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Interventional Cardiology Services Inspection Checklist- Random

Name of the Facility:	
Date of Inspection:/	/

Ref.	Description	Yes	No	N/A	Remarks	
5	STANDARD ONE: HEALTH FACILITY LICENSURE					
5.2.3	Be accredited by an internationally recognised accreditor for					
3.2.3	Interventional Cardiology Services.					
	Install and operate equipment required for Interventional					
5.2.4	Cardiology Services (Appendix 1) in accordance with the					
	manufacturer's specifications and requirements.					
	Drug-eluting stents, covered stents, intracoronary ultrasound					
Ь	and distal protection and intracoronary pressure measurements					
	should be readily available for certain patients.					
5.2.6	Provide documented evidence for the following services:					
а	Ambulance service.					
b	Clinical laboratory service.					
С	Equipment maintenance service.					
d	Laundry service.					
	Medical waste management as per Dubai Municipality (DM)					
е	requirements.					
f	Housekeeping services.					
5.2.7	Have in place a contract for elective and emergency patient					
5.2.7	transfer to a higher facility to manage complex cases.					
5.2.8	Maintain a Charter of patients' rights and responsibilities at the					
5.2.6	entrance and reception in two languages (Arabic and English).					
	Where volume exceeds 500 procedures per year per cath lab,					
а	the facility should agree with at least one nearby facility with a					

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	cath lab for elective referral to ensure continuity of the service			
	in the case of breakdown or for effective management of			
	emergency cases.			
	Ensure surgical backup with a cardiac surgeon to accommodate			
5.2.12	emergency bypass surgery due to life-threatening anatomy or			
	suboptimal PCI results.			
5.2.13	Intra aortic balloon pump should be readily available.			
5.2.14	Intravascular ultrasound should be readily available.			
	Flow measurements by wire technology, instruments for			
5.2.15	intracoronary pressure and physiological measurement system			
	should be readily available.			
5.2.17	Maintain adequate adjunctive medication, such as IIb/IIIa			
5.2.17	inhibitors, must be readily available.			
	Ensure adequate lighting and utilities, including temperature			
5.2.19	controls, water taps, medical gases, sinks and drains, lighting,			
	electrical outlets and communications.			
6	STANDARD TWO: HEALTHCARE PROFESSIONAL REQUIREME	NTS		
	All healthcare professionals providing Interventional Cardiology			
6.1	services must hold a valid DHA professional license for			
0.1	Interventional Cardiology and work within their scope of			
	practice.			
6.2	Interventional Cardiology services shall be Specialist or			
0.2				
	Consultant-led with a minimum of five years of experience.			
6.2	Minimum staffing requirements dedicated to an Interventional			
6.3				
	Minimum staffing requirements dedicated to an Interventional			
6.3.1	Minimum staffing requirements dedicated to an Interventional Cardiology Unit shall include the following:			
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	Minimum staffing requirements dedicated to an Interventional Cardiology Unit shall include the following: Two full-time Specialists or Consultant Interventional cardiologists for 24/7 coverage.			
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6.3.1 a 6.3.2	Minimum staffing requirements dedicated to an Interventional Cardiology Unit shall include the following: Two full-time Specialists or Consultant Interventional cardiologists for 24/7 coverage. For Pediatric cases, a Consultant pediatric interventional cardiologist shall be appointed.			
6.3.1	Minimum staffing requirements dedicated to an Interventional Cardiology Unit shall include the following: Two full-time Specialists or Consultant Interventional cardiologists for 24/7 coverage. For Pediatric cases, a Consultant pediatric interventional cardiologist shall be appointed. Two full-time registered Nurses trained in IC procedures.			

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	One Diamedical Engineer or a contract with a contified		
	One Biomedical Engineer or a contract with a certified		
6.3.5	maintenance company to ensure safety and efficiency of		
	equipment used.		
6.3.6	Access to an on-site full-time Anesthesist to manage		
0.0.0	emergency cases.		
6.3.7	Access to an on-site full-time Cardiac Surgeon to manage		
0.5.7	emergency cases.		
	Evidence of procedures shall be maintained and documented in		
Ь	the physician logbook.		
8	STANDARD FOUR: EMERGENCY MANAGEMENT		
8.2	A fully stocked and up to date crash cart shall be in place as per		
0.2	DHA Regulations for hospitals.		
	Appropriate pharmaceutical agents, oxygen, oral suction,		
8.3	laryngoscope, ambu-bag and defibrillator shall be readily		
	available in the health facility.		
	Physicians shall have a valid Advanced Cardiac Life Support		
	(ACLS) and Pediatric Advanced Life Support (PALS)		
8.5	certification where pediatric patients are treated, and Neonatal		
	Resuscitation Program (NRP) whenever Neonatal patients are		
	managed.		
8.6	RNs and Cardiovascular Technologists or Cardiovascular		
0.0	Technician shall have a valid Basic Life Support (BLS).		
9	STANDARD FIVE: EQUIPMENT USE AND MAINTENANCE		
	All equipment and instrumentation should be routinely		
9.2	inspected for safety, and proper functionality and records of the		
	inspections should be maintained in a file.		
0.7	All repairs and maintenance should be documented for quality		
9.7	control and Audit.		
	Control and Addit.		

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