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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.

The procedures used to develop this document and those intended for its further maintenance are described in the ISO/IEC Directives, Part 1. In particular the different approval criteria needed for the different types of ISO documents should be noted. This document was drafted in accordance with the editorial rules of the ISO/IEC Directives, Part 2 (see www.iso.org/directives).

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. Details of any patent rights identified during the development of the document will be in the Introduction and/or on the ISO list of patent declarations received (see www.iso.org/patents).

Any trade name used in this document is information given for the convenience of users and does not constitute an endorsement.

For an explanation on the meaning of ISO specific terms and expressions related to conformity assessment, as well as information about ISO's adherence to the WTO principles in the Technical Barriers to Trade (TBT) see the following URL: Foreword - Supplementary information

The committee responsible for this document is ISO/TC 84, *Devices for administration of medicinal products and intravascular catheters*.

ISO 10555 consists of the following parts, under the general title *Intravascular catheters — Sterile and single-use catheters*:

— *Part 1: General requirements*

— *Part 3: Central venous catheters*

— *Part 4: Balloon dilatation catheters*

— *Part 5: Over-needle peripheral catheters*

— *Part 6: Subcutaneous implanted ports*

The following part has been withdrawn and the content has been included in ISO 10555-1:

— *Part 2: Angiographic catheters*

Intravascular catheters — Sterile and single-use catheters —

Part 6: Subcutaneous implanted ports

1 Scope

This part of ISO 10555 specifies requirements, performance, and user safety issues related to subcutaneous implanted ports and catheters for intravascular long-term use supplied in sterile condition and intended for single use.

This part of ISO 10555 does not specify requirements, performance, and user safety issues related to non-coring needles.

NOTE Subcutaneous implanted ports are known to be used for indications other than intravascular such as intra-peritoneal, intra-thecal, intra-pleural, and epidural access.

2 Normative references

The following documents, in whole or in part, are normatively referenced in this document and are indispensable for its application. For dated references, only the edition cited applies. For undated references, the latest edition of the referenced document (including any amendments) applies.

ISO 10555-1:2013, *Intravascular catheters — Sterile and single-use catheters — Part 1: General requirements*

ISO 10555-3:2013, *Intravascular catheters — Sterile and single-use catheters — Part 3: Central venous catheters*

3 Terms and definitions

For the purposes of this document, the terms and definitions given in ISO 10555-1 and the following apply.

3.1
catheter
single- or multiple-lumen tube allowing access to a point within the body at its distal end

3.2
connection
system connecting the catheter to the subcutaneous implanted port

3.3
effective surface area
area available for puncture by the needle

3.4
flushing volume
volume of solution needed to fully replace one solution from the subcutaneous implanted port and catheter with another