

§95.1113

(4) Number of transmitters in use at the health care facility as of the date of registration including manufacturer name(s) and model numbers);

(5) Legal name of the authorized health care provider;

(6) Location of transmitter (coordinates, street address, building);

(7) Point of contact for the authorized health care provider (name, title, office, phone number, fax number, e-mail address).

(b) An authorized health care provider shall notify the frequency coordinator whenever a medical telemetry device is permanently taken out of service, unless the device is replaced with another transmitter utilizing the same technical characteristics as those reported on the effective registration. An authorized health care provider shall maintain the information contained in each registration current in all material respects, and shall notify the frequency coordinator when any change is made in the location or operating parameters previously reported which is material.

(c) As of April 14, 2010, no registrations may be accepted for frequencies where WMTS does not have primary status. Previously registered secondary facilities may continue to operate as registered.

[65 FR 44008, July 17, 2000, as amended at 75 FR 19285, Apr. 14, 2010]

§95.1113 Frequency coordinator.

(a) The Commission will designate a frequency coordinator(s) to manage the usage of the frequency bands for the operation of medical telemetry devices.

(b) The frequency coordinator shall

(1) Review and process coordination requests submitted by authorized health care providers as required in §95.1111;

(2) Maintain a database of WMTS use;

(3) Notify users of potential conflicts; and

(4) Coordinate WMTS operation with radio astronomy observatories and Federal Government radar systems as specified in §§95.1119 and 95.1121.

(5) Notify licensees—who are operating in accordance with §90.259(b)—of the need to comply with the field strength limit of §90.259(b)(11) prior to

47 CFR Ch. I (10–1–12 Edition)

initial activation of WMTS equipment in the 1427–1432 MHz band.

(6) Notify licensees—who are operating in 1392–1395 MHz band in accordance with subpart I of part 27—of the need to comply with the field strength limit of §27.804 prior to initial activation of WMTS equipment in the 1395–1400 MHz band.

[65 FR 44008, July 17, 2000, as amended at 67 FR 41682, June 20, 2002]

§95.1115 General technical requirements.

(a) *Field strength limits.* (1) In the 608–614 MHz band, the maximum allowable field strength is 200 mV/m, as measured at a distance of 3 meters, using measuring instrumentation with a CISPR quasi-peak detector.

(2) In the 1395–1400 MHz and 1427–1432 MHz bands, the maximum allowable field strength is 740 mV/m, as measured at a distance of 3 meters, using measuring equipment with an averaging detector and a 1MHz measurement bandwidth.

(b) *Undesired emissions.* (1) Out-of-band emissions below 960 MHz are limited to 200 microvolts/meter, as measured at a distance of 3 meters, using measuring instrumentation with a CISPR quasi-peak detector.

(2) Out-of-band emissions above 960 MHz are limited to 500 microvolts/meter as measured at a distance of 3 meters, using measuring equipment with an averaging detector and a 1 MHz measurement bandwidth.

(c) *Emission types.* A wireless medical telemetry device may transmit any emission type appropriate for communications in this service, except for video and voice. Waveforms such as electrocardiograms (ECGs) are not considered video.

(d) *Channel use.* (1) In the 1395–1400 MHz and 1427–1432 MHz bands, no specific channels are specified. Wireless medical telemetry devices may operate on any channel within the bands authorized for wireless medical telemetry use in this part.

(2) In the 608–614 MHz band, wireless medical telemetry devices utilizing broadband technologies such as spread spectrum shall be capable of operating within one or more of the following