§95.1019 Marketing limitations.

Transmitters intended for operation in the LPRS may be marketed and sold only for those uses described in §95.1009.

[64 FR 69933, Dec. 15, 1999]

Subpart H—Wireless Medical Telemetry Service (WMTS)

SOURCE: 65 FR 44008, July 17, 2000, unless otherwise noted.

GENERAL PROVISIONS

§95.1101 Scope.

This subpart sets out the regulations governing the operation of Wireless Medical Telemetry Devices in the 608– 614 MHz, 1395–1400 MHz, and 1427–1432 MHz frequency bands. *See* §95.630 regarding permissible frequencies.

[75 FR 19285, Apr. 14, 2010]

§95.1103 Definitions.

(a) Authorized health care provider. A physician or other individual authorized under state or federal law to provide health care services, or any other health care facility operated by or employing individuals authorized under state or federal law to provide health care services, or any trained technician operating under the supervision and control of an individual or health care facility authorized under state or federal law to provide health care facility authorized under state or federal law to provide health care services.

(b) Health care facility. A health care facility includes hospitals and other establishments that offer services, facilities and beds for use beyond a 24 hour period in rendering medical treatment, and institutions and organizations regularly engaged in providing medical services through clinics, public health facilities, and similar establishments, including government entities and agencies such as Veterans Administration hospitals; except the term health care facility does not include an ambulance or other moving vehicle.

(c) Wireless medical telemetry. The measurement and recording of physiological parameters and other patientrelated information via radiated bi-or unidirectional electromagnetic signals 47 CFR Ch. I (10–1–14 Edition)

in the 608–614, 1395–1400 MHz and 1427–1432 MHz frequency bands.

[65 FR 44008, July 17, 2000, as amended at 67 FR 6194, Feb. 11, 2002; 75 FR 19285, Apr. 14, 2010]

§95.1105 Eligibility.

Authorized health care providers are authorized by rule to operate transmitters in the Wireless Medical Telemetry Service without an individual license issued by the Commission provided the coordination requirements in §95.1111 have been met. Manufacturers of wireless medical telemetry devices and their representatives are authorized to operated wireless medical telemetry transmitters in this service solely for the purpose of demonstrating such equipment to, or installing and maintaining such equipment for, duly authorized health care providers. No entity that is a foreign government or which is active in the capacity as a representative of a foreign government is eligible to operate a WMTS transmitter.

§95.1107 Authorized locations.

The operation of a wireless medical telemetry transmitter under this part is authorized anywhere within a health care facility provided the facility is located anywhere a CB station operation is permitted under §95.405. This authority does not extend to mobile vehicles, such as ambulances, even if those vehicles are associated with a health care facility.

§95.1109 Equipment authorization requirement.

(a) Wireless medical telemetry devices operating under this part must be authorized under the certification procedure prior to marketing or use in accordance with the provisions of part 2, subpart J of this chapter.

(b) Each device shall be labeled with the following statement:

Operation of this equipment requires the prior coordination with a frequency coordinator designated by the FCC for the Wireless Medical Telemetry Service.

§95.1111 Frequency coordination.

(a) Prior to operation, authorized health care providers who desire to use

Federal Communications Commission

wireless medical telemetry devices must register all devices with a designated frequency coordinator. Except as specified in §95.1105, operation of WMTS equipment prior to registration is not authorized under this part. The registration must include the following information:

(1) Specific frequencies or frequency range(s) used;

(2) Modulation scheme used (including occupied bandwidth);

(3) Effective radiated power;

(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, email 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 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-ofband 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.