



**Add value.  
Inspire trust.**

TÜV SÜD Product Service GmbH · Ridlerstr. 65 · 80339 Munich · Germany

Fisher & Paykel Healthcare Ltd.  
15 Maurice Paykel Place  
East Tamaki, Auckland 2013  
New Zealand

Your reference/letter of	Our reference/name	Tel. extension/Email	Fax extension	Date	Page
MDR CA: 713204106 FPH-2022-A: 713267013 FPH-2022-B: 713282364 FPH-2022-C: 713265798 FPH-2022-D: 713304894 FPH-2023-A: 713305800	Ting Liu	Ting.Liu@tuvsud.com		2023-10-05	1 of 14

**TÜV SÜD Product Service GmbH  
Confirmation Letter  
CL 010815 0042 Rev. 00**

**Reference:** 713204106 | 713267013 | 713282364 | 713265798 | 713304894 | 713305800

To whom it may concern,

**Confirmation of the status of a formal application, written agreement, and appropriate surveillance in the framework of Regulation EU 2023/607 amending Regulations (EU) 2017/745 (in the following referenced as MDR) as regards the transitional provisions for certain medical devices and in vitro diagnostic medical devices.**

With this letter TÜV SÜD Product Service GmbH, designated under MDR and identified by the number 0123 on NANDO, confirms that we have received a formal application in accordance with Section 4.3, first subparagraph of Annex VII of MDR and has signed a written agreement in accordance with Section 4.3, second subparagraph of Annex VII of MDR with the above stated manufacturer with the following SRN Number:

**SRN Number: NZ-MF-000002556**

The devices covered by the formal application and the written agreement mentioned above are identified in the Tables below.

**Registered Office: Munich**  
Trade Register Munich HRB 85 742  
UniCredit Bank AG · BIC HYVEDEMMXXX  
IBAN DE13 7002 0270 0048 8522 11  
VAT ID No. DE129484267  
Information pursuant to § 2 [1] DL-InfoV  
(Germany) at tuvsud.com/imprint

**Supervisory Board:**  
Holger Lindner (Chairman)  
**Board of Management:**  
Walter Reithmaier (CEO)  
Patrick van Welij

**TÜV SÜD Product Service GmbH**  
Application Review  
Ridlerstr. 65  
80339 Munich  
Germany

tuvsud.com/ps  
Hotline: +49 89 50084-747





- Table 1 identifies the devices for which an MDR application has been received, written agreement concluded and for which TÜV SÜD Product Service GmbH is also responsible for appropriate surveillance of the corresponding devices under the applicable Directive.
- Table 2 identifies the devices for which an MDR application has been received and a written agreement concluded, but TÜV SÜD Product Service GmbH has not yet taken the responsibility for appropriate surveillance of the corresponding devices under the applicable Directive.

If devices covered by certificates issued under Directive 90/385/EEC (AIMDD) or Directive 93/42/EEC (MDD) that expired after 26 May 2021 and before 20 March 2023, without having been withdrawn, this letter also confirms that

- the manufacturer signed the written agreement under MDR by the date of MDD/AIMDD certificate expiry; or
- provided evidence that a competent authority of a Member State had granted a derogation or exemption from the applicable conformity assessment procedure in accordance with Article 59(1) of MDR or Article 97(1) of the MDR respectively.

The transition timelines in accordance Article 120 (3) of MDR that apply to the devices covered by this letter, subject to the manufacturer's continued compliance to the other conditions specified in Article 120 (3c) of MDR, are shown below:

- 26 May 2026 for Class III custom-made implantable devices
- 31 December 2027 for Class III devices and Class IIb implantable devices (except sutures, staples, dental fillings, dental braces, tooth crowns, screws, wedges, plates, wires, pins, clips and connectors)
- 31 December 2028 for other Class IIb devices, Class IIa, Class I devices placed on the market in sterile condition, measuring function
- 31 December 2028 for devices not requiring the involvement of a notified body under MDD but requiring it under MDR (e.g., class I devices that qualify as re-usable surgical instruments)

Fisher & Paykel Healthcare Ltd. products listed in Table 1 (covered by MDD EC Certificate G1 010815 0038) can benefit from the additional transitional provisions until 31 Dec 2028.

The issuance of the first confirmation letter is free of charge. We reserve the right to invoice further copies, amendments and / or changes of the confirmation letter according to effort.

For confirmation letter validity see [www.tuvsud.com/ps-cert?q=cert:CL\\_010815\\_0042\\_Rev.00](http://www.tuvsud.com/ps-cert?q=cert:CL_010815_0042_Rev.00)

On behalf of the Notified Body TÜV SÜD Product Service GmbH,  
2023-10-05

TÜV SÜD Product Service GmbH  
Medical and Health Services

A handwritten signature in blue ink, appearing to read 'Ting Liu'.

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Ting Liu  
Conformity Assessment Responsible (CARE)

TÜV SÜD Product Service GmbH  
Medical and Health Services

A handwritten signature in blue ink, appearing to read 'K. Fackler'.

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Konrad Fackler  
Application Reviewer



**Table 1: Devices covered by this letter and for which TÜV SÜD Product Service GmbH is also responsible for appropriate surveillance of the corresponding devices under the applicable Directive:**

Device name or Basic UDI-DI (under MDR application)	MDR Device classification (as proposed by the manufacturer and verified during application review)	If the MDR device is a substitute device, identification of the corresponding MDD/AIMDD device	MDD/AIMDD Certificate Reference(s) of the devices under MDR application, and the NB Identification
<b>Device 1</b>  <b>FPH950 230V EUROPE</b>  <b>Basic UDI-DI:</b> <b>94200124950RHH001S6</b>	<input type="checkbox"/> Class III <input type="checkbox"/> Class IIb implantable (non-exempted) <input checked="" type="checkbox"/> Class IIb / Class IIb implantable (exempted) <input type="checkbox"/> Class IIa <input type="checkbox"/> Class I devices in sterile condition <input type="checkbox"/> Class I devices with measuring function <input type="checkbox"/> Class III implantable custom-made-device	<input checked="" type="checkbox"/> N/A  or  <input type="checkbox"/> Identification of the corresponding device under MDD/AIMDD	<input checked="" type="checkbox"/> Certification as follows: Certificate #: G1 010815 0038 NB #: 0123  or  <input type="checkbox"/> Evidence that a competent authority of a Member State had granted acc. MDR, Art.59 (1) or Art.97 (1) Evidence #1; CA# Evidence #2; CA#
<b>Device 2</b>  <b>Adlt Optiflow Heated Kit 950</b>  <b>Basic UDI-DI:</b> <b>94200124950ACOHK1R4</b>	<input type="checkbox"/> Class III <input type="checkbox"/> Class IIb implantable (non-exempted) <input type="checkbox"/> Class IIb / Class IIb implantable (exempted) <input checked="" type="checkbox"/> Class IIa <input type="checkbox"/> Class I devices in sterile condition <input type="checkbox"/> Class I devices with measuring function <input type="checkbox"/> Class III implantable custom-made-device	<input checked="" type="checkbox"/> N/A  or  <input type="checkbox"/> Identification of the corresponding device under MDD/AIMDD	<input checked="" type="checkbox"/> Certification as follows: Certificate #: G1 010815 0038 NB #: 0123  or  <input type="checkbox"/> Evidence that a competent authority of a Member State had granted acc. MDR, Art.59 (1) or Art.97 (1) Evidence #1; CA# Evidence #2; CA#
<b>Device 3</b>  <b>Adlt CPAP Heated Kit 950</b>  <b>Basic UDI-DI:</b> <b>94200124950ACCHK1NG</b>	<input type="checkbox"/> Class III <input type="checkbox"/> Class IIb implantable (non-exempted) <input type="checkbox"/> Class IIb / Class IIb implantable (exempted) <input checked="" type="checkbox"/> Class IIa <input type="checkbox"/> Class I devices in sterile condition <input type="checkbox"/> Class I devices with measuring function <input type="checkbox"/> Class III implantable custom-made-device	<input checked="" type="checkbox"/> N/A  or  <input type="checkbox"/> Identification of the corresponding device under MDD/AIMDD	<input checked="" type="checkbox"/> Certification as follows: Certificate #: G1 010815 0038 NB #: 0123  or  <input type="checkbox"/> Evidence that a competent authority of a Member State had granted acc. MDR, Art.59 (1) or Art.97 (1) Evidence #1; CA# Evidence #2; CA#
<b>Device 4</b>  <b>Adlt CPAP Heated Kit W/Filter</b>  <b>Basic UDI-DI:</b> <b>94200124950ACCHK1NG</b>	<input type="checkbox"/> Class III <input type="checkbox"/> Class IIb implantable (non-exempted) <input type="checkbox"/> Class IIb / Class IIb implantable (exempted) <input checked="" type="checkbox"/> Class IIa <input type="checkbox"/> Class I devices in sterile condition	<input checked="" type="checkbox"/> N/A  or  <input type="checkbox"/> Identification of the corresponding device under MDD/AIMDD	<input checked="" type="checkbox"/> Certification as follows: Certificate #: G1 010815 0038 NB #: 0123  or  <input type="checkbox"/> Evidence that a competent authority of a Member State



Device name or Basic UDI-DI (under MDR application)	MDR Device classification (as proposed by the manufacturer and verified during application review)	If the MDR device is a substitute device, identification of the corresponding MDD/AIMDD device	MDD/AIMDD Certificate Reference(s) of the devices under MDR application, and the NB Identification
	<input type="checkbox"/> Class I devices with measuring function <input type="checkbox"/> Class III implantable custom-made-device		had granted acc. MDR, Art.59 (1) or Art.97 (1) Evidence #1; CA# Evidence #2; CA#
<b>Device 5</b>  <b>Adlt Vent D/Heated Cct Kit 950</b>  <b>Basic UDI-DI:</b> <b>94200124950AVDHK1V8</b>	<input type="checkbox"/> Class III <input type="checkbox"/> Class IIb implantable (non-exempted) <input type="checkbox"/> Class IIb / Class IIb implantable (exempted) <input checked="" type="checkbox"/> Class IIa <input type="checkbox"/> Class I devices in sterile condition <input type="checkbox"/> Class I devices with measuring function <input type="checkbox"/> Class III implantable custom-made-device	<input checked="" type="checkbox"/> N/A  or  <input type="checkbox"/> Identification of the corresponding device under MDD/AIMDD	<input checked="" type="checkbox"/> Certification as follows: Certificate #: G1 010815 0038 NB #: 0123  or  <input type="checkbox"/> Evidence that a competent authority of a Member State had granted acc. MDR, Art.59 (1) or Art.97 (1) Evidence #1; CA# Evidence #2; CA#
<b>Device 6</b>  <b>Adlt Vent D/Htd Cct W/Fitr</b>  <b>Basic UDI-DI</b> <b>94200124950AVDHK1V8</b>	<input type="checkbox"/> Class III <input type="checkbox"/> Class IIb implantable (non-exempted) <input type="checkbox"/> Class IIb / Class IIb implantable (exempted) <input checked="" type="checkbox"/> Class IIa <input type="checkbox"/> Class I devices in sterile condition <input type="checkbox"/> Class I devices with measuring function <input type="checkbox"/> Class III implantable custom-made-device	<input checked="" type="checkbox"/> N/A  or  <input type="checkbox"/> Identification of the corresponding device under MDD/AIMDD	<input checked="" type="checkbox"/> Certification as follows: Certificate #: G1 010815 0038 NB #: 0123  or  <input type="checkbox"/> Evidence that a competent authority of a Member State had granted acc. MDR, Art.59 (1) or Art.97 (1) Evidence #1; CA# Evidence #2; CA#
<b>Device 7</b>  <b>Adlt Vent D/Htd Cct W/Pres Lne</b>  <b>Basic UDI-DI:</b> <b>94200124950AVDHK1V8</b>	<input type="checkbox"/> Class III <input type="checkbox"/> Class IIb implantable (non-exempted) <input type="checkbox"/> Class IIb / Class IIb implantable (exempted) <input checked="" type="checkbox"/> Class IIa <input type="checkbox"/> Class I devices in sterile condition <input type="checkbox"/> Class I devices with measuring function <input type="checkbox"/> Class III implantable custom-made-device	<input checked="" type="checkbox"/> N/A  or  <input type="checkbox"/> Identification of the corresponding device under MDD/AIMDD	<input checked="" type="checkbox"/> Certification as follows: Certificate #: G1 010815 0038 NB #: 0123  or  <input type="checkbox"/> Evidence that a competent authority of a Member State had granted acc. MDR, Art.59 (1) or Art.97 (1) Evidence #1; CA# Evidence #2; CA#
<b>Device 8</b>  <b>Neo Optiflow Jr Kit 950</b>  <b>Basic UDI-DI:</b> <b>94200124950NCOHK1WD</b>	<input type="checkbox"/> Class III <input type="checkbox"/> Class IIb implantable (non-exempted) <input type="checkbox"/> Class IIb / Class IIb implantable (exempted) <input checked="" type="checkbox"/> Class IIa	<input checked="" type="checkbox"/> N/A  or	<input checked="" type="checkbox"/> Certification as follows: Certificate #: G1 010815 0038 NB #: 0123  or



Device name or Basic UDI-DI (under MDR application)	MDR Device classification (as proposed by the manufacturer and verified during application review)	If the MDR device is a substitute device, identification of the corresponding MDD/AIMDD device	MDD/AIMDD Certificate Reference(s) of the devices under MDR application, and the NB Identification
	<input type="checkbox"/> Class I devices in sterile condition <input type="checkbox"/> Class I devices with measuring function <input type="checkbox"/> Class III implantable custom-made-device	<input type="checkbox"/> Identification of the corresponding device under MDD/AIMDD	<input type="checkbox"/> Evidence that a competent authority of a Member State had granted acc. MDR, Art.59 (1) or Art.97 (1) Evidence #1; CA# Evidence #2; CA#
<b>Device 9</b>  <b>Neo D/Htd CPAP Kit 950</b>  <b>Basic UDI-DI:</b> <b>94200124950NCPAP1VY</b>	<input type="checkbox"/> Class III <input type="checkbox"/> Class IIb implantable (non-exempted) <input type="checkbox"/> Class IIb / Class IIb implantable (exempted) <input checked="" type="checkbox"/> Class IIa <input type="checkbox"/> Class I devices in sterile condition <input type="checkbox"/> Class I devices with measuring function <input type="checkbox"/> Class III implantable custom-made-device	<input checked="" type="checkbox"/> N/A  or  <input type="checkbox"/> Identification of the corresponding device under MDD/AIMDD	<input checked="" type="checkbox"/> Certification as follows: Certificate #: G1 010815 0038 NB #: 0123  or  <input type="checkbox"/> Evidence that a competent authority of a Member State had granted acc. MDR, Art.59 (1) or Art.97 (1) Evidence #1; CA# Evidence #2; CA#
<b>Device 10</b>  <b>Neo CPAP Kit 950</b>  <b>Basic UDI-DI:</b> <b>94200124950NCPAP1VY</b>	<input type="checkbox"/> Class III <input type="checkbox"/> Class IIb implantable (non-exempted) <input type="checkbox"/> Class IIb / Class IIb implantable (exempted) <input checked="" type="checkbox"/> Class IIa <input type="checkbox"/> Class I devices in sterile condition <input type="checkbox"/> Class I devices with measuring function <input type="checkbox"/> Class III implantable custom-made-device	<input checked="" type="checkbox"/> N/A  or  <input type="checkbox"/> Identification of the corresponding device under MDD/AIMDD	<input checked="" type="checkbox"/> Certification as follows: Certificate #: G1 010815 0038 NB #: 0123  or  <input type="checkbox"/> Evidence that a competent authority of a Member State had granted acc. MDR, Art.59 (1) or Art.97 (1) Evidence #1; CA# Evidence #2; CA#
<b>Device 11</b>  <b>Neo D/Htd CPAP Hudson Kit 950</b>  <b>Basic UDI-DI:</b> <b>95094200124950NCPAP1VY</b>	<input type="checkbox"/> Class III <input type="checkbox"/> Class IIb implantable (non-exempted) <input type="checkbox"/> Class IIb / Class IIb implantable (exempted) <input checked="" type="checkbox"/> Class IIa <input type="checkbox"/> Class I devices in sterile condition <input type="checkbox"/> Class I devices with measuring function <input type="checkbox"/> Class III implantable custom-made-device	<input checked="" type="checkbox"/> N/A  or  <input type="checkbox"/> Identification of the corresponding device under MDD/AIMDD	<input checked="" type="checkbox"/> Certification as follows: Certificate #: G1 010815 0038 NB #: 0123  or  <input type="checkbox"/> Evidence that a competent authority of a Member State had granted acc. MDR, Art.59 (1) or Art.97 (1) Evidence #1; CA# Evidence #2; CA#
<b>Device 12</b>  <b>Neo Vent D/Htd Cct Kit 950</b>	<input type="checkbox"/> Class III <input type="checkbox"/> Class IIb implantable (non-exempted)	<input checked="" type="checkbox"/> N/A  or	<input checked="" type="checkbox"/> Certification as follows: Certificate #: G1 010815 0038 NB #: 0123



Device name or Basic UDI-DI (under MDR application)	MDR Device classification (as proposed by the manufacturer and verified during application review)	If the MDR device is a substitute device, identification of the corresponding MDD/AIMDD device	MDD/AIMDD Certificate Reference(s) of the devices under MDR application, and the NB Identification
<b>Basic UDI-DI:</b> <b>94200124950NVDHK12L</b>	<input type="checkbox"/> Class IIb / Class IIb implantable (exempted) <input checked="" type="checkbox"/> Class IIa <input type="checkbox"/> Class I devices in sterile condition <input type="checkbox"/> Class I devices with measuring function <input type="checkbox"/> Class III implantable custom-made-device	<input type="checkbox"/> Identification of the corresponding device under MDD/AIMDD	or  <input type="checkbox"/> Evidence that a competent authority of a Member State had granted acc. MDR, Art.59 (1) or Art.97 (1) Evidence #1; CA# Evidence #2; CA#
<b>Device 13</b>  <b>Neo Vent D/Htd Prs Lne Adaptrs</b>  <b>Basic UDI-DI:</b> <b>94200124950NVDHK12L</b>	<input type="checkbox"/> Class III <input type="checkbox"/> Class IIb implantable (non-exempted) <input type="checkbox"/> Class IIb / Class IIb implantable (exempted) <input checked="" type="checkbox"/> Class IIa <input type="checkbox"/> Class I devices in sterile condition <input type="checkbox"/> Class I devices with measuring function <input type="checkbox"/> Class III implantable custom-made-device	<input checked="" type="checkbox"/> N/A  or  <input type="checkbox"/> Identification of the corresponding device under MDD/AIMDD	<input checked="" type="checkbox"/> Certification as follows: Certificate #: G1 010815 0038 NB #: 0123  or  <input type="checkbox"/> Evidence that a competent authority of a Member State had granted acc. MDR, Art.59 (1) or Art.97 (1) Evidence #1; CA# Evidence #2; CA#
<b>Device 14</b>  <b>Neo SLE D/Htd Kit 950</b>  <b>Basic UDI-DI:</b> <b>94200124950NVDHK12L</b>	<input type="checkbox"/> Class III <input type="checkbox"/> Class IIb implantable (non-exempted) <input type="checkbox"/> Class IIb / Class IIb implantable (exempted) <input checked="" type="checkbox"/> Class IIa <input type="checkbox"/> Class I devices in sterile condition <input type="checkbox"/> Class I devices with measuring function <input type="checkbox"/> Class III implantable custom-made-device	<input checked="" type="checkbox"/> N/A  or  <input type="checkbox"/> Identification of the corresponding device under MDD/AIMDD	<input checked="" type="checkbox"/> Certification as follows: Certificate #: G1 010815 0038 NB #: 0123  or  <input type="checkbox"/> Evidence that a competent authority of a Member State had granted acc. MDR, Art.59 (1) or Art.97 (1) Evidence #1; CA# Evidence #2; CA#
<b>Device 15</b>  <b>Sensor Cartridge 950 Universal</b>  <b>Basic UDI-DI:</b> <b>94200124950SCU001TP</b>	<input type="checkbox"/> Class III <input type="checkbox"/> Class IIb implantable (non-exempted) <input checked="" type="checkbox"/> Class IIb / Class IIb implantable (exempted) <input type="checkbox"/> Class IIa <input type="checkbox"/> Class I devices in sterile condition <input type="checkbox"/> Class I devices with measuring function <input type="checkbox"/> Class III implantable custom-made-device	<input checked="" type="checkbox"/> N/A  or  <input type="checkbox"/> Identification of the corresponding device under MDD/AIMDD	<input checked="" type="checkbox"/> Certification as follows: Certificate #: G1 010815 0038 NB #: 0123  or  <input type="checkbox"/> Evidence that a competent authority of a Member State had granted acc. MDR, Art.59 (1) or Art.97 (1) Evidence #1; CA# Evidence #2; CA#



Device name or Basic UDI-DI (under MDR application)	MDR Device classification (as proposed by the manufacturer and verified during application review)	If the MDR device is a substitute device, identification of the corresponding MDD/AIMDD device	MDD/AIMDD Certificate Reference(s) of the devices under MDR application, and the NB Identification
<b>Device 16</b>  <b>Nitric Kit 950</b>  <b>Basic UDI-DI:</b> <b>94200124950NNOAK1Z3</b>	<input type="checkbox"/> Class III <input type="checkbox"/> Class IIb implantable (non-exempted) <input type="checkbox"/> Class IIb / Class IIb implantable (exempted) <input checked="" type="checkbox"/> Class IIa <input type="checkbox"/> Class I devices in sterile condition <input type="checkbox"/> Class I devices with measuring function <input type="checkbox"/> Class III implantable custom-made-device	<input checked="" type="checkbox"/> N/A  or  <input type="checkbox"/> Identification of the corresponding device under MDD/AIMDD	<input checked="" type="checkbox"/> Certification as follows: Certificate #: G1 010815 0038 NB #: 0123  or  <input type="checkbox"/> Evidence that a competent authority of a Member State had granted acc. MDR, Art.59 (1) or Art.97 (1) Evidence #1; CA# Evidence #2; CA#
<b>Device 17</b>  <b>F&amp;P Vitera Full Face PAP Therapy Mask - Small U</b>  <b>Basic UDI-DI:</b> <b>94200124VITERAFFM01PH</b>	<input type="checkbox"/> Class III <input type="checkbox"/> Class IIb implantable (non-exempted) <input type="checkbox"/> Class IIb / Class IIb implantable (exempted) <input checked="" type="checkbox"/> Class IIa <input type="checkbox"/> Class I devices in sterile condition <input type="checkbox"/> Class I devices with measuring function <input type="checkbox"/> Class III implantable custom-made-device	<input checked="" type="checkbox"/> N/A  or  <input type="checkbox"/> Identification of the corresponding device under MDD/AIMDD	<input checked="" type="checkbox"/> Certification as follows: Certificate #: G1 010815 0038 NB #: 0123  or  <input type="checkbox"/> Evidence that a competent authority of a Member State had granted acc. MDR, Art.59 (1) or Art.97 (1) Evidence #1; CA# Evidence #2; CA#
<b>Device 18</b>  <b>F&amp;P Vitera Full Face PAP Therapy Mask - Medium U</b>  <b>Basic UDI-DI:</b> <b>94200124VITERAFFM01PH</b>	<input type="checkbox"/> Class III <input type="checkbox"/> Class IIb implantable (non-exempted) <input type="checkbox"/> Class IIb / Class IIb implantable (exempted) <input checked="" type="checkbox"/> Class IIa <input type="checkbox"/> Class I devices in sterile condition <input type="checkbox"/> Class I devices with measuring function <input type="checkbox"/> Class III implantable custom-made-device	<input checked="" type="checkbox"/> N/A  or  <input type="checkbox"/> Identification of the corresponding device under MDD/AIMDD	<input checked="" type="checkbox"/> Certification as follows: Certificate #: G1 010815 0038 NB #: 0123  or  <input type="checkbox"/> Evidence that a competent authority of a Member State had granted acc. MDR, Art.59 (1) or Art.97 (1) Evidence #1; CA# Evidence #2; CA#
<b>Device 19</b>  <b>F&amp;P Vitera Full Face PAP Therapy Mask - Large U</b>  <b>Basic UDI-DI:</b> <b>94200124VITERAFFM01PH</b>	<input type="checkbox"/> Class III <input type="checkbox"/> Class IIb implantable (non-exempted) <input type="checkbox"/> Class IIb / Class IIb implantable (exempted) <input checked="" type="checkbox"/> Class IIa <input type="checkbox"/> Class I devices in sterile condition <input type="checkbox"/> Class I devices with measuring function	<input checked="" type="checkbox"/> N/A  or  <input type="checkbox"/> Identification of the corresponding device under MDD/AIMDD	<input checked="" type="checkbox"/> Certification as follows: Certificate #: G1 010815 0038 NB #: 0123  or  <input type="checkbox"/> Evidence that a competent authority of a Member State had granted acc. MDR, Art.59 (1) or Art.97 (1)





Device name or Basic UDI-DI (under MDR application)	MDR Device classification (as proposed by the manufacturer and verified during application review)	If the MDR device is a substitute device, identification of the corresponding MDD/AIMDD device	MDD/AIMDD Certificate Reference(s) of the devices under MDR application, and the NB Identification
	<input type="checkbox"/> Class III implantable custom-made-device		Evidence #1; CA# Evidence #2; CA#
<b>Device 20</b>  <b>F&amp;P Vitera Full Face PAP Therapy Mask - Small/Small U</b>  <b>Basic UDI-DI:</b> <b>94200124VITERAFFM01PH</b>	<input type="checkbox"/> Class III <input type="checkbox"/> Class IIb implantable (non-exempted) <input type="checkbox"/> Class IIb / Class IIb implantable (exempted) <input checked="" type="checkbox"/> Class IIa <input type="checkbox"/> Class I devices in sterile condition <input type="checkbox"/> Class I devices with measuring function <input type="checkbox"/> Class III implantable custom-made-device	<input checked="" type="checkbox"/> N/A  or  <input type="checkbox"/> Identification of the corresponding device under MDD/AIMDD	<input checked="" type="checkbox"/> Certification as follows: Certificate #: G1 010815 0038 NB #: 0123  or  <input type="checkbox"/> Evidence that a competent authority of a Member State had granted acc. MDR, Art.59 (1) or Art.97 (1) Evidence #1; CA# Evidence #2; CA#
<b>Device 21</b>  <b>F&amp;P Vitera Full Face PAP Therapy Mask – Medium/ Medium U</b>  <b>Basic UDI-DI:</b> <b>94200124VITERAFFM01PH</b>	<input type="checkbox"/> Class III <input type="checkbox"/> Class IIb implantable (non-exempted) <input type="checkbox"/> Class IIb / Class IIb implantable (exempted) <input checked="" type="checkbox"/> Class IIa <input type="checkbox"/> Class I devices in sterile condition <input type="checkbox"/> Class I devices with measuring function <input type="checkbox"/> Class III implantable custom-made-device	<input checked="" type="checkbox"/> N/A  or  <input type="checkbox"/> Identification of the corresponding device under MDD/AIMDD	<input checked="" type="checkbox"/> Certification as follows: Certificate #: G1 010815 0038 NB #: 0123  or  <input type="checkbox"/> Evidence that a competent authority of a Member State had granted acc. MDR, Art.59 (1) or Art.97 (1) Evidence #1; CA# Evidence #2; CA#
<b>Device 22</b>  <b>F&amp;P Vitera Full Face PAP Therapy Mask - Large/ Large U</b>  <b>Basic UDI-DI:</b> <b>94200124VITERAFFM01PH</b>	<input type="checkbox"/> Class III <input type="checkbox"/> Class IIb implantable (non-exempted) <input type="checkbox"/> Class IIb / Class IIb implantable (exempted) <input checked="" type="checkbox"/> Class IIa <input type="checkbox"/> Class I devices in sterile condition <input type="checkbox"/> Class I devices with measuring function <input type="checkbox"/> Class III implantable custom-made-device	<input checked="" type="checkbox"/> N/A  or  <input type="checkbox"/> Identification of the corresponding device under MDD/AIMDD	<input checked="" type="checkbox"/> Certification as follows: Certificate #: G1 010815 0038 NB #: 0123  or  <input type="checkbox"/> Evidence that a competent authority of a Member State had granted acc. MDR, Art.59 (1) or Art.97 (1) Evidence #1; CA# Evidence #2; CA#
<b>Device 23</b>  <b>F&amp;P Vitera Full Face PAP Therapy Mask - Medium/ Large U</b>  <b>94200124VITERAFFM01PH</b>	<input type="checkbox"/> Class III <input type="checkbox"/> Class IIb implantable (non-exempted) <input type="checkbox"/> Class IIb / Class IIb implantable (exempted) <input checked="" type="checkbox"/> Class IIa <input type="checkbox"/> Class I devices in sterile condition	<input checked="" type="checkbox"/> N/A  or  <input type="checkbox"/> Identification of the corresponding device under MDD/AIMDD	<input checked="" type="checkbox"/> Certification as follows: Certificate #: G1 010815 0038 NB #: 0123  or  <input type="checkbox"/> Evidence that a competent authority of a Member State





Device name or Basic UDI-DI (under MDR application)	MDR Device classification (as proposed by the manufacturer and verified during application review)	If the MDR device is a substitute device, identification of the corresponding MDD/AIMDD device	MDD/AIMDD Certificate Reference(s) of the devices under MDR application, and the NB Identification
	<input type="checkbox"/> Class I devices with measuring function <input type="checkbox"/> Class III implantable custom-made-device		had granted acc. MDR, Art.59 (1) or Art.97 (1) Evidence #1; CA# Evidence #2; CA#
<b>Device 24</b>  <b>F&amp;P Vitera Full Face PAP Therapy Mask – Small SL</b>  <b>Basic UDI-DI:</b> <b>94200124VITERAFFM01PH</b>	<input type="checkbox"/> Class III <input type="checkbox"/> Class IIb implantable (non-exempted) <input type="checkbox"/> Class IIb / Class IIb implantable (exempted) <input checked="" type="checkbox"/> Class IIa <input type="checkbox"/> Class I devices in sterile condition <input type="checkbox"/> Class I devices with measuring function <input type="checkbox"/> Class III implantable custom-made-device	<input checked="" type="checkbox"/> N/A  or  <input type="checkbox"/> Identification of the corresponding device under MDD/AIMDD	<input checked="" type="checkbox"/> Certification as follows: Certificate #: G1 010815 0038 NB #: 0123  or  <input type="checkbox"/> Evidence that a competent authority of a Member State had granted acc. MDR, Art.59 (1) or Art.97 (1) Evidence #1; CA# Evidence #2; CA#
<b>Device 25</b>  <b>F&amp;P Vitera Full Face PAP Therapy Mask – Medium SL</b>  <b>Basic UDI-DI:</b> <b>94200124VITERAFFM01PH</b>	<input type="checkbox"/> Class III <input type="checkbox"/> Class IIb implantable (non-exempted) <input type="checkbox"/> Class IIb / Class IIb implantable (exempted) <input checked="" type="checkbox"/> Class IIa <input type="checkbox"/> Class I devices in sterile condition <input type="checkbox"/> Class I devices with measuring function <input type="checkbox"/> Class III implantable custom-made-device	<input checked="" type="checkbox"/> N/A  or  <input type="checkbox"/> Identification of the corresponding device under MDD/AIMDD	<input checked="" type="checkbox"/> Certification as follows: Certificate #: G1 010815 0038 NB #: 0123  or  <input type="checkbox"/> Evidence that a competent authority of a Member State had granted acc. MDR, Art.59 (1) or Art.97 (1) Evidence #1; CA# Evidence #2; CA#
<b>Device 26</b>  <b>F&amp;P Vitera Full Face PAP Therapy Mask – Large SL</b>  <b>Basic UDI-DI:</b> <b>94200124VITERAFFM01PH</b>	<input type="checkbox"/> Class III <input type="checkbox"/> Class IIb implantable (non-exempted) <input type="checkbox"/> Class IIb / Class IIb implantable (exempted) <input checked="" type="checkbox"/> Class IIa <input type="checkbox"/> Class I devices in sterile condition <input type="checkbox"/> Class I devices with measuring function <input type="checkbox"/> Class III implantable custom-made-device	<input checked="" type="checkbox"/> N/A  or  <input type="checkbox"/> Identification of the corresponding device under MDD/AIMDD	<input checked="" type="checkbox"/> Certification as follows: Certificate #: G1 010815 0038 NB #: 0123  or  <input type="checkbox"/> Evidence that a competent authority of a Member State had granted acc. MDR, Art.59 (1) or Art.97 (1) Evidence #1; CA# Evidence #2; CA#
<b>Device 27</b>  <b>F&amp;P Vitera Full Face PAP Therapy Mask – Medium/ Large SL</b>	<input type="checkbox"/> Class III <input type="checkbox"/> Class IIb implantable (non-exempted) <input type="checkbox"/> Class IIb / Class IIb implantable (exempted) <input checked="" type="checkbox"/> Class IIa	<input checked="" type="checkbox"/> N/A  or	<input checked="" type="checkbox"/> Certification as follows: Certificate #: G1 010815 0038 NB #: 0123  or



Device name or Basic UDI-DI (under MDR application)	MDR Device classification (as proposed by the manufacturer and verified during application review)	If the MDR device is a substitute device, identification of the corresponding MDD/AIMDD device	MDD/AIMDD Certificate Reference(s) of the devices under MDR application, and the NB Identification
<b>Basic UDI-DI:</b> <b>94200124VITERAFFM01PH</b>	<input type="checkbox"/> Class I devices in sterile condition <input type="checkbox"/> Class I devices with measuring function <input type="checkbox"/> Class III implantable custom-made-device	<input type="checkbox"/> Identification of the corresponding device under MDD/AIMDD	<input type="checkbox"/> Evidence that a competent authority of a Member State had granted acc. MDR, Art.59 (1) or Art.97 (1) Evidence #1; CA# Evidence #2; CA#
<b>Device 28</b>  <b>Optiflow 3S Nasal Cannula – Small</b>  <b>Basic UDI-DI:</b> <b>94200124RACOPTNC003AL</b>	<input type="checkbox"/> Class III <input type="checkbox"/> Class IIb implantable (non-exempted) <input type="checkbox"/> Class IIb / Class IIb implantable (exempted) <input checked="" type="checkbox"/> Class IIa <input type="checkbox"/> Class I devices in sterile condition <input type="checkbox"/> Class I devices with measuring function <input type="checkbox"/> Class III implantable custom-made-device	<input checked="" type="checkbox"/> N/A  or  <input type="checkbox"/> Identification of the corresponding device under MDD/AIMDD	<input checked="" type="checkbox"/> Certification as follows: Certificate #: G1 010815 0038 NB #: 0123  or  <input type="checkbox"/> Evidence that a competent authority of a Member State had granted acc. MDR, Art.59 (1) or Art.97 (1) Evidence #1; CA# Evidence #2; CA#
<b>Device 29</b>  <b>Optiflow 3S Nasal Cannula – Medium</b>  <b>Basic UDI-DI:</b> <b>94200124RACOPTNC003AL</b>	<input type="checkbox"/> Class III <input type="checkbox"/> Class IIb implantable (non-exempted) <input type="checkbox"/> Class IIb / Class IIb implantable (exempted) <input checked="" type="checkbox"/> Class IIa <input type="checkbox"/> Class I devices in sterile condition <input type="checkbox"/> Class I devices with measuring function <input type="checkbox"/> Class III implantable custom-made-device	<input checked="" type="checkbox"/> N/A  or  <input type="checkbox"/> Identification of the corresponding device under MDD/AIMDD	<input checked="" type="checkbox"/> Certification as follows: Certificate #: G1 010815 0038 NB #: 0123  or  <input type="checkbox"/> Evidence that a competent authority of a Member State had granted acc. MDR, Art.59 (1) or Art.97 (1) Evidence #1; CA# Evidence #2; CA#
<b>Device 30</b>  <b>Optiflow 3S Nasal Cannula – Large</b>  <b>Basic UDI-DI:</b> <b>94200124RACOPTNC003AL</b>	<input type="checkbox"/> Class III <input type="checkbox"/> Class IIb implantable (non-exempted) <input type="checkbox"/> Class IIb / Class IIb implantable (exempted) <input checked="" type="checkbox"/> Class IIa <input type="checkbox"/> Class I devices in sterile condition <input type="checkbox"/> Class I devices with measuring function <input type="checkbox"/> Class III implantable custom-made-device	<input checked="" type="checkbox"/> N/A  or  <input type="checkbox"/> Identification of the corresponding device under MDD/AIMDD	<input checked="" type="checkbox"/> Certification as follows: Certificate #: G1 010815 0038 NB #: 0123  or  <input type="checkbox"/> Evidence that a competent authority of a Member State had granted acc. MDR, Art.59 (1) or Art.97 (1) Evidence #1; CA# Evidence #2; CA#
<b>Device 31</b>  <b>myAirvo Water Bottle</b>	<input type="checkbox"/> Class III <input type="checkbox"/> Class IIb implantable (non-exempted)	<input checked="" type="checkbox"/> N/A  or	<input checked="" type="checkbox"/> Certification as follows: Certificate #: G1 010815 0038 NB #: 0123



Device name or Basic UDI-DI (under MDR application)	MDR Device classification (as proposed by the manufacturer and verified during application review)	If the MDR device is a substitute device, identification of the corresponding MDD/AIMDD device	MDD/AIMDD Certificate Reference(s) of the devices under MDR application, and the NB Identification
<b>Basic UDI-DI:</b> <b>94200124AIRVOACC00248</b>	<input type="checkbox"/> Class IIb / Class IIb implantable (exempted) <input checked="" type="checkbox"/> Class IIa <input type="checkbox"/> Class I devices in sterile condition <input type="checkbox"/> Class I devices with measuring function <input type="checkbox"/> Class III implantable custom-made-device	<input type="checkbox"/> Identification of the corresponding device under MDD/AIMDD	or  <input type="checkbox"/> Evidence that a competent authority of a Member State had granted acc. MDR, Art.59 (1) or Art.97 (1) Evidence #1; CA# Evidence #2; CA#
<b>Device 32</b>  <b>myAirvo Reusable Chamber</b>  <b>Basic UDI-DI:</b> <b>94200124AIRVOACC0044C</b>	<input type="checkbox"/> Class III <input type="checkbox"/> Class IIb implantable (non-exempted) <input type="checkbox"/> Class IIb / Class IIb implantable (exempted) <input checked="" type="checkbox"/> Class IIa <input type="checkbox"/> Class I devices in sterile condition <input type="checkbox"/> Class I devices with measuring function <input type="checkbox"/> Class III implantable custom-made-device	<input checked="" type="checkbox"/> N/A  or  <input type="checkbox"/> Identification of the corresponding device under MDD/AIMDD	<input checked="" type="checkbox"/> Certification as follows: Certificate #: G1 010815 0038 NB #: 0123  or  <input type="checkbox"/> Evidence that a competent authority of a Member State had granted acc. MDR, Art.59 (1) or Art.97 (1) Evidence #1; CA# Evidence #2; CA#
<b>Device 33</b>  <b>myAirvo 3</b>  <b>Basic UDI-DI:</b> <b>94200124AIRVO3HH02ES</b>	<input type="checkbox"/> Class III <input type="checkbox"/> Class IIb implantable (non-exempted) <input checked="" type="checkbox"/> Class IIb / Class IIb implantable (exempted) <input type="checkbox"/> Class IIa <input type="checkbox"/> Class I devices in sterile condition <input type="checkbox"/> Class I devices with measuring function <input type="checkbox"/> Class III implantable custom-made-device	<input checked="" type="checkbox"/> N/A  or  <input type="checkbox"/> Identification of the corresponding device under MDD/AIMDD	<input checked="" type="checkbox"/> Certification as follows: Certificate #: G1 010815 0038 NB #: 0123  or  <input type="checkbox"/> Evidence that a competent authority of a Member State had granted acc. MDR, Art.59 (1) or Art.97 (1) Evidence #1; CA# Evidence #2; CA#
<b>Device 34</b>  <b>Airvo 3</b>  <b>Basic UDI-DI:</b> <b>94200124AIRVO3HH02ES</b>	<input type="checkbox"/> Class III <input type="checkbox"/> Class IIb implantable (non-exempted) <input checked="" type="checkbox"/> Class IIb / Class IIb implantable (exempted) <input type="checkbox"/> Class IIa <input type="checkbox"/> Class I devices in sterile condition <input type="checkbox"/> Class I devices with measuring function <input type="checkbox"/> Class III implantable custom-made-device	<input checked="" type="checkbox"/> N/A  or  <input type="checkbox"/> Identification of the corresponding device under MDD/AIMDD	<input checked="" type="checkbox"/> Certification as follows: Certificate #: G1 010815 0038 NB #: 0123  or  <input type="checkbox"/> Evidence that a competent authority of a Member State had granted acc. MDR, Art.59 (1) or Art.97 (1) Evidence #1; CA# Evidence #2; CA#



Device name or Basic UDI-DI (under MDR application)	MDR Device classification (as proposed by the manufacturer and verified during application review)	If the MDR device is a substitute device, identification of the corresponding MDD/AIMDD device	MDD/AIMDD Certificate Reference(s) of the devices under MDR application, and the NB Identification
<b>Device 35</b>  <b>HPO Dual-Input Manifold (NIST) Airvo 3</b>  <b>Basic UDI-DI:</b> <b>94200124AIRVOACC0034A</b>	<input type="checkbox"/> Class III <input type="checkbox"/> Class IIb implantable (non-exempted) <input type="checkbox"/> Class IIb / Class IIb implantable (exempted) <input checked="" type="checkbox"/> Class IIa <input type="checkbox"/> Class I devices in sterile condition <input type="checkbox"/> Class I devices with measuring function <input type="checkbox"/> Class III implantable custom-made-device	<input checked="" type="checkbox"/> N/A  or  <input type="checkbox"/> Identification of the corresponding device under MDD/AIMDD	<input checked="" type="checkbox"/> Certification as follows: Certificate #: G1 010815 0038 NB #: 0123  or  <input type="checkbox"/> Evidence that a competent authority of a Member State had granted acc. MDR, Art.59 (1) or Art.97 (1) Evidence #1; CA# Evidence #2; CA#
<b>Device 36</b>  <b>Nonin Xpod 3012LP USB</b>  <b>Basic UDI-DI:</b> <b>94200124AIRVOACC0064G</b>	<input type="checkbox"/> Class III <input type="checkbox"/> Class IIb implantable (non-exempted) <input checked="" type="checkbox"/> Class IIb / Class IIb implantable (exempted) <input type="checkbox"/> Class IIa <input type="checkbox"/> Class I devices in sterile condition <input type="checkbox"/> Class I devices with measuring function <input type="checkbox"/> Class III implantable custom-made-device	<input checked="" type="checkbox"/> N/A  or  <input type="checkbox"/> Identification of the corresponding device under MDD/AIMDD	<input checked="" type="checkbox"/> Certification as follows: Certificate #: G1 010815 0038 NB #: 0123  or  <input type="checkbox"/> Evidence that a competent authority of a Member State had granted acc. MDR, Art.59 (1) or Art.97 (1) Evidence #1; CA# Evidence #2; CA#
<b>Device 37</b>  <b>Infosmart Web (Humidified High Flow)</b>  <b>Basic UDI-DI:</b> <b>94200124INFOSMART-WEB02X2</b>	<input type="checkbox"/> Class III <input type="checkbox"/> Class IIb implantable (non-exempted) <input checked="" type="checkbox"/> Class IIb / Class IIb implantable (exempted) <input type="checkbox"/> Class IIa <input type="checkbox"/> Class I devices in sterile condition <input type="checkbox"/> Class I devices with measuring function <input type="checkbox"/> Class III implantable custom-made-device	<input checked="" type="checkbox"/> N/A  or  <input type="checkbox"/> Identification of the corresponding device under MDD/AIMDD	<input checked="" type="checkbox"/> Certification as follows: Certificate #: G1 010815 0038 NB #: 0123  or  <input type="checkbox"/> Evidence that a competent authority of a Member State had granted acc. MDR, Art.59 (1) or Art.97 (1) Evidence #1; CA# Evidence #2; CA#
<b>Device 38</b>  <b>Humidifier SH870 230V EU</b>  <b>Basic UDI-DI:</b> <b>94200124SHSH87001EK</b>	<input type="checkbox"/> Class III <input type="checkbox"/> Class IIb implantable (non-exempted) <input type="checkbox"/> Class IIb / Class IIb implantable (exempted) <input checked="" type="checkbox"/> Class IIa <input type="checkbox"/> Class I devices in sterile condition <input type="checkbox"/> Class I devices with measuring function	<input checked="" type="checkbox"/> N/A  or  <input type="checkbox"/> Identification of the corresponding device under MDD/AIMDD	<input checked="" type="checkbox"/> Certification as follows: Certificate #: G1 010815 0038 NB #: 0123  or  <input type="checkbox"/> Evidence that a competent authority of a Member State had granted acc. MDR, Art.59 (1) or Art.97 (1)



Device name or Basic UDI-DI (under MDR application)	MDR Device classification (as proposed by the manufacturer and verified during application review)	If the MDR device is a substitute device, identification of the corresponding MDD/AIMDD device	MDD/AIMDD Certificate Reference(s) of the devices under MDR application, and the NB Identification
	<input type="checkbox"/> Class III implantable custom-made-device		Evidence #1; CA# Evidence #2; CA#
<b>Device 39</b>  <b>Inspiratory or Exhalation Port Filter</b>  <b>Basic UDI-DI:</b> <b>94200124RACAC-CFIL001CR</b>	<input type="checkbox"/> Class III <input type="checkbox"/> Class IIb implantable (non-exempted) <input type="checkbox"/> Class IIb / Class IIb implantable (exempted) <input checked="" type="checkbox"/> Class IIa <input type="checkbox"/> Class I devices in sterile condition <input type="checkbox"/> Class I devices with measuring function <input type="checkbox"/> Class III implantable custom-made-device	<input checked="" type="checkbox"/> N/A  or  <input type="checkbox"/> Identification of the corresponding device under MDD/AIMDD	<input checked="" type="checkbox"/> Certification as follows: Certificate #: G1 010815 0038 NB #: 0123  or  <input type="checkbox"/> Evidence that a competent authority of a Member State had granted acc. MDR, Art.59 (1) or Art.97 (1) Evidence #1; CA# Evidence #2; CA#
<b>Device 40</b>  <b>Humidified Insufflation Kit</b>  <b>Basic UDI-DI:</b> <b>94200124SIT01EX</b>	<input type="checkbox"/> Class III <input type="checkbox"/> Class IIb implantable (non-exempted) <input type="checkbox"/> Class IIb / Class IIb implantable (exempted) <input checked="" type="checkbox"/> Class IIa <input type="checkbox"/> Class I devices in sterile condition <input type="checkbox"/> Class I devices with measuring function <input type="checkbox"/> Class III implantable custom-made-device	<input checked="" type="checkbox"/> N/A  or  <input type="checkbox"/> Identification of the corresponding device under MDD/AIMDD	<input checked="" type="checkbox"/> Certification as follows: Certificate #: G1 010815 0038 NB #: 0123  or  <input type="checkbox"/> Evidence that a competent authority of a Member State had granted acc. MDR, Art.59 (1) or Art.97 (1) Evidence #1; CA# Evidence #2; CA#
<b>Device 41</b>  <b>Pressure Relief Adaptor</b>  <b>Basic UDI-DI:</b> <b>94200124PRLFDHQ</b>	<input type="checkbox"/> Class III <input type="checkbox"/> Class IIb implantable (non-exempted) <input type="checkbox"/> Class IIb / Class IIb implantable (exempted) <input checked="" type="checkbox"/> Class IIa <input type="checkbox"/> Class I devices in sterile condition <input type="checkbox"/> Class I devices with measuring function <input type="checkbox"/> Class III implantable custom-made-device	<input checked="" type="checkbox"/> N/A  or  <input type="checkbox"/> Identification of the corresponding device under MDD/AIMDD	<input checked="" type="checkbox"/> Certification as follows: Certificate #: G1 010815 0038 NB #: 0123  or  <input type="checkbox"/> Evidence that a competent authority of a Member State had granted acc. MDR, Art.59 (1) or Art.97 (1) Evidence #1; CA# Evidence #2; CA#
<b>Device 42</b>  <b>Neopuff™ Infant T-piece Resuscitator</b>  <b>Basic UDI-DI:</b> <b>94200124NEOPUFIR-SAD2QL</b>	<input type="checkbox"/> Class III <input type="checkbox"/> Class IIb implantable (non-exempted) <input checked="" type="checkbox"/> Class IIb / Class IIb implantable (exempted) <input type="checkbox"/> Class IIa <input type="checkbox"/> Class I devices in sterile condition	<input checked="" type="checkbox"/> N/A  or  <input type="checkbox"/> Identification of the corresponding device under MDD/AIMDD	<input checked="" type="checkbox"/> Certification as follows: Certificate #: G1 010815 0038 NB #: 0123  or  <input type="checkbox"/> Evidence that a competent authority of a Member State



Device name or Basic UDI-DI (under MDR application)	MDR Device classification (as proposed by the manufacturer and verified during application review)	If the MDR device is a substitute device, identification of the corresponding MDD/AIMDD device	MDD/AIMDD Certificate Reference(s) of the devices under MDR application, and the NB Identification
	<input type="checkbox"/> Class I devices with measuring function <input type="checkbox"/> Class III implantable custom-made-device		had granted acc. MDR, Art.59 (1) or Art.97 (1) Evidence #1; CA# Evidence #2; CA#

**Table 2: Devices covered by this letter and for which TÜV SÜD Product Service GmbH is NOT responsible for appropriate surveillance of the corresponding devices under the applicable Directive:**

Device name or Basic UDI-DI (under MDR application)	MDR Device classification (as proposed by the manufacturer and verified during application review)	If the MDR device is a substitute device, identification of the corresponding MDD/AIMDD device	MDD/AIMDD Certificate Reference(s) of the devices under MDR application, and the NB Identification
Not applicable	<input checked="" type="checkbox"/> N/A	<input checked="" type="checkbox"/> N/A	<input checked="" type="checkbox"/> N/A

### Confirmation Letter Version History

Date	TÜV SÜD Product Service GmbH internal reference traceable to each version of the letter	Action
2023-10-05	713204106 713267013 713282364 713265798 713304894 713305800	Initial issue