

بسم الله الرحمن الرحيم

**Sudan University of Sciences & Technology**



**College of Engineering**



**Biomedical Engineering Department**

Electrical Safety in Clinical  
Engineering

(The Lack of Earthing)

**A Project Submitted In Partial Fulfillment for the Requirement  
of the Degree of B.Sc. (Honor) in Biomedical Engineering**

**Prepared by:**

1. Ahmed Alsir Ahmed
2. Ammar Osman Abd Almagid
3. Moaz Sidieg Alamin

**Supervised by:**

Dr. Elias Sidieg Mohammed Hassan

**August 2014**

## **Abstract**

The importance of this study stems from the significant role of earthing in electrical safety.

The purpose of this study is to provide an evaluation of earthing implementation in Khartoum hospitals.

Results indicated that the majority of Khartoum hospitals are partially used earthing, and Cardiology related departments are completely earthed.

The level of earthing system specifications is accepted according to the standards. However, there is a lack of earthing electrode regular maintenance (despite the use of conventional method) and regular grounding tests; therefore the effectiveness of earthing is doubtful.

# المستخلص

تتبع اهمية هذه الدراسة من الدور الجوهرى للتأريض فى الامان الكهربى. الهدف من هذه الدراسة هو توفير تقييم لتطبيق التأريض الكهربى فى مستشفيات ولاية الخرطوم.

اشارت النتائج الى ان غالبية المستشفيات تطبق التأريض الكهربى بصورة جزئية, اما الاقسام والمنشآت المختصة بطب القلب تطبق التأريض بصورة كاملة.

على مستوى المواصفات, اشارت النتائج الى ان المستوى مقبول بناء على المعايير, ولكن وجد ان اجراءات صيانة الكترود التأريض غير متوفرة (على الرغم من ان طريقة التأريض المستخدمة هي الطريقة التقليدية), بالاضافة الى عدم توفر الاختبارات الدورية لتأريض الاجهزة, ولذلك فإن الاداء الجيد امر مشكوك فيه.

## **Table of contents**

| <b>Title</b>      | <b>Page No.</b> |
|-------------------|-----------------|
| The verse         | I               |
| Dedication        | II              |
| Acknowledgement   | III             |
| Abstract          | IV              |
| Table of contents | V               |
| List of tables    | IX              |
| List of figures   | X               |
| List of appendix  | XI              |

### **Chapter One**

#### **Introduction**

|                               |   |
|-------------------------------|---|
| 1.1 Introduction              | 1 |
| 1.2 Problem statement         | 1 |
| 1.3 The hypothesis            | 2 |
| 1.4 The research objectives   | 2 |
| 1.4.1 General objective       | 2 |
| 1.4.2 The specific objectives | 2 |
| 1.5 study outlines            | 2 |

### **Chapter Two**

## **Background Studies**

|                        |   |
|------------------------|---|
| 2.1 Background studies | 3 |
|------------------------|---|

## **Chapter Three**

### **Theoretical Fundamental**

|   |    |
|---|----|
| 3.1 Electric shock  | 4  |
| 3.1.1 Direct and indirect contact                         | 4  |
| 3.1.2 Physiological effects of electricity                | 4  |
| 3.1.2.1 Electrolysis                                      | 4  |
| 3.1.2.2 Burns   | 5  |
| 3.1.2.3 Muscles cramps                                    | 5  |
| 3.1.2.4 Respiratory arrest                                | 5  |
| 3.1.2.5 Cardiac arrest                                    | 5  |
| 3.1.2.6 Ventricular fibrillation                          | 6  |
| 3.1.2.7 Effect of frequency on neuro-muscular stimulation | 6  |
| 3.1.3 Natural protection factors                          | 7  |
| 3.1.4 Important susceptibility parameters                 | 7  |
| 3.1.4.1 threshold and let go current                      | 7  |
| 3.1.4.2 Frequency   | 9  |
| 3.1.4.3 Duration  | 10 |
| 3.1.4.4 Weight  | 10 |

|   |    |
|---|----|
| 3.1.4.5 Points of entry                                     | 11 |
| 3.1.5 Microshock and macroshock                             | 11 |
| 3.1.5.2 Skin and body resistance                            | 11 |
| 3.1.5.3 Electric faults in equipment                        | 12 |
| 3.1.5.4 Microshock  | 15 |
| 3.1.5.5 Leakage currents                                    | 15 |
| 3.1.5.6 Conductive paths to the heart                       | 17 |
| 3.2 Ventricular fibrillation stimulated by electrical shock | 21 |
| 3.3 Patient care area                                       | 22 |
| 3.4 Classes and types of medical electrical equipment       | 23 |
| 3.5 Equipment types   | 25 |
| 3.6 Earthing  | 26 |
| 3.6.1 Earthing vs grounding                                 | 26 |
| 3.6.2 Equipotential grounding                               | 29 |
| 3.6.3 Earthing electrodes                                   | 30 |
| 3.6.4 Good earthing   | 30 |
| 3.6.5 Methods of earthing                                   | 31 |

## **Chapter Four**

### **Methodology**

|                                |    |
|--------------------------------|----|
| 4.1 Study area                 | 32 |
| 4.2 Methods of data collection | 32 |
| 4.2.1 Design of questionnaire  | 32 |

|                                   |    |
|-----------------------------------|----|
| 4.2.2 Visual inspection           | 32 |
| 4.2.3 Direct visits and interview | 33 |
| 4.2.4 Check list                  | 33 |

## **Chapter Five**

### **Results and analysis**

|  |    |
|--|----|
| 5.1 The results of questionnaire items | 34 |
| 5.1.1 The first section                | 34 |
| 5.1.2 The second section               | 35 |
| 5.1.3 The third section                | 36 |
| 5.2 Interviews                         | 37 |
| 5.3 Visual inspection                  | 37 |
| 5.4 The results of the check list      | 38 |

## **Chapter Six**

### **Conclusions and recommendations**

|                     |    |
|---------------------|----|
| 6.1 Conclusions     | 39 |
| 6.2 Recommendations | 39 |
| References          | 40 |

## **Appendixes**

|            |    |
|------------|----|
| Appendix A | 41 |
| Appendix B | 44 |

## **List of Tables**

| <b>Name of Table</b>  | <b>Page No.</b> |
|---|-----------------|
| 5.1 Results related to availability of earthing in targeted hospitals | 34              |
| 5.2 Availability of earthing in cardiology related departments        | 35              |
| 5.3 Results related to the reasons of the lack of earthing            | 35              |
| 5.4 Results related to earthing electrode regular maintenance         | 37              |
| 5.5 Results related to the availability of regular tests              | 38              |



## **List of Figures**

| <b>Name of Figure</b>   | <b>Page No.</b> |
|---|-----------------|
| 3.1 Physiological effects of electricity                            | 6               |
| 3.2 Distribution of perception and let go currents                  | 8               |
| 3.3 Let go current vs frequency                                     | 9               |
| 3.4 Fibrillation current vs shock duration                          | 10              |
| 3.5 Microshock due to a ground fault from hot line to equipment     | 14              |
| 3.6 Microshock leakage current pathway                              | 16              |
| 3.7 Threshold of VF   | 19              |
| 3.8 Leakage ground fault current                                    | 20              |
| 3.9 Equipment applied parts   | 26              |
| 3.10 Typical grounding system in patient environment                | 28              |
| 3.11 Typical grounding system with equipotential bonding conductors | 29              |
| 3.12 Earthing electrode corrosion                                   | 31              |
| 5.1 Majority of hospitals partially earthed                         | 34              |
| 5.2 Earthed devices vs un earthed devices                           | 36              |

## **List of appendix**

|               |    |
|---------------|----|
| Questionnaire | 41 |
| Check list    | 44 |

## **1.1 Introduction**

The patient in hospital is the center of care, but he is also helpless in the center of potential dangers. **Electrical safety** is very important in hospitals as patients may be undergoing a diagnostic or treatment procedure where the protective effect of dry skin is reduced. Also patients may be unattended, unconscious or anaesthetized and may not respond normally to an electric current. Further, electrically conductive solutions, such as blood and saline, are often present .in patient treatment areas and may drip or spill on electrical equipment. Earthing and the quality of earthing, significantly impact the overall quality of electrical safety.

**Earthing** is defined as a conducting connection by which a circuit or equipment is connected to the earth. The connection is used for establishing and maintaining the potential of the earth, or approximately that potential, on the circuit or equipment connected to it.

## **1.2 Problem statement**

Some incidents which might be related to the lack of earthing, like electrocutions, not accurate measurement and electrical apparatus damage were reported within some Sudanese hospitals , not officially; due to the lack of statistics.

-In addition, death from fibrillation induced via leakage currents in a catheter is very difficult to distinguish from death by natural causes (1). So we have a special interest in cardiology instruments, to study the possibility of the existence of such hidden cases in terms of the lack of earthing.

The motivation for this study is to provide an evaluation of electrical earthing in Sudanese hospitals and its associated impact in electrical safety.

## **1.3 The hypothesis**

Is that there are indications of the lack of earthing due to financial reasons and/or lack of awareness.

### **1.1.1 1.4 The research objectives**

#### **1.2 1.4.1 General objective:**

To evaluate the earthing implementation in healthcare facilities (case study on some Khartoum state hospitals) to improve the electrical safety

#### **1.3 1.4.2 The specific objectives:**

- To study the availability of earthing in healthcare facilities.
- To study the earthing types and quality.
- To study the reasons of the lack of earthing.
- To study the problems associated with the lack of earthing.
- To study the hazards of leakage currents in cardiology and possibility of fibrillation induced by leakage currents.
- To provide some suggested solutions with respect to the resent capabilities.

#### **1.5 Study outline:**

This study was divided into six chapters as the following:

1. Chapter one includes a general introduction to electrical safety and earthing in healthcare facilities, problem statement, hypothesis, study objectives and the study outlines.
2. Chapter two includes background studies.
3. Chapter three contains the theoretical fundamentals.
4. Chapter four contains the study methodology.
5. Chapter five contains the results and analysis.

6. Chapter six contains conclusions and recommendations.