and colleague. He welcomed me to the Boston area in the early 80s and was always involved in Clinical Engineering in the Boston area, the USA and Planet Earth. He always was available to colleagues and I for advice and assistance. Our field and humanity are diminished by his passing.

**Tobey Clark:** We have lost a deeply caring humanitarian, a prolific writer of both professional educational materials and wise guidance through his commentary, a remarkable contributor to the field of medical engineering, and a man of insight and wit. After brief interactions with Dave in Boston in the 70's, I came to know him later as a leader in our field in New England and beyond, someone who liked to brighten up your day by sharing humor on his email listserv, and a hockey enthusiast – wish I could have gone to a Beanpot with him.

**George Johnston:** We were long time friendly acquaintances through our engineering society memberships and meetings. Attendance gave us opportunities to hoist a few beers together. And we both did our share of committee work.

**Ted Cohen, ACCE co-editor:** We will forever miss Dave's column, his acerbic wit, and the penalty box and hockey stick icon he used as metaphors for all things right and wrong with clinical engineering and health care. Henceforth, the ACCE News Penalty Box column and hockey stick icon are retired in Dave's honor.



# AAMI Update: Nominations Sought for Awards

## AAMI Opens Nominations for Annual Awards

Who are your outstanding peers in healthcare technology? Now's the time to give them a chance to shine in *the spoAt-light*.

Each year, AAMI recognizes leaders and innovators who are moving the healthcare technology industry forward. AAMI needs your help! Until Jan. 7, you can nominate yourself or other leaders in the industry for one of AAMI's annual awards.

Award winners will receive monetary prizes and a plaque commemorating their achievements. Winners will also be recognized in a celebration at the 2019 AAMI Exchange, the name for the reimagined AAMI annual conference, in Cleveland, OH, next June.

"Professionals working in healthcare technology have many different job titles and come from a variety of backgrounds, but all work to advance the safety and effectiveness of the field. Through our AAMI and AAMI Foundation awards program, we recognize those 'healthcare technology heroes' who are innovating, volunteering, and leading the way," said MaryJane Thomas, director of membership development at AAMI. "We encourage you to nominate all who are working to advance the profession."

There are several types of awards:

**AAMI Awards** recognize achievement in patient safety and healthcare technology management (HTM) leadership

**AAMI & Becton Dickinson's Patient Safety Award** recognizes outstanding achievements by healthcare professionals who have made a significant advancement toward the improvement of patient safety.

**AAMI's HTM Leadership Award** recognizes individual excellence, achievement, and leadership in the HTM profession.

**AAMI & GE Healthcare's BMET of the Year Award** recognizes a BMET's individual dedi-

cation, achievement, and excellence in the field of HTM.

**AAMI's Young Professional Award** is presented annually to a professional, under the age of 35, who exhibits exemplary professional accomplishments and a commitment to the healthcare profession.

**The Spirit of AAMI Award** recognizes the outstanding contributions of an AAMI member in volunteer efforts within the association.

**AAMI's HTM Association of the Year Award** recognizes an HTM association that distinguishes itself during the course of the year through outstanding society operations and meetings as well as a commitment to elevating the HTM profession at the local level.

**AAMI Foundation Awards** recognize an individual or group for a unique or significant contribution to the advancement of healthcare technology and systems, service, patient care, or patient safety; humanitarian efforts to improve global human conditions with healthcare technology; or applied clinical engineering practices or principles to solve patient care problems or challenges.

**The AAMI Foundation's Laufman-Greatbatch Award** is AAMI's most prestigious award. Named after two pioneers in the field—Harold Laufman, MD and Wilson Greatbatch, PhD—this highly regarded award honors an individual or group that has made a unique and significant contribution to the advancement of healthcare technology and systems, service, patient care, or patient safety.

**The AAMI Foundation & ACCE's Robert L. Morris Humanitarian Award** honoring the late humanitarian Robert Morris—recognizes individuals or organizations whose humanitarian efforts have applied healthcare technology to improving global human conditions.

**The AAMI Foundation & Institute for Technology in Health Care Clinical Solution Award** honors a healthcare technology professional (individual or group) that has

applied innovative clinical engineering practices or principles to solve one or more significant clinical patient care problems or challenges facing a patient population, community, or group.

**Standards Awards** honor major contribution(s) to the development or revision of a standard and to a technical committee.

**Standards Developer Award** awards major contribution(s) to the development or revision of a specific standard.

**AAMI Technical Committee Award** recognizes an AAMI technical committee's outstanding efforts.

For more information about the AAMI Awards program or to submit a nomination, visit [www.aami.org/awards](http://www.aami.org/awards).

## I am HTM

AAMI is celebrating the work of healthcare technology management professionals in its months-long #IamHTM campaign.

With photos and quotes, AAMI features one professional every week on its social media platforms.

Alyssa Merkle, a biomedical engineering manager at Brigham and Women's Hospital in Boston with Aramark Healthcare was recently featured. "We are the problem solvers," said Merkle. "Every day is a new challenge. I love thinking through ways to fix these issues with my team."

Show your pride in the profession by sharing these posts and using #IamHTM in your social media posts.

## Alarm Management Resource

The AAMI Foundation has published a new resource to help healthcare facilities effectively manage pulse oximetry alarms.

The *SpO<sub>2</sub> Alarm Management Toolkit* was written for an organization's alarm management team, including clinical engineers, respiratory care management, risk special-

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Improve healthcare delivery outcomes by promoting the development,  
application and support of safe and effective healthcare technologies.

## Military Health System Research Symposium

I recently had the chance to attend the Military Health System Research Symposium in Kissimmee Florida. (BTW, it is really hot in August in Florida, just saying!) The MHSRS is a gathering of the best and brightest who come together to drive forward the care of our warriors. Included are researchers, academicians, medics of all type, and physicians, many fresh from deployment. I would like to share some observations:

These men and women who give so freely of their time, skills, and lives humble me. Their willingness to put others first and to care so deeply for those that come under their care is awe inspiring. One burn surgeon was a firefighter on 9/11 who turned her life around after that day, joined the army, became a burn surgeon and who labors tirelessly to improve the care of both their warriors and the civilians who are too often caught by the conflicts. Her lectures on lessons learned and care in austere environments were amazing and brings an occasional wait for care in an ED or doctor's office into perspective. As someone who occasionally works to help design medical products, these lessons stay with me and drive me to do better.

A large focus of this meeting is on prevention of injury. The numbers of musculoskeletal injuries that sideline soldiers, complicate missions and end careers is enormous. The attempt to understand the how and why of these injuries, the role of conditioning, equipment, and weight among other issues are helping to prevent further injuries and keeping soldiers safe. I was a volunteer firefighter for 24 years and watched as the fire service became less injury prone as equipment, training and task planning was modified to protect the firefighter. This same effort continues across the military, and it is having positive results. The work

may not be as glamorous, but is very important.

Hemorrhage control and treatment continues to be a focus. The focus has shifted from controlling bleeding extremities with tourniquets and clotting agents to trying to control bleeding in junctional locations where you cannot apply a tourniquet or direct pressure. Some amazing devices have been developed and are now being seen in civilian settings with lives saved that previously would have died. New blood products that have been used in other countries are now approved for use in the US and more are coming. The goal continues to be to save the lives of everyone who is savable.

As an aside, the DHS (Department of Homeland Security) has a program for civilians.

**Stop the Bleed** provides training, similar

to CPR, to help save trauma lives in the same way that CPR has saved cardiac patients. As you travel through airports and other areas, look for the trauma kits that are on the wall near AEDs. Find where Stop the Bleed training is being offered and sign up for a class.

As I have written before, autonomous care is advancing rapidly. Whether in a combat setting, a disaster response or a trip to Mars, there will be needs for medical and surgical intervention where/when there are no or limited services available. The types of systems under development include many decision support (e.g., guidance systems); integrated closed loop care systems (ventilators tied to devices that measure oxygen in the blood, and blood pressure control systems); and full system closed loop systems that would link ventilation to BP

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## Healthcare Technology Foundation News

### HTF Board Member Recognized

Ronda Bradley is being awarded the Post/sub-acute Therapist of the year by the American Association of Respiratory Care (AARC). This award will be acknowledged at the AARC International Congress in Las Vegas on Dec 4-7<sup>th</sup>. The accomplishments announcement will mention her advisory board role with HTF.

### HTF Future Projects

Have a great idea to share? Please let us know if you have any suggestions on projects for HTF that will

meet our mission:

Be sure to visit the HTF website, [www.thehtf.org](http://www.thehtf.org) to see our programs and resources. While you are there, feel free to hit the **DONATE NOW** button. We will accept them anytime and they are always tax deductible!

*Paul Coss, RN, President, HTF*  
[president@thehtf.org](mailto:president@thehtf.org)

*Jennifer C. Ott, MSBME, CCE, FACCE,*  
*Secretary, HTF*  
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# President continued

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## Health Technology Alliance (sponsored by ACCE, AAMI & HIMSS)

The CE-IT community has grown into the Health Technology Alliance (HTA), increasing the reach to clinical engineering (CE), healthcare technology management (HTM), healthcare information technology (HIT) and healthcare informatics professionals to collaborate for the promotion of healthcare quality, safety, efficacy, and efficiency through better uses of technology.

ACCE encourages our members to get involved and join this community.

HTA welcomes interested professionals to join our community and become a member of HTA. As members they will receive invitations to education and networking, resources and information related to our industry. HTA will regularly conduct a call for volunteers to share their ideas, best practices, or to participate on a workgroup. If you have a specialty, niche, or topic of interest that you would like to engage further with HTA, contact and join HTA.

## 2018 ACCE BOK Survey

The BOK survey closed recently and we received over 500 responses. Thanks to everyone who participated. The results from this survey will come out in November/December issue and will be used by the US and Canadian Board of Examiners for Certification in Clinical Engineering in updating the CCE exam.

## ACCE Goals for 2018/19

The goals established for this year are:

- Promote and increase ACCE membership
- Promote certification in Clinical Engineering

- Enhance educational opportunities for Clinical Engineers. Develop closer ties with academic educational programs (Clinical Engineering and BMET/Technology Associate Degree programs).
- Move forward with Strategic Planning
- Develop closer relations with affiliated groups - e.g., AAMI, HIMSS, ASHE, AIMBE
- Increase international outreach of ACCE
- Increase community outreach and promoting the profession
- Restart ACCE CE-IT Symposiums at HIMSS.

I am asking the membership to come forward with their thoughts and support to move forward with these goals.

Until next time.

*Arif Subhan, President, ACCE*

[president@accenet.org](mailto:president@accenet.org)

## ACCE Job Website Job Postings

For posting job opportunities, please contact Dave Smith at

[advertising@accenet.org](mailto:advertising@accenet.org)

# AAMI continued

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ists, and nurses. It provides resources and strategies to mitigate nonactionable (clinically insignificant) SpO<sub>2</sub> alarm signals.

“This is not a discussion about what type of monitoring is better (surveillance, continuous or intermittent), but instead explains why alarms occur, the type and context, and how organizations can best utilize the technology they have to safely reduce pulse oximetry alarms,” reads the introduction.

A complimentary copy of the toolkit is available at [www.aami.org/SPO2\\_ToolKit](http://www.aami.org/SPO2_ToolKit)

*AAMI Staff*

## ACCE News

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

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Global Conference & Exhibition  
**FEB 11-15, 2019 | ORLANDO**

# Join ACCE at HIMSS19



MEMBER DISCOUNT AVAILABLE

## ACCE is an official Collaborator of HIMSS19

*As such, ACCE Members receive the members discount to attend! To receive the discount, go to the [conference website](#) and select "Register Now". Select ACCE from the "Conference Collaborating Organizations" drop down in the registration process, and enter the code "COLLABH19"*

**Registration**  
**Schedule -at-a-glance**  
**Book your hotel**

### **Health Technology Alliance/ACCE Awards Reception**

Date: Tuesday, February 12, 2019; 6:00 PM– 8:00 PM EST

Location: TBA

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

**Special Thanks to our Sponsor** 

### **HIMSS19 Awards Gala**

Date: Wednesday, February 13, 2019, 6:30 PM - 9:00 PM

Location: TBA

Additional Registration Required: Individual Tickets: \$ 180

The HIMSS awards Gala is a time for celebration & recognizing members who have added their unique sparkle and verve to the industry. Come toast their accomplishments at this year's elegant event.

**Join Arif Subhan, ACCE President in congratulating the 2019 ACCE/HIMSS Excellence in Clinical Engineering and Information Technology Synergies Award recipient**

**Stay tuned for more ACCE events!**

# Perspectives from ECRI Institute: Health Devices Achievement Award



Before I begin my ECRI Perspectives commentary, I would like to express my deep sadness about the loss of Dave Harrington. Dave passed away in September 2018 after a long and distinguished career in clinical engineering. He was a constant and long-time contributor to our newsletter. I have had the pleasure of serving as the managing editor of our newsletter for many years now and I am pretty sure that Dave's column has been in every issue since I started. I found his articles to be witty, smart, and full of wisdom. And he did not pull any punches. Dave was very good at making suggestions, sometimes in an irreverent way, for how we could improve our profession or how the overall healthcare system could improve. Thank you very much for your many contributions to our profession Dave. You will be missed! Clinical engineering and our newsletter will not be the same without you.

On October 1, 2018, ECRI Institute launched its 12th annual list of Top Ten Health Technology Hazards. ECRI Institute's Health Devices Group produces the annual list to identify the potential sources of danger that it believes warrant the greatest attention for the coming year and to offer practical recommendations for reducing the risks. Over the years, ECRI's list has gotten to be quite well known. I have been in an ECRI Institute international business development role for the past couple of years. I have had the pleasure of speaking with clinical engineers and other healthcare professionals in many different parts of the world who have found the list to be a valuable resource and are using it to help improve patient safety in their institutions.

ECRI's list does not necessarily focus on the most frequently reported problems or the ones associated with the most severe consequences. Although we do consider these elements, we rather focus our judgment on which risks should receive attention now. All the items on our list represent problems that can be avoided or risks that can be minimized through the careful

management of technologies. For each topic, we describe the problem and provide practical recommendations for action. We also point to sources of additional information or guidance. In this way, the list serves as a "solutions kit" that healthcare facilities can use to prioritize their patient safety efforts. While not all of the hazards will apply at all healthcare facilities, the list can provide a starting point for patient safety discussions.

To qualify for the list, topics must focus on what we call generic hazards—problems that result from the risks inherent to the use of certain types or combinations of medical technologies. Risks and problems that pertain to specific models or suppliers aren't considered. Topics that end up on our list fit one or more of the following factors:

**Severity.** Is the hazard likely to cause serious injury or death?

**Frequency.** How likely is the hazard? Does it occur often?

**Breadth.** If the hazard occurs, are the consequences likely to spread to affect a great number of people, either within one facility or across many facilities?

**Insidiousness.** Is the problem difficult to recognize? Could it lead to a cascade of downstream errors before it is identified or corrected?

**Profile.** Is the hazard likely to receive significant publicity? Has it been reported in the media, and is an affected hospital likely to receive negative attention? Has the hazard become a focus of regulatory bodies or accrediting agencies?

**Preventability.** Can actions be taken now to prevent the problem or at least minimize the risks? Would raising awareness of the hazard help reduce future occurrences?

The number one hazard for ECRI's new 2019 list is "Hackers Can Exploit Remote Access to Systems, Disrupting Healthcare Operations". It is a subset of one of the hottest topics in our clinical engineering profession. The full Top Ten Hazard article is available for members of ECRI's SELECTplus, Health Devices Gold, and Health Devices System membership programs. Members can access the report at the following link:

[https://www.ecri.org/components/HDJournal/Pages/2019\\_Top\\_10\\_hazards.aspx](https://www.ecri.org/components/HDJournal/Pages/2019_Top_10_hazards.aspx)

ECRI also published a publically available executive summary version of the Top Ten list at the following link: <https://www.ecri.org/Pages/Top-Ten-Tech-Hazards.aspx>

ECRI would be very interested in hearing your feedback on our new list. Do you agree with the topics? Do you have other risks that you think we should have included? We would also like to know if you are taking any specific steps at your institution to address the serious patient safety concerns highlighted on our list. Feel free to contact me at the email address below if you have any input or Top Ten-related initiatives that you would like to share.

*Jim Keller, MS, FACCE  
Vice President, International Market Development, ECRI Institute and Past President, ACCE  
jkeller@ecri.org*



# IFMBE CED Update

The IFMBE Clinical Engineering Division (CED), the global Federation of Clinical Engineers, had their annual meeting during the World Congress (IUPESM) in Prague, Czech Republic in June 2018, see <http://www.iupesm2018.org/>. CED facilitated over 100 Clinical Engineering presentations with contributors from 30 countries.

## Awards

Two CED board members were award winners in Prague:

Dr. Saide Calil, Brazil, Honorary Life Member of IFMBE, see <http://2016.ifmbe.org/announcements/awards/> and

Dr. Jim Wear, USA, IFMBE CED Award (CED's highest honor), <http://cedglobal.org/awards/>

## New Board

New CED board members for 2018-2021 were elected, <http://cedglobal.org/organization-and-teams/>, with Tom Judd selected as the incoming Board Chair.

An overarching objective for 2018-2021 is to connect with others (national, regional, global entities outside of CE), and one hundred global colleagues (with various initiatives for recognition, capacity building and

professional exchange) led by the CED Board and a growing number of collaborators. And CED involvement growing to 200 countries, from the current 150.



Left to right, Saide Calil, Yadin David, James Wear

The new Board has now approved 12 global Clinical Engineering (CE) projects, see below, and invites interested CE volunteers to join us. Contact us at [ifmbe.ced.secretariat@gmail.com](mailto:ifmbe.ced.secretariat@gmail.com).

## Global CE Day

CED is focusing on the coming international event, Global CE Day, that will be inaugurated on October 21 from China, <http://global.icehtmc.com>. Countries from all regions of the world will collaboratively celebrate the contributions of Clinical Engineers' role in improving healthcare delivery systems. CED is very thankful for ACCE's robust involvement each year since 2015.

## Global CE Journal

A new Open Access Global Clinical Engineering Journal ([www.GlobalCE.org](http://www.GlobalCE.org)) focuses on the facilitation of scientific exchange, knowledge sharing, and dis-

semination of best practices related to technology creation and management in healthcare. You are invited to submit your work and become a reviewer by going to the website and logging in.

## 4th Global Forum on Medical Devices

IFMBE CED has led previous World Health Organization Medical Device Forums. Join us in India for the 4th Global Forum, 13-15 December 2018, see [http://www.who.int/medical\\_devices/global\\_forum/4th\\_gfmd/en/](http://www.who.int/medical_devices/global_forum/4th_gfmd/en/).

Tom Judd, IFMBE CED Board Chair  
[judd.tom@gmail.com](mailto:judd.tom@gmail.com)

	Project Topic	Project Category	Leader(s)
1	External recognition (Outward facing)	Recognition	Yadin David
2	External professional relationships	Recognition	Leandro Pecchia
3	Internal communications/Social media	Recognition	Tom Judd
4	Education/Training	Global Capacity Building	Mladen Poluta, Almir Badnjevic
5	Credentialing	Global Capacity Building	Jim Wear
6	Center for Excellence	Global Capacity Building	Saide Calil
7	Biannual Congresses (ICEHTMCs(ICE))	Professional Exchange	Stefano Bergamasco
8	WHO (eg 4GFMD), Events & Affiliations	Professional Exchange	Paolo Lago
9	Global CE Journal / Publications	Professional Exchange	Yadin David
10	HT Regulation	Professional Exchange	Peter Grainger, Fabiola Martinez
11	Medical Devices and location in low-resource settings	Professional Exchange	Leandro Pecchia
12	CE Driven innovation	Professional Exchange	Mario Castaneda, Tom Judd

# Call for 2019 ACCE Award Nominations

Starting October 22, and through December 8, please consider submitting nominations for ACCE awards in the following categories::

**ACCE Challenge Award:** Non-members of ACCE are eligible to be nominated for this award, provided they meet the criteria for membership. A single individual will be selected based on his/her achievements in the field of medical technology within the CE field, for example, an individual who has contributed to the design of a "safe" environment or has shown significant activities in technology management and assessment.

## **ACCE Tom O'Dea Advocacy**

**Award:** A single individual will be selected for this award, based on published articles, presentation given, and efforts led which have advanced the field of CE – especially in promoting the profession to people in other related fields.

## **ACCE/HTF Marv Shepherd Patient**

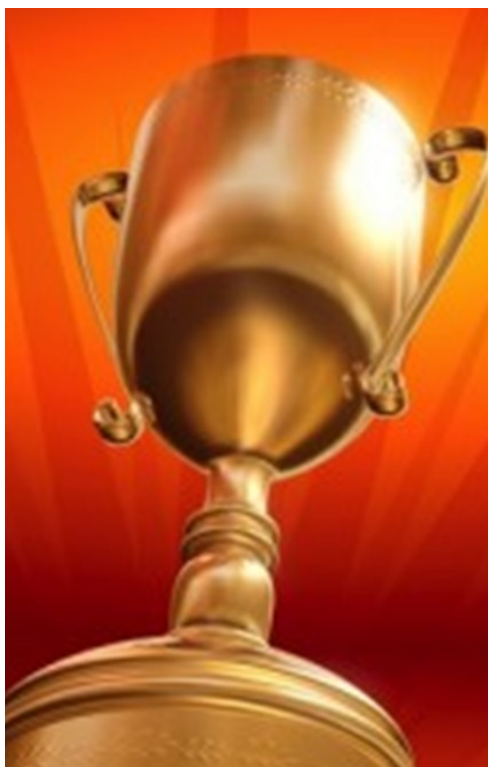
**Safety Award:** This joint award from ACCE and the Healthcare Technology Foundation (HTF) will be bestowed on a single individual who has excelled in the "safety" area related to the CE field. Potential awardees could be a national investigator of accidents, an inventor of a safety device, or an author of books on medical device hazards, etc.

## **ACCE Lifetime Achievement**

**Award:** This award is the highest award given by ACCE. It is presented annually to a single individual based on lifelong accomplishments and contributions to the clinical engineering (CE) profession.

## **ACCE Professional Achievement in Technology Award:**

A single awardee will be selected for his/her contributions to the CE profession. These contributions must be of a professional or technical nature, such as research or development of a new technique or product, a paper of significance on a technical issue, or "trailblazing" work in a new application of clinical engineering.



# ACCE 2019 Awards, Call for Nominations

**Deadline: December  
8, 2018**

**Note: Late submissions  
will not be considered**

[2018 awardees](#)

[Previous awardees](#)

## **ACCE Professional Achievement in Management Award:**

Nominees for this award will be evaluated on their contributions to the CE profession of a managerial nature, such as a paper of significance, solving of a problem or issue for the profession, or the application of new techniques to CE with measurable positive results. Only a single awardee will be selected.

## **ACCE Antonio Hernandez International Clinical Engineering Award:**

This award will be presented to one CE professional from a country in which CE is an emerging field in recognition of that person's extraordinary contributions to the advancement of CE in his/her own country or, to one professional from another country for his/her extraordinary efforts in supporting this advance.

## **ACCE/HTF International Organization Award:**

This Award is given to the organization outside the United States and Canada that has demonstrated significant improvements in clinical engineering/health technology management (CE/HTM) structure and/or outcomes in their respective country after receiving educational and collaborative support from ACCE and its partners (including WHO, IFMBE, PAHO, and others). This award is sponsored by the Healthcare Technology

Foundation.

## **ACCE CE-HTM Champion Award:**

This Award will be bestowed on a single individual - a health delivery system leader. Typically, a physician - who has championed CE and Health Technology Management (HTM) in a manner that has significantly heightened the status of the CE/HTM profession in the U.S. and/or around the world.

## **Awards Presentation:**

Awards will be presented at the 2019 HIMSS Annual Conference being held on February 12, 2019 in Orlando, FL and at the AAMI Exchange being held on June 8, 2019 in Cleveland, OH.

## **Nomination Procedure:**

In order to nominate an individual or organization, please complete [this nomination form](#) and submit it along with supporting material to [awards@accenet.org](mailto:awards@accenet.org). Self-nominations are not accepted. Contact the awards committee at [awards@accenet.org](mailto:awards@accenet.org) if you do not receive an e-mail confirming receipt of your nomination. The deadline for receipt of all nomination material is December 8, 2018.

Late submissions will not be considered.

# Education Committee: CCE Prep Series

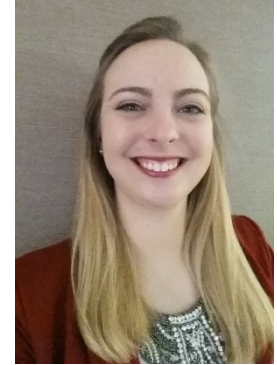
The Education Committee and ACCE would like to thank our 2018 CCE Review Webinar Faculty, Dr. Matt Baretich, Mr. Tobey Clark, Mr. Ted Cohen and Mr. Frank Painter. This group takes time out of their busy schedules to teach this 10-hours webinar series and aid individuals studying for their Certification in Clinical Engineering exam.

Thank you also to Samantha Herold and Joseph Ouellette, ACCE members who volunteer to host and moderate the series. This is their second year doing this and ACCE is very thankful for all of their work and efforts.

And a special Thank You! to the series sponsor, Phoenix Data Systems, and their AIMS CMMS.



Joseph Ouellette



Samantha Herold

**We all wish the best of luck to all the CCE test takers for the 2018 CCE written exam in November!**



## American Institute For Medical and Biological Engineering (AIMBE) Scholars Program

### Opportunities for Students and Trainees

As Student/Candidates members of ACCE, you are entitled to the following benefits.

The AIMBE FDA Scholars Program is seeking distinguished post docs to participate in a 1-year appointment at the FDA. AIMBE has a wonderful partnership with academia, industry, and the Centers for Devices and Radiological Health at FDA. I'll be looking for your recommendations for your trainees to participate in this highly competitive program.

The goals of the AIMBE Scholars Program are to:

- Advance regulatory science at the FDA in order to improve the quality and efficiency of regulations governing the medical device sector, and lower the cost of regulation
- Strengthen the connections between bioengineering and the scientific enterprise, industry, and the regulatory processes that governs the medical device sector
- Train rising leaders in the field to learn first hand about the regulatory process that encompass the medical device total product life cycle

Applications are due by December 5, 2018 for the 2019-2020 program year. (Only U.S. citizens are eligible at this time.)

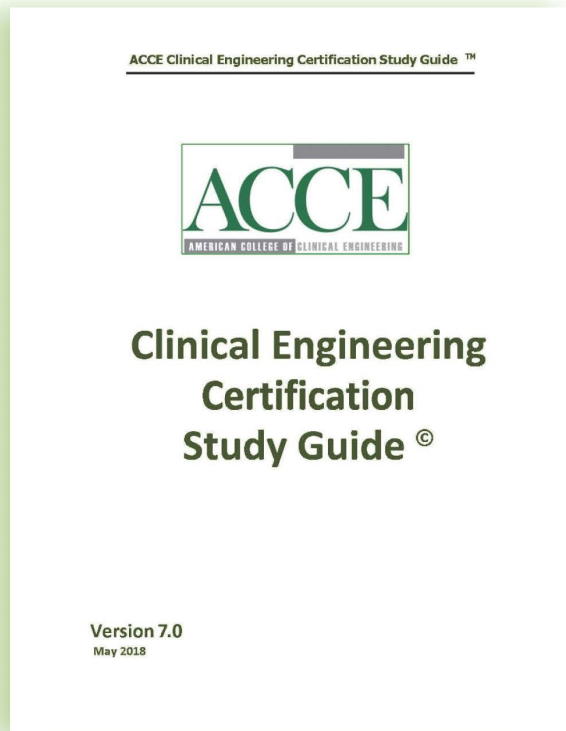
[Click here](#) for more information.





# Prepare for your CCE Exam

The American College of Clinical Engineering is offering a Study Guide V7.0 for the Clinical Engineering Certification Examination. The Study Guide is available in pdf format only.



Scan the QR code to order your copy online.

Price: US\$ 75.00/members

US\$ 100.00/non members

Note: V7.0 provides 33 revised sections of previous version.

The 2018 Computerized written examination for HTCC Certification in Clinical Engineering will be available from November 3, 2018 thru November 17, 2018.

## Become a Mentor, Volunteer!

If you are interested in serving as a mentor, please complete the ACCE mentor form: [http://accenet.org/Membership/Downloads/ACCE%20Mentor%20Form\\_f.pdf](http://accenet.org/Membership/Downloads/ACCE%20Mentor%20Form_f.pdf) or contact

Gerald Goodman.

*Gerald Goodman, DrPh, CCE  
Mentoring Committee Chair  
[mentoring\\_chair@accenet.org](mailto:mentoring_chair@accenet.org)*





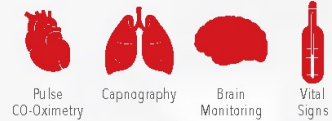
# The Root® of Connected Care

Patient Monitoring and Connectivity Platform

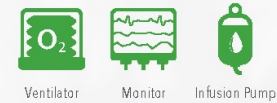


For more information, visit  
[masimo.com/root](http://masimo.com/root)

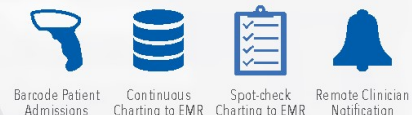
### Connect to the Patient



### Connect to Third-party Devices



### Connect to Electronic Medical Records



**Caution:** Federal (USA) law restricts this device to sale by or on the order of a physician. See instructions for use for full prescribing information, including indications, contraindications, warnings, and precautions.

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# AIMS

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# Welcome New Members

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

Name	Class	Job Title	Organization	Country
Denisa Lambert	Individual	Vice President Quality & Regulatory Compliance	TRIMEDX, LLC	IN/USA
Inhel Rekik	Individual	Director of Health Technology Security	MedStar Health	MD/USA
Bianca Wyman	Individual	Graduate Student/Clinical Engineering Intern	UCONN/Middlesex Hospital	MA/USA
Rebecca Graves	Candidate/Student	Graduate Student/Clinical Engineering Intern	UCONN/VA Greater Los Angeles	CA/USA
Katherine Bushway	Candidate/Student	Graduate Student/Clinical Engineering Intern	UCONN/Baystate Health Systems	MA/USA
Cooper Schwabe	Candidate/Student	Graduate Student/Clinical Engineering Intern	UCONN/Hartford Healthcare	CT/USA
Avery Newsom	Candidate/Student	TCF Biomedical Engineer	VA Greater Los Angeles	CA/USA
Nadia Elkaissi	Institutional/Associate	Biomedical Engineer	VA Pittsburgh Healthcare System	PA/USA
Gabriella Orteza	Institutional/Individual	Biomedical Engineer	San Francisco VA Health Care System	CA/USA

And welcome to our newest  
Corporate Member, Crothall Healthcare



## Military Research Symposium continued

*(Continued from page 5)*

control to fluid replacement, temperature regulation, and sedation. Combined with self-driving helicopters, and such, there are major changes coming our way.

Whether for good or bad, war has always resulted in major changes and improvements to health care. From Florence Nightingale and the Crimean war, care of the wounded warrior

has driven improvements in care of the civilian population. We benefit from these changes without really knowing where and why they appeared.

Lastly, I am impressed by how many of these incredible caregivers work in civilian settings. They are being trained by the current generation of caregivers and in turn are training the next generation. The next time you visit a

surgeon or an ED, ask if any of their people are military. If they did serve ask them about their experiences and thank them for their service.

Stay safe, be careful and enjoy the start of fall, finally!

*Paul Coss, RN, President, HTF*  
[president@thehtf.org](mailto:president@thehtf.org)

# Volunteer at the IHE NA Connectathon 2019

## Gain Unparalleled Health IT Standards Experience

### Calling all Health IT Standards Professionals!

IHE USA recruits volunteer monitors to review and evaluate interoperability tests completed by participants at the IHE NA Connectathon. Monitors gain exposure to the latest standards, cutting-edge technology, and the engineers developing health IT interoperability. IHE USA's unique, practical learning environment provides the experience you need to advance your career.

### Join the Team for 2019!

IHE USA's monitor program is a highly competitive and respected program that is vital to both a volunteer monitor's professional development and the health IT industry as a whole. Interested in applying? **Applications are now open through October 19, 2018.**



### Benefits of Volunteering at the IHE Connectathon:

- Work directly with 550+ software engineers from the industry's top vendors
  - Gain deeper understanding about IHE Profiles and test tools
  - Get hands-on experience with emerging technologies
  - Learn through meaningful collaboration with vendors, government organizations, and HIEs
- Receive travel, accommodations, and a per diem for participation (Note: IHE USA will not support international travel outside the U.S. and Canada)

**Apply Today!**

For more information on the Monitor Program, [click here](#).

For more information on the IHE North American Connectathon 2019, [click here](#).

## THE MEDICAL DEVICE & IoT ...SUMMIT...

Overcoming Challenges,  
Transforming Care  
and Enhancing Privacy  
and Security

December 3-4, 2018  
Boston, MA

### The Medical Device & IoT Summit, Boston

ACCE is an official supporter. *ACCE members: Use discount code ACCE100 to receive \$100 discount on the registration fee.*

In the last few years, the medical device connectivity focus has shifted from clinical documentation of medical device data into the patient's chart, to capturing and consuming device data in a myriad of ways including: Digital health applications like remote patient monitoring and chronic disease management; clinical decision support systems; and extending embedded systems devices to provide remote surveillance, alert and alarm notification.

The Medical Device and IoT Summit explores all of these issues and more to provide actionable information for device manufacturers, software developers, provider organizations and investors.

The Internet of Medical Things (IoMT) has gone patient-centric, with providers and payers looking to aggregate device data across acute care and ambulatory settings. Acute care medical device data feeds care plans, which feed discharge plans. Ambulatory device data feeds efforts to avoid readmissions and better manage chronic diseases. Medical device data from both acute care and ambulatory settings feed clinical decision support systems for population health, patient engagement and other digital health applications.

For more information, [click here](#)

To register [click here](#)

## 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 \$296). You must [login](#) to the ACCE website to view the code. Then visit [LWW.com](#) to enter code.



### ACCE Calendar

#### October 11, 2018

ACCE Webinar: FDA Update on Service Regulation

[Registration](#)

#### October 19, 2018

Deadline to submit Volunteer application to IHE NA Connectathon

[Application](#)

#### October 21, 2018

Clinical Engineering Day

[Post your success stories here](#)

#### November 3 –17, 2018

CCE written exam

#### November 8, 2018

ACCE Webinar: Implementing a Program to Share User Experience Data for Medical Devices

[Registration](#)

#### December 4-5, 2018

Medical Device & IoT Summit

[Details](#)

#### December 13, 2018

ACCE Webinar: Project Management - Best Practices in Clinical Settings

[Registration](#)

#### January 21-25, 2019

IHE NA Connectathon 2019

Cleveland Ohio

[Details](#)

# ACCE

AMERICAN COLLEGE OF CLINICAL ENGINEERING

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