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Management of Medical Equipment Inspection Checklist- Final

Name of the Facility:		-	
Date of Inspection:	/	/	

Ref.	Description	Yes	No	N/A	Remarks
5	STANDARD ONE: HEALTH FACILITIES DOCUMENTE	D PROGRA	AM/PLAN	I FOR ME	DICAL
	EQUIPMENT				
	Health facilities shall provide internal policies and				
	procedures for all stages of equipment lifecycle				
	management (new medical equipment acquisition,				
5.2.	installation, condemnation, breakdown maintenance,				
	preventive maintenance, inventory, tagging and				
	tracking, risk management and recalls) to align with				
	DHA requirements listed in this document.				
STANDARD TWO: NEW MEDICAL EQUIPMENT ARRIVES TO THE FACILITY (PU					CHASED/
6	6 NONFACILITY EQUIPMENT)				
	All medical equipment in the health facilities should be				
6.1.	registered in Ministry of Health and Prevention				
	(MOHAP).				
	For new purchase, all installation documents should be				
	available with supply chain document to ensure the				
6.3.	safety of the supply chain and therefore, protecting				
0.3.	patients and staff from unstable, contaminated,				
	defective, and counterfeit supplies. Documents include				
	but are not limited to:				
6.3.1.	Purchase order.				
6.3.2.	Country of origin.				
6.3.3.	Installation report				

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6.3.4.	PPM schedule.				
6.3.5.	Warranty certificate.				
6.3.7.	Delivery note.				
	All medical equipment (purchased, demonstration,				
6.5	loaned etc.) should be tested as applicable for safety				
6.5.	(electrical safety test, mechanical, radiation etc.), QC				
	and calibration is done upon installation.				
	Availability of operating manual accessible by clinical				
6.6.	staff of the department and service manuals should be				
	available for all inhouse service equipment.				
6.8.	To eliminate the use of extension cords				
6.9.	For non-Facility medical equipment				
6.9.	(DEMO/LOANED/PATIENT PROPERTY):				
6.9.1.	Should be tagged with DEMO/LOANED/PATIENT				
0.9.1.	PROPERTY stickers.				
	A file containing all non-facility equipment details and				
	checklist shall be checked and verified by Biomedical				
6.9.2.	Engineering, insuring they are properly checked and				
	are safe for all patients, staff, and visitors, prior to use				
	in the health facility.				
	For the radiology equipment with radiation, the facility				
6.10.	must ensure that they have the required credentials				
5.25.	and licenses from FANR for all equipment producing				
	radiation and falling in the scope of FANR licensing.				
7	STANDARD THREE: MEDICAL EQUIPMENT INVENTO	DRY MANA	AGEMENT	•	
	Maintaining proper inventory through inventory				
7.1.	system for all the medical equipment available and to				
	be updated every time a new equipment arrives or				
	removed from service				
	Critical equipment is identified in the inventory, there				
7.2.	is provision for back-up/ alternative for critical				
	equipment during their failure or maintenance.				

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7.2	All medical equipment should be labelled and tagged			
7.3.	with biomedical asset number.			
	All details of medical equipment (manufacturer/			
7.6	model/ serial number/ local supplier/ date of			
7.4.	7.4. purchase and location at the facility) should be			
	available.			
8	STANDARD FOUR: CORRECTIVE MAINTENANCE			
0.2	Availability of biomedical workshop and biomedical			
8.3.	engineer is mandatory at general hospitals.			

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