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Quality of dialysis fluid for haemodialysis and related therapies

*Qualité des fluides de dialyse pour hémodialyse et thérapies
apparentées*



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Foreword

ISO (the International Organization for Standardization) is a worldwide federation of national standards bodies (ISO member bodies). The work of preparing International Standards is normally carried out through ISO technical committees. Each member body interested in a subject for which a technical committee has been established has the right to be represented on that committee. International organizations, governmental and non-governmental, in liaison with ISO, also take part in the work. ISO collaborates closely with the International Electrotechnical Commission (IEC) on all matters of electrotechnical standardization.

International Standards are drafted in accordance with the rules given in the ISO/IEC Directives, Part 2.

The main task of technical committees is to prepare International Standards. Draft International Standards adopted by the technical committees are circulated to the member bodies for voting. Publication as an International Standard requires approval by at least 75 % of the member bodies casting a vote.

Attention is drawn to the possibility that some of the elements of this document may be the subject of patent rights. ISO shall not be held responsible for identifying any or all such patent rights.

ISO 11663 was prepared by Technical Committee ISO/TC 150, *Implants for surgery*, Subcommittee SC 2, *Cardiovascular implants and extracorporeal systems*.

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Introduction

Haemodialysis patients are directly exposed to large volumes of dialysis fluid, with the dialyser membrane being the only barrier against transfer of hazardous contaminants from the dialysis fluid to the patient. It has long been known that there could be hazardous contaminants in the water and concentrates used to prepare the dialysis fluid. To minimize this hazard, ISO 13958 and ISO 13959 set forth quality requirements for the water and concentrates used to prepare dialysis fluid. However, if the dialysis fluid is not prepared carefully, it could contain unacceptable levels of contaminants even though it is prepared from water and concentrates meeting the requirements of ISO 13958 and ISO 13959. Further, the dialysis fluid might be used as the starting material for the online preparation of fluids intended for infusion into the patient, for example, in therapies such as online haemodiafiltration. For these reasons, this International Standard for dialysis fluid quality was developed to complement the existing standards for water and concentrates, ISO 13959 and ISO 13958, respectively. Guidelines to aid the user in routinely meeting the requirements of this International Standard and ISO 13959 can be found in ISO 23500 [1].

This International Standard reflects the conscientious efforts of healthcare professionals, patients and medical device manufacturers to develop recommendations for the quality of dialysis fluid. This International Standard is directed at the healthcare professionals involved in the management of dialysis facilities and the routine care of patients treated in dialysis facilities, since they are responsible for the final preparation of dialysis fluid. The recommendations contained in this document are not intended for regulatory application.

The requirements of this International Standard aim to help protect haemodialysis patients from adverse effects arising from known chemical and microbiological contaminants that can be found in improperly prepared dialysis fluid. However, the physician in charge of dialysis has the ultimate responsibility for ensuring that the dialysis fluid is correctly formulated and meets the requirements of all applicable quality standards.

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

- “shall” means that compliance with a requirement or a test is mandatory for compliance with this International Standard;
- “should” means that compliance with a requirement or a test is recommended but is not mandatory for compliance with this International Standard; and
- “may” is used to describe a permissible way to achieve compliance with a requirement or test.

The concepts incorporated in this International Standard should not be considered inflexible or static. The recommendations presented here should be reviewed periodically in order to assimilate increased understanding of the role of dialysis fluid purity in patient outcomes and technological developments.