IEC 60601-2-1

Edition 3.0 2009-10

INTERNATIONAL STANDARD

NORME INTERNATIONALE

Medical electrical equipment –
Part 2-1: Particular requirements for the basic safety and essential performance of electron accelerators in the range 1 MeV to 50 MeV

Appareils électromédicaux –
Partie 2-1: Exigences particulières de sécurité de base et de performances essentielles pour les accélérateurs d'électrons dans la gamme de 1 MeV à 50 MeV

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INTERNATIONAL ELECTROTECHNICAL COMMISSION

MEDICAL ELECTRICAL EQUIPMENT –

Part 2-1: Particular requirements for the basic safety and essential performance of electron accelerators in the range 1 MeV to 50 MeV

FOREWORD

1) The International Electrotechnical Commission (IEC) is a worldwide organization for standardization comprising all national electrotechnical committees (IEC National Committees). The object of IEC is to promote international co-operation on all questions concerning standardization in the electrical and electronic fields. To this end and in addition to other activities, IEC publishes International Standards, Technical Specifications, Technical Reports, Publicly Available Specifications (PAS) and Guides (hereafter referred to as "IEC Publication(s)"). Their preparation is entrusted to technical committees; any IEC National Committee interested in the subject dealt with may participate in this preparatory work. International, governmental and non-governmental organizations liaising with the IEC also participate in this preparation. IEC collaborates closely with the International Organization for Standardization (ISO) in accordance with conditions determined by agreement between the two organizations.
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International Standard IEC 60601-2-1 has been prepared by IEC subcommittee 62C: Equipment for radiotherapy, nuclear medicine and radiation dosimetry, of IEC technical committee 62: Electrical equipment in medical practice.

This third edition cancels and replaces the second edition published in 1998 and its Amendment 1 (2002). It constitutes a technical revision.

This third edition addresses the following issues not covered in previous editions:

– alignment with the new relevant collateral standards;
– new technologies in radiotherapy, including:
  • stereotactic radiosurgery (SRS) and stereotactic radiotherapy (SRT);
  • intensity modulated radiotherapy (IMRT);
  • electronic imaging devices (e.g. EPID);
  • moving beam radiotherapy (dynamic therapy).

The text of this particular standard is based on the following documents:

FDIS	Report on voting
62C/474/FDIS	62C/480/RVD

Full information on the voting for the approval of this particular standard can be found in the report on voting indicated in the above table.

This publication has been drafted in accordance with the ISO/IEC Directives, Part 2.

In this standard, the following print types are used:

– Requirements and definitions: roman type.
– *Test specifications: italic type.*
– Informative material appearing outside of tables, such as notes, examples and references: in smaller type. Normative text of tables is also in a smaller type.
– TERMS DEFINED IN CLAUSE 3 OF THE GENERAL STANDARD, IN THIS PARTICULAR STANDARD OR AS NOTED: SMALL CAPITALS.

In referring to the structure of this standard, the term

– “clause” means one of the seventeen numbered divisions within the table of contents, inclusive of all subdivisions (e.g. Clause 7 includes subclauses 7.1, 7.2, etc.);
– “subclause” means a numbered subdivision of a clause (e.g. 7.1, 7.2 and 7.2.1 are all subclauses of Clause 7).

References to clauses within this standard are preceded by the term “Clause” followed by the clause number. References to subclauses within this particular standard are by number only.

In this standard, the conjunctive “or” is used as an “inclusive or” so a statement is true if any combination of the conditions is true.

The verbal forms used in this standard conform to usage described in Annex H of the ISO/IEC Directives, Part 2. For the purposes of this standard, the auxiliary verb:

– “shall” means that compliance with a requirement or a test is mandatory for compliance with this standard;

– “should” means that compliance with a requirement or a test is recommended but is not mandatory for compliance with this standard;

– “may” is used to describe a permissible way to achieve compliance with a requirement or test.

A list of all parts of the IEC 60601 series, published under the general title: *Medical electrical equipment* can be found on the IEC website.

The committee has decided that the contents of this publication will remain unchanged until the maintenance result date indicated on the IEC web site under "http://webstore.iec.ch" in the data related to the specific publication. At this date, the publication will be

- reconfirmed,
- withdrawn,
- replaced by a revised edition, or
- amended.

INTRODUCTION

The use of ELECTRON ACCELERATORS for RADIOTHERAPY purposes may expose PATIENTS to danger if the ME EQUIPMENT fails to deliver the required dose to the PATIENT, or if the ME EQUIPMENT design does not satisfy standards of electrical and mechanical safety. The ME EQUIPMENT may also cause danger to persons in the vicinity if the ME EQUIPMENT itself fails to contain the RADIATION adequately and/or if there are inadequacies in the design of the TREATMENT ROOM.

This particular standard establishes requirements to be complied with by MANUFACTURERS in the design and construction of ELECTRON ACCELERATORS for use in RADIOTHERAPY; it does not attempt to define their optimum performance requirements. Its purpose is to identify those features of design that are regarded, at the present time, as essential for the safe operation of such ME EQUIPMENT. It places limits on the degradation of ME EQUIPMENT performance beyond which it can be presumed that a fault condition exists and where an INTERLOCK then operates to prevent continued operation of the ME EQUIPMENT.

Clause 201.10 contains limits beyond which INTERLOCKS prevent, INTERRUPT or TERMINATE IRRADIATION in order to insure ESSENTIAL PERFORMANCE is maintained to avoid an unsafe condition. TYPE TESTS that are performed by the MANUFACTURER, and/or SITE TESTS, which are not necessarily performed by the MANUFACTURER, are SPECIFIED for each requirement. It is understood that SITE TESTS may or may not be required of the MANUFACTURER, per the agreement between the MANUFACTURER and end user.

Given that before installation a MANUFACTURER cannot provide SITE TEST data, data available from SITE TESTS should be incorporated in the ACCOMPANYING DOCUMENTS, in the form of a SITE TEST report, by those who test the ME EQUIPMENT at installation.

This International Standard was first published in 1981. It was amended in 1984 and 1990. A second edition was published in 1998 and amended in 2002. This third edition is prompted by the need to align this particular standard with the third edition of the general standard, IEC 60601-1:2005.

IEC 60976 and IEC/TR 60977 are closely related to this standard. The former specifies test methods and reporting formats for performance tests of ELECTRON ACCELERATORS for use in RADIOTHERAPY, with the aim of providing uniform methods for conducting such tests. The latter is not a standard per se, but suggests performance values, measured per the methods specified in IEC 60976, that could be achievable with present technology.