

Pacific Biomedical Network Meeting



Medical equipment donation policy

The background of the slide features abstract, overlapping geometric shapes in various shades of green, ranging from light lime to dark forest green. These shapes are primarily located on the right side of the slide, creating a modern, layered effect. The text is centered on the left side of the slide against a plain white background.

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Challenges

WHAT ARE THE CHALLENGES FACED BY YOUR BIOMEDICAL SERVICES RELATING TO YOUR SPECIFIC TOPIC?

- **MEDICAL EQUIPMENT DONATIONS ARE FRAGMENTED**
 - This leads to confusion, duplication of effort, and recipients getting unwanted or incompatible medical equipment. Imagine having to operate and maintain 6 different models of Portable Xray, where each model has a different user interface. Maintaining a mishmash of equipment is nearly impossible for resource-strapped healthcare providers.
1. Medical equipment like pulse oximeters, ECG monitors, IV Pumps, Vital sign Monitors and oxygen concentrators are essential for diagnosing and treating patients. Sadly, the majority of this lifesaving medical equipment sits and unused.
 2. We have a lot of Medical equipment donated to MOH both Majuro and Ebeye hospital. Portable Xray (different brand), Ventilator (Different Brand), Suction, and Oxygen Concentrator Etc.
 3. No Technical training provided to Biomedical Engineering dept.

▶ **DONATED MEDICAL EQUIPMENT IS EITHER BROKEN OR INAPPROPRIATE**

1. Donated medical equipment can be new, but often it's used and its condition can vary widely - from almost new to end-of-its-lifespan. Second-hand equipment is sent without testing to check if it works and without consideration of power requirements. The equipment may be missing the user manuals, adapters or consumables necessary to operate it. Recipients don't know about the equipment's condition until they receive it: Then, if they don't have the resources to pay for returning it, repairing it or disposing of it, they are stuck with it. The equipment either sits unused in the hospital or gets discarded in landfills.

▶ **DONORS KNOW LITTLE ABOUT THE IMPACT OF THEIR MEDICAL EQUIPMENT DONATIONS**

1. Donated medical equipment is usually not tracked after it leaves donors, so they have no idea about their donation's impact on the recipient. Sometimes the donated equipment can sit in a warehouse for years and never make it to the End-User.
2. Although these donations are generally made with good intentions, the outcomes are not always positive if the donations are not properly planned and coordinated.

Opportunities & Development

- ▶ *WHAT ARE SOME OF THE OPPORTUNITIES AND DEVELOPMENTS THAT HAVE PROGRESSED IN YOUR BIOMED UNIT WITH REGARDS TO YOUR SPECIFIC TOPIC?*
 1. *I was able to informed them about how important to consider the criteria for evaluating Medical Equipment Donations.*
 2. *All donated medical equipment shall be coordinated to Biomed Office before the planned donation.*

▶ 3 MAIN RECOMMENDATIONS FOR YOUR COUNTRY **(PRIORITY AREAS)**

- 1. Provide us a certificate of calibrations if medical equipments are used or Pre-owned.**
- 2. Medical Equipment must have a life span of more than 5 years or Brand New. Not Obsolete.**
- 3. Must provide Technical training to End user of the medical equipment.**

► Kommol Tata