

APPLICATION

NYU Langone Health

PURPOSE

- To establish guidelines for the safe use of cellular and wireless technology

POLICY

1.0 Application

For the purpose of this policy, NYU Langone Health (NYULH) refers to the NYU Langone Health System, NYU Langone Hospitals, NYU School of Medicine, NYU Long Island School of Medicine, the Family Health Centers at NYU Langone, and all entities controlled by them, except NYU Winthrop Hospital.

NYU Winthrop Hospital maintains a comparable policy, Cellular Telephone Use.

This policy applies to:

- All indoor and outdoor areas of all NYULH owned and leased facilities
- All employees, contractors, and consultants of NYULH
- All patients, visitors, and guests of NYULLH

2.0 Policy

2.1 **Cellular phone** usage is permitted in *all* areas of the NYULH with the following caution:

- Users shall connect to Wi-Fi provided by NYULH
- Users shall maintain a distance of at least 1 meter from medical equipment as recommended by ECRI, *when practical*, while using a mobile communication device
- Users shall avoid placing communication devices on top of, or in direct contact with, any medical device
- Users shall be cognizant of patient privacy and to avoid distraction or unnecessary noise while using mobile devices.
- Staff shall monitor energized medical devices, and report all incidents involving EMI interference of medical devices to Clinical Engineering promptly for evaluation. See Appendix A for Supplemental Educational Materials.

- 2.2 Air waves are unprotected and conversations may be intercepted by other telephones. Staff will refrain from disclosing protected health information during cellular phone conversations to protect patient confidentiality.
- 2.3 **Two-way Radios** may be used *in the receive mode only* in all patient care areas.
- 2.4 **Emergency Use of Two-Way Radios**
- Whenever maintenance staff, security officers, EMS personnel, Life Flight employees, or other personnel with two-way radios are in a patient care unit and an emergency occurs which requires the use of their radio, they should make their best effort to adhere to the following guidelines, listed in preferred order:
 - Leave the patient care unit to use the two-way radio. (This minimizes interference created by RF devices, as the distance between the RF device and the affected equipment is increased.)
 - Keep the two-way radio at least ten (10) feet away from any energized medical device.
 - If output levels are adjustable, use the lowest setting possible that facilitates acceptable communications.
 - If any equipment in the vicinity of the radio user should malfunction while the radio is in use, terminate use of the radio immediately. Any further use should be from the visitor waiting area or a non-patient care unit.
- 2.5 **Tablets, Laptops and Notebooks** must undergo ad-hoc testing against the major medical equipment to ensure that they do not cause any interference.
- 2.6 **Special Cases**
- **Implanted Devices:** Patients and staff with implanted devices such as pacemakers and defibrillators, must exercise caution when carrying and using wireless devices. Recommended procedures, as delineated by the medical device manufacturer, must be followed.
 - **Emergency Vehicles:** Operators of emergency vehicles, which transport patients with sensitive medical devices, and their supervisors, must be cognizant of the fact that two-way radios, beepers, and cell phones can cause electromagnetic interference at close range. Medical devices used in these applications must be carefully selected.
- 2.8 Exceptions to this policy must be approved by the Clinical Safety Committee.
- 2.9 Any questions pertaining to this policy should be directed to Clinical Engineering.

3.0 Incident Reporting

- 3.1 Report any suspected incidents of medical device electromagnetic interference to Clinical Engineering. Clinical Engineering shall investigate each incident, develop recommendations, and report findings to the Patient Safety Officer, Risk Management, the Clinical Safety Committee and/or the Environment of Care (EOC) Committee or Sub-committee as appropriate.
- 3.2 Document patient injuries in Patient Safety Intelligence (PSI). See Administrative Policy for Patient Safety/Adverse Event Reporting Policy and Reporting & Follow-up of Adverse Events/Occurrences (Incident Reporting), available on Ellucid.
- 3.3 Contact Clinical Engineering for any questions about the applicability of using and enforcing the use of wireless devices.

4.0 Responsibilities

4.1 **Supply Chain** is responsible for:

- Incorporating language in future bid requests and contracts to require manufacturers to certify the electromagnetic compatibility of the requested medical device(s) as defined by international EMC standards.

For example, NFPA 99, Standards for Health Care Facilities, paragraph 9-2.1.6.4, states, “All appliances shall be designed so that they are capable of operating in a radio frequency electromagnetic environment where limits are established by IEC 60601-1-2”. The Center for Devices and Radiological Health (CDRH), a division of the FDA, in cooperation with the Association for the Advancement of Medical Instrumentation (AAMI) has also developed guidance standards for medical device manufacturers seeking pre-market approval.

4.2 **Clinical Engineering** is responsible for:

- Reviewing technical publications and standards for trends and updates relating to this issue and communicating noteworthy advances to the NYU Langone Hospitals Clinical Safety Committee.
- Investigating medical device malfunctions and reporting findings to the Patient Safety Officer, Risk Management, the Clinical Safety Committee and/or the Environment of Care (EOC) Committee as appropriate

4.5 **Mobile device users** are responsible for:

- Complying with this policy.
- Contacting Clinical Engineering if they suspect that the function of a medical device has been affected by an EMI generating device.

Appendix A	Supplemental Educational Material Considerations for Working with Cell Phones in Operating Rooms
Issue date	11/2019
Replaces	4/2017
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Summary of Revision

Revision date	Section	Changes
October 2019	1.0	Incorporates Winthrop and NYU Long Island School of Medicine
	2.0	Adds references to NYULH Wi-Fi, and to ECRI recommendations
	Reviewed by	Adds review by NYU Winthrop Hospital
December 2017	Throughout	Updates logo and organizational references
	2.0	Clarifies cell phone usage precautions
March 2017	Application	Changes NYUHC to NYU Langone
	1.0	Becomes Application Defines NYU Langone
	2.0	Removes Rationale for Policy Becomes Policy
	3.0	Becomes Incident Reporting
	4.0	Becomes Responsibilities
	Review by	Adds Review by Lutheran Safety Officer, Lutheran Nursing, and HJD, Lutheran, and Lutheran Family Health Centers EOC Committees

- The undisciplined use of cellular devices in the OR—whether for telephone, e-mail, or data communication, and whether by the surgeon or by other members of the surgical team—may pose a distraction and may compromise patient care.
- Surgeons should be considerate of the duties of personnel in the OR suite and refrain from engaging them unnecessarily in activities, including assistance in cellular communication, that might divert attention from the patient or the conduct of the procedure.
- Cellular phones must not interfere with patient monitoring devices or with other technologies required for patient care.
- Whenever possible, members of the OR team, including the operating surgeon, should only engage in urgent or emergent outside communication during surgery. Personal and routine calls should be minimized. Calls should be kept as brief as possible.
- Whenever possible, incoming calls should be forwarded to the OR desk or to the hardwired telephone in the OR to minimize the potential distraction of cellular phones.
- The ring tone should be silenced. An inaudible signal may be employed.
- Whenever possible, a distinct signal for urgent or emergent calls should be enabled. This signal may be implemented via a “page” option in most cellular telephones. Callers should be advised to use this function only for urgent and emergent calls if the phone is unanswered.
- The use of cellular devices or their accessories (such as earphones or keyboards) must not compromise the integrity of the sterile field.
- Special care should be taken to avoid sensitive communication within the hearing of awake or sedated patients.
- Communication using hardwired phones in the operating room is subject to the same discipline as communication using cellular technology.
- The use of cellular devices to take and transmit photographs shall be governed by hospital policy on photography of patients and by government regulations pertaining to patient privacy and confidentiality.