**Sudan**

**Hospitals:** 467 government, 257 private  
**PHC:** primary health Center: 5392  
**State:** 17

**State of Clinical Engineering (CE) - Health Technology Management (HTM) – Body of Practice (BOP)**

Biomedical engineering is a relatively new discipline in Sudan started in 1996. However, before this medical electronics engineers (sub specialty of biomedical engineering) employed in the health system since 1980s as service engineers. Lately, biomedical engineering departments have been established at the federal and states levels around the year 2001 to be responsible of medical devices management in FMOH.

The regulation of medical devices and disposable items, their registration for import and the application of standards are fairly complex issues in Sudan, mainly due to the presence of different bodies performing overlapping activities.

**National of Medical Supplies Fund (NMSF)**

Represents the executive body of the Federal Ministry of Health in Sudan, where the process of procurement, contracting and Medical device tenders for companies, and follow-up after the sale, installation, maintenance and calibration for a medical device.

**The Sudanese Standards and Metrology Organization (SSMO)**

Has the mandate to define/adopt national and international standards for any equipment imported into or built in Sudan, and has a committee dedicated to Medical Equipment and Device Standards.

**The National Medicines & Poisons Board (NMPB)**

Has the mandate for registration of medical products, including drugs and medical equipment/devices. Indeed, there is no clear definition of the boundaries between these two institutions and their respective responsibilities related to registration and regulation.

**How would you suggest to show the Value of and from having CE-HTM PROGRAM?**

The development of Authority at the government level through the of medical devices management monitored by IFMBE.

By recognizing the curriculum, higher education institutions must meet the needs of sustained growth and innovation in biomedical engineering.

The need for a global registration of the biomedical engineer through the existence of a board that regulates it.

**Example of success stories where CE supported patient outcomes**

In Sudan there is a student union of all biomedical engineering students, engineers and technicians established in 2014,

We did a great job as we organized workshops, conferences and medical engineer week.

Based on the presidency of the Union under graduation, and when he joins the Professional Association of Medical Engineers.

**CE Education program available (levels and content) – Body of Knowledge (BOK)**

**Academic organization: 15**

www.ced.ifmbe.org

<table>
<thead>
<tr>
<th></th>
<th>Diploma</th>
<th>BA</th>
<th>M.A.</th>
<th>Ph.D.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total</td>
<td>8</td>
<td>13</td>
<td>4</td>
<td>2</td>
</tr>
</tbody>
</table>

CE Association/Society and Credentialing/Certification program if available

The Sudanese Medical Engineering Professional Society is a professional organization that includes medical engineers in Sudan

CE major challenges (think of 3 subjects)

- Training – practical training curriculum for biomedical engineering students.
- Certification There are no professional certification professional careers take into account grades and promotion of vocational
- Limited utilization of national health information system for medical equipment planning Regulatory agencies (Pharm & doctor) don’t address engineering aspects

What is the most important action you will support to increase CE recognition

www.ced.ifmbe.org
The need for IFMBE entities and branches in all countries to implement programs with the collaboration of WHO. The development of Authority at the government through the of medical devices management monitored by IFMBE.

Thank you

Mohanad Abdlerhaman  
Coordinator of training of BME - Future University  
Vice president –SUBMES  
Mohanned530@gmail.com  
+249926151319