

Why government hospital just consider an air purifier with good One Pass Filtration Efficiency after SARS in HK

Since 2003, SARS happened in Hong Kong, most government hospital are still using the same theory of air purifier, which machine feature is provide a good one pass filtration efficiency for particles down to 0.3um through their HEPA filter with the machine, the machine emphasis can provide zero leakage of particles. We can understand HA need to select the machine can provide the good protection for patient, doctor, nurse and public in such critical period of time. Such machine has designed with a flexible arm for the specify patient, it can direct draw the potential SARS into the machine and filter out inside the machine totally. That machine is really provide their support during in this critical period.

After 10 years now, most government hospital are still following this rule despite the machine are plan to use in common area e.g. corridor, waiting area, lobby etc..., Shall we still consider a machine with only provide good in one pass filtration efficiency but can not effective for large area? If the market can provide another machine which has been proof with good performance in large area when compare, and also with cost effective benefit, shall we need to accept to change? For common area but not ICU, shall we consider the room / area total effectiveness rather than one pass filtration efficiency?

Most of another hospital in different country may consider different machine design and feature for different actual application needs, a simple theory is the machine can provide a large volume of clean air delivery then can capable to clean up the large area effectively, machine with high one pass filtration feature is always high in

pressure resistance inside the machine, then just can delivery less volume of clean air, the result is the machine may always serve for small area only. So they always consider the machine with high volume of clean air delivery capacity for most common public area in hospital e.g. corridor, waiting area, ward and lobby that the area nature is always large in area and with many occupants. The facts is such consideration and design may provide not only sufficient protection for public occupants, but also can save up much investment and running cost for such large number of machines in all hospitals.

