

**HEALTH TECHNOLOGY DISPOSAL PROGRAM**
QUEENSLAND HEALTHEmail: HT-Disposals-CWB@health.qld.gov.au**Photos Included**

Item Number:	10329886
Type of Equipment:	GreenLight XPS Laser
Collection Location:	Mackay Base Hospital
Make & Model:	AMS
Year of Acquisition:	2014
Serial Number:	XPS50922
Is the equipment in working condition?	Yes
Describe the condition of the equipment:	Good condition
Accessories:	Camera lens adaptor, 3x Safety Goggles,
Are manuals/instructions available?	
When the equipment was last serviced or tested?	May 2023
Are service records available?	Yes
Does the equipment require de-installation?	No
Is the equipment presently in use?	No
On what date can the equipment be collected from the facility?	ASAP after payment (within 2 weeks of payment)

This information is provided by the Health Technology Disposal Program to the best of their knowledge. An onus is on the buyer to confirm these details prior to purchase.

PHOTO'S BELOW



Greenlight laser
XPS

Section 1:

Device Description

FiberLife will also stop laser emission if the laser is accidentally fired while inside the cystoscope. Generally, this will prevent serious damage to the cystoscope. However, some discoloration of the metal may still occur which could increase the possibility of corrosion.

Coagulation

A feature new with GreenLight XPS is pulsed coagulation. In this mode, activated when the coag footswitch is pressed, laser emission is pulsed at a rate of ~12Hz with a duty cycle of ~25%. This mode improves the coagulative effect when compared to the continuous emissions typically used by other lasers.

Console Specifications

Laser Type	Solid State, Frequency Doubled
Wavelength	532 nm
Maximum Power output at 532 nm	Limited by fiber delivery device, maximum 180W
Nominal Optical Hazard Distance (NOHD)	33.9 meters (MPE = 1×10^{-3} W/cm ²)
Repetition rate	Vaporization: Quasi-CW (15kHz - 25kHz) Coagulation: Modulated at 12Hz, 25% duty cycle
Maximum Aiming Beam power	5mW
Output Beam Divergence	Perpendicular to fiber: 0.5±0.1, Parallel to fiber: 0.25±0.1 radians full angle at half maximum with the 10-2090 fiber in air
Electrical Requirements	200-240 VAC @ 60 Hz or 50 Hz, 20 A, Single phase
Operating Temperature	50° F - 85° F (10° C - 30° C)
Storage/Transport Temperature	50° F - 104° F (10° C - 40° C)
Humidity	10% - 90%, non-condensing

0010-0240 Rev. C

2



Section 1:

Device Description

Dimensions	Width: less than 22 inches (56 cm) Depth: less than 36 inches (91 cm) Height: less than 58 inches (147 cm)
Weight	Less than 475 pounds (215 kg)

Section 1:

Device Description

Rear View of Laser System

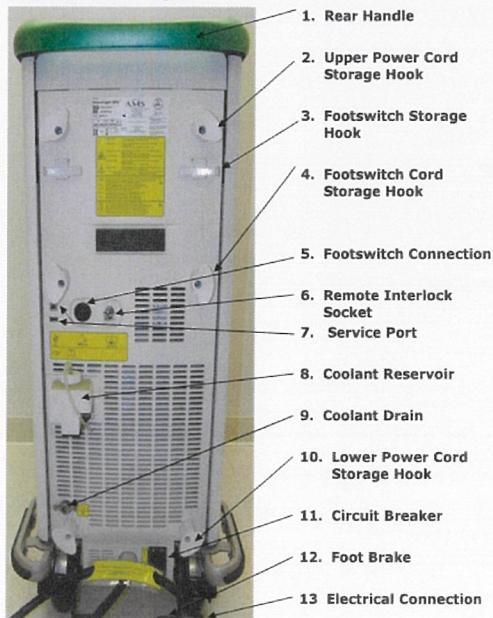
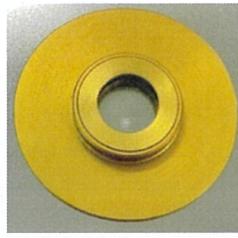


Figure 1-2 Rear View of Laser System

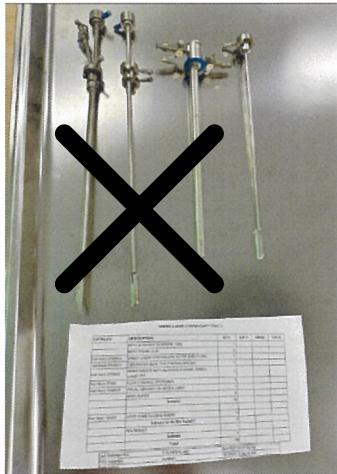
Foot pedal



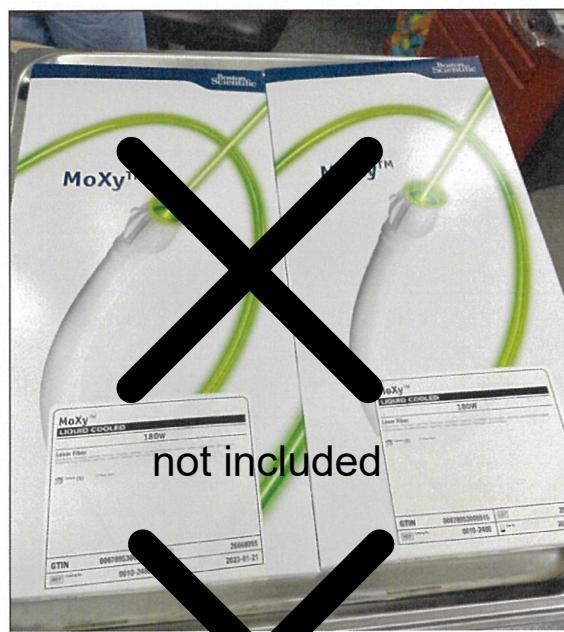
3 Phase Plug



Camera lens adaptor

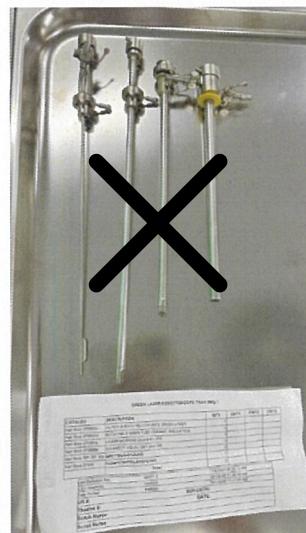


Greenlight resectoscopy set with visual obturator.



not included

Use Moxy Laser Fibres.



Assessment Report

Standard for non-ionising radiation apparatus—medical or cosmetic procedures, or related practices (2021)

Radiation Safety Act 1999 - Form 80: Version 1

Possession Licensee Mackay Base Hospital

Client ID _____ Licence No. _____

Details of Laser Apparatus

NIR Apparatus ID L33408

NIR Apparatus Details AMS XPS, 50022 (manufacturer model serial no.)

Address where assessment was undertaken.

THEATRES, MACKAY BASE HOSPITAL, 475 BRIDGE ROAD, 4740

Results of Assessment

Compliance Test	Outcome	Compliance Test	Outcome
Test 1: Protective housing	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> n/a	Test 8: Aperture indication	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> n/a
Test 2: Access panels	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> n/a	Test 9: Aperture warning label	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> n/a
Test 3: Override mechanisms	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> n/a	Test 10: Viewing optics	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> n/a
Test 4: Labels for access panels	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> n/a	Test 11: Radiation warning label	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> n/a
Test 5: Remote interlock connector	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> n/a	Test 12: Explanatory label	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> n/a
Test 6: Key control	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> n/a	Test 13: Radiation output	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> n/a
Test 7: Radiation warning device	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> n/a	Test 14: Emergency stop	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> n/a

Requirements (what needs to be done for the laser apparatus to comply with the standard)

Comments

First Assessment

The laser apparatus complies with the standard - certificate of compliance to be issued

Signature of Accredited Person

Unique ID: A00078181

Date: 30/05/2022
(of assessment)

Name: PAUL WHITEHOUSE

Accreditation certificate number: A00078181

Greenlight 26W Resectoscope set with visual obturator.



1). Honeywell: 190-532 UV, Argon, 532nm 13 AKP

2). Diopika: 450-532nm OD 7+ 190-449nm OD 7+

3). Orange green light laser safety goggles:
OD4+190nm-550nm wavelength Laser safety Glasses
for typical 405nm,445nm,450nm,520nm,532nm Laser
OD4+190nm-550nm wavelength Laser safety Glasses
for typical 405nm,445nm,450nm,520nm,532nm Laser
light for eye protection goggles



3 x KTP greenlight laser alert signs for doors

Biomedical Technology Services

Queensland Health



Radiation Safety Act 1999 – Form 60 (QIS3641V1)

AIMS information
Tag: 10329886
WO#: 5119967

Certificate of Compliance Standard for non-ionising radiation apparatus–medical or cosmetic procedures, or related practices (2021)

I certify that the following laser apparatus complies with the *Standard for non-ionising radiation apparatus – medical or cosmetic procedures, or related practices (2021)*

NIR Apparatus ID: L33408

Apparatus details: American Medical Systems Greenlight XPS, SN - XPS550922
(manufacturer, model, serial no.)

Accreditation certificate number: A006402817

Certified by: Gene Jackson

Name of accredited person

Date certified: 18/05/2023

Next assessment due before: 18/05/2024

Conditions/Comments:

No user selectable pulse duration to test.

For certification advice contact Biomedical Technology Services on 1300 400 261



Advancing science for life™

XPS Greenlight ProntoForm Rev D

CHECKLIST INFORMATION

Case Information

Account	MACKAY BASE HOSPITAL – MACKAY, Queensland – 78777
Serial Number	XPS50922-GREENLIGHT XPS 200-240V US
Work Order Number	WO-00512602

SAFETY EVALUATION – ENGLISH

Safety Evaluation

Reference:	Complete 92628471 Rev B, CE AMS MEE Safety Evaluation Checklist, per WI 92046056 CE WI Greenlight HPS-XPS Safety Evaluation
	Electrical Safety Evaluation according to IEC 62353 & STK MPBetreiberV
Mains connection type:	Non-Detachable Power cord
Applied part type:	BF
Class of protection	Class I

Section 1: Visual Inspection

Mains, Power Cords, Strain Reliefs (Defects, wear)	Pass
Filters (Dust Filters Inspected)	Pass
Accessories (Defects, wear)	Pass
Integrity of Housing / Enclosure & mechanical parts	Pass
Safety related marking and Labeling verified	Pass

Section 2: Electrical Safety Testing

Mains Voltage (Measured result in volts):	237
Protective Earth Resistance (< 300mΩ):	140
	Pass
Touch Current, Normal condition (Limit ≤ 100 µA)	4
	Pass
Touch Current, SFC: Open Earth (Limit ≤ 500 µA)	4
	Pass

STOP! Complete functional test checklist then return to complete Safety Evaluation checklist

Section 3: Safety related Functional Tests

Functional test as per document # 91166342 or 91166341 Pass

Section 4: Overall assessment

Overall Assessment Pass

Safety Evaluation sticker with next recommended date applied Yes
on the product

PM / FUNCTIONAL – ENGLISH

PM / Functional Test

Reference Complete 91166342 Rev AF – CE Greenlight XPS Preventive Maintenance Data Sheet, per 91166332 CE WI, GreenLight XPS Preventative Maintenance, Repair Procedure

Part 1 of 5 – Log Files

Step 1.1: Save Log Files – Prior to beginning Preventive Maintenance
(In Service Screens, click “Install” tab, then click “Save System Config.”) Yes
Pass

Part 2 of 5 – Preventive Maintenance Tasks

Step 2.1 – 2.2: Power Verification at 120 Watt setting (119 – 136 Watts)	127.4 Pass
Step 2.3: Drain water from the system	Yes
Step 2.4: Replace the De-Ionizing Filter	Yes
Step 2.5: Replace the Particle Filter	Yes
Step 2.6: Replace the Desiccant Pack	Yes
Step 2.7: Replace Disposable Air Filter, or clean Metal Filter and Heat Exchanger	Yes
Step 2.8: Fill system with DI, Sterile or Distilled Water	Yes

Part 3 of 5 – Functional Tests

Step 3.1: Water Flow Rate Sticker Value (L/min)	2.1
Step 3.1: Water Flow Rate Measured Flow (L/min) (± 0.05 L/min)	2.1 Pass
Step 3.2 – 3.3: RF Energy Sticker Value in Watts	65
Step 3.2 – 3.3: RF Energy Recorded Value in Watts (65 Watts (-2 to +0 Watts))	65 Pass
Step 3.4 – 3.5: Record pre-calibration power verification (Vapor – using yellow foot pedal) for 80 Watt setting. (78–91 Watts)	84.8 Pass
Step 3.4 – 3.5: Record pre-calibration power verification (Vapor – using yellow foot pedal) for 120 Watt setting. (119–136 Watts)	124.1 Pass

Step 3.4 – 3.5: Record pre-calibration power verification (Vapor – using yellow foot pedal) for 180 Watt setting. (179–198 Watts)	182.5 Pass
Step 3.6 – 3.7: Record pre-calibration power verification (Coag – using blue foot pedal) for 20 Watt setting. (19–23 Watts)	20.7 Pass
Step 3.6 – 3.7: Record pre-calibration power verification (Coag – using blue foot pedal) for 30 Watt setting. (29–35 Watts)	29.9 Pass
Step 3.6 – 3.7: Record pre-calibration power verification (Coag – using blue foot pedal) for 40 Watt setting. (36–46 Watts)	40.1 Pass
Step 3.4: Can calibration be bypassed?	Not required, but will be calibrated
Step 3.4 – 3.5: Record post-calibration power verification (Vapor – using yellow foot pedal) for 80 Watt setting. (78–91 Watts)	87.4 Pass
Step 3.4 – 3.5: Record post-calibration power verification (Vapor – using yellow foot pedal) for 120 Watt setting. (119–136 Watts)	127.4 Pass
Step 3.4 – 3.5: Record post-calibration power verification (Vapor – using yellow foot pedal) for 180 Watt setting. (179–198 Watts)	184.2 Pass
Step 3.6 – 3.7: Record post-calibration power verification (Coag – using blue foot pedal) for 20 Watt setting. (19–23 Watts)	21.9 Pass
Step 3.6 – 3.7: Record post-calibration power verification (Coag – using blue foot pedal) for 30 Watt setting. (29–35 Watts)	31.2 Pass
Step 3.6 – 3.7: Record post-calibration power verification (Coag – using blue foot pedal) for 40 Watt setting. (36–46 Watts)	41.4 Pass
Step 3.8: When Emergency Off Button is pressed, does "emergency off" message appear?	Yes Pass
Step 3.9: When Remote Interlock is removed, does "Remote Interlock Open" message appear?	Yes Pass
Step 3.10: With no fiber attached, is system unable to go into Ready Mode?	Yes Pass
Step 3.11: With no Fiber attached, does the "Attach a device" message appear?	Yes Pass
Step 3.13: Check for water leaks	Yes Pass
Step 3.13: Check for loose/broken cables	Yes
Step 3.14: Check Footswitch cable and locking ring for damage, wear or exposed wires	Yes Pass
Step 3.15: Check Fiber Port Pins for corrosion	Yes Pass
Step 3.16: Check Top Cover for physical damage, cosmetic damage, loose hardware and display cable integrity	Yes Pass

Part 4 of 5 – Log Files

Step 4.1 – 4.3: Save Log Files	Yes Pass

Part 5 of 5 – Final Checks

Step 5.1: Turn system off, close panels, start system in Customer Mode and verify that no errors occur	Yes Pass
Step 5.2 – 5.3: Final Checks: Power on Meter (120 Watt setting in customer mode (119–136 Watts))	127.4 Pass
Step 5.2 – 5.3: Final Checks: Current in Amps (at 120 W setting in customer mode):	67.6
Step 5.2 – 5.3: Final Checks: Aim beam at 100% using Service Fiber (3.5 – 5.6 mW):	5.46 Pass
Step 5.2 – 5.3: System Information: System Run Time:	294:03
Step 5.2 – 5.3: System Information: System Lasing Time:	20:45
Step 5.2 – 5.3: System Information: System Lasing Energy	8707
Step 5.2 – 5.3: System Information: Parameter 206:	79
Step 5.2 – 5.3: System Information: SW version	02.04.1100

CHECKLIST CLOSING – ENGLISH

Checklist Closing

System Status	Service Complete
Work Order Assigned Technician	Paul Whitehouse
Completed by Username:	paul.whitehouse@bsci.com
Date of Service	Sep 29, 2022

Service Report

Account Name
 MACKAY BASE HOSPITAL
 BRIDGE ROAD
 MACKAY
 QLD
 4740
 Australia

Order Information
Work Order Number: WO-00512602
Work Order Type: Preventive Maintenance

Technical Assistance Center
 Boston Scientific Australia and New Zealand Building 1, Level 6 Connect Corporate Centre 191 O'Riordan Street Mascot NSW 2020 Phone: 1800 676 133 (option 5) Email: capitalequipmentanz@bsci.com

Contact Information
Contact:
Phone:
Email:

Service Coverage
Billing Type: Contract
Start: 07/01/2021 **End:** 06/30/2023
PO Number:
Next Service Date :

Primary equipment

Product Line : GreenLight	Product Model : GreenLight XPS	Serial Number : XPS50922
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Connected Equipment

Product Name	BSC Serial Number	Non BSC Serial Number	Manufacturer
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Measurement Equipment - Last Calibration

Device Name Serial #	Next Calibration Date
7Z01550 - Meter, Nova II Display ROHS - BT603130	03/10/2023
FL250A - BT602486	06/06/2023
7Z02410 - Sensor, Power, Photodiode, PD300-ROHS - BT602879	05/03/2023
43-BNC - Meter, Watt Thruline - BT602510	04/08/2023
100A - Element, 100W, 25-60MHz - BT602570	10/27/2022
S-111-8 - LIQUID FLOW METER - BT602419	01/13/2023

Case Description :	Preventative Maintenance Due by 30 September 2022 Contract 0040152290-000010 (1 of 4)
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Work Performed Summary :	Performed by : Paul Whitehouse Performed on: 09/29/2022 1:00 PM Work Performed : Fibre port contacts severe corrosion Cleaned with tool USB port contacts ok Validate passed Set clock on TSB Pm complete Checklist Result : Pass
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Parts Used

Part Name	Part Number	Qty
KIT PM GL HPS OR XPS ROHS	0133-6761	1

As applicable, the completed checklist is included in additional attachment(s)

Customer:

WCO 09/30/2022 Friday, 09 September 2022

WCO 09/30/2022 Friday, 09 September 2022



WCO 09/30/2022 Friday, 09 September 2022

WCO 09/30/2022 Friday, 09 September 2022

DATE: 09/30/2022 10:19 AM

Technician: Paul Whitehouse

WCO 09/30/2022 Friday, 09 September 2022

WCO 09/30/2022 Friday, 09 September 2022



WCO 09/30/2022 Friday, 09 September 2022

WCO 09/30/2022 Friday, 09 September 2022

DATE: 09/30/2022 10:19 AM

ExpertCare
Capital Equipment Technical Services