

URGENT: FIELD SAFETY NOTICE

CADD™ Medication Cassette Reservoirs

5th Sept 2024

Dear Valued Customers:

Smiths Medical is issuing this letter to notify you of a potential issue with specific models and lots of 50 mL and 100 mL CADD Medication Cassette Reservoirs. This letter details the potential issue, the affected models, and the required steps to perform.

Issue:

Certain CADD Medication Cassette Reservoirs may exhibit a weakened weld joint between the medication bag and tubing due to a production equipment malfunction. This could result in a medication leakage at or near the location specified in Figure 1.

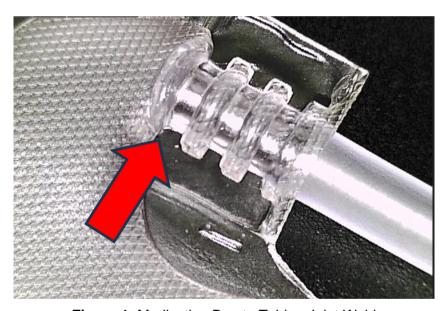


Figure 1. Medication Bag to Tubing Joint Weld

Potential Risk:

Leakage from a weakened weld at the medication bag to tubing joint could potentially result in delay or interruption of therapy, under delivery of medication, exposure to infectious or toxic agents, or air embolus.

One serious injury and zero deaths have been reported to Smiths Medical for this issue. However, because the potential exists for serious adverse health consequences such as permanent disability or death, the products listed below are being recalled.

Affected Models:



Certain lots of CADD Medication Cassette Reservoirs in Table 1 are potentially affected. **Table 1: Potentially Affected Product Models**

| Model Number | Product Name | Affected Lot Numbers |
|-----------------|--------------------------------------|---|
| 21-7001-24 | RESERVOIR, CASSETTE, 50ML 12/BX | 3983342, 4013368, 4046817, 4052400, 4060903 |
| 21-7002-24 | RESERVOIR, CASSETTE, 100ML 12/BX | 3977441, 3983314, 4013369, 4013370, 4013371, 4013372, 4025948, 4033993, 4037444, 4040238 |
| 21-7301-24 | RESERVOIR, CASSETTE, 50ML, FS 12/BX | 3983337, 3983338, 3983340, 4013367, 4034019, 4034021, 4034022, 4037748, 4037749, 4040247, 4040248, 4042839, 4042840, 4052405, 4052406, 4052409 |
| 21-7302-24 | RESERVOIR, CASSETTE, 100ML, FS 12/BX | 3971709, 3983315, 3983317, 3983318, 3983320, 3983328, 3983332, 4013356, 4013359, 4013360, 4013361, 4013373, 4013375, 4013376, 4013378, 4019430, 4034024, 4034030, 4037751, 4037752, 4037754, 4037756, 4040251, 4048892, 4052411, 4052412, 4052413, 4053920 |

Customer Required Actions:

Please contact Smiths Medical customer service for information on obtaining alternative CADD medication cassette reservoirs.

 Review your inventory of CADD Medication Cassette Reservoirs to confirm if any of the models/lots listed in Table 1 are in your possession and quarantine them. Discard all affected products following your institution's process for discarding. If discarding is not immediately possible at your facility, then the product should be quarantined until disposal.



- 2. Share this notification with all potential users of the device to ensure they are aware of this notification and proposed mitigations. If the devices are used at another location, please ensure this communication is delivered there.
- 3. Return the attached Customer Response Form to EMEA-FSN@icumed.com within ten days of receipt to acknowledge your understanding of this notification and identify any potentially affected product in your possession.
- 4. **DISTRIBUTORS**: If you have distributed potentially affected products to your customers, please immediately forward this notice to them and request that they complete the response form and return it to **YOU**. Then the **DISTRIBUTOR** must complete a <u>SINGLE form</u> with the required details and return to <u>EMEA-FSN@icumed.com</u>

Follow up actions by Smiths Medical:

Smiths Medical will provide credit to affected customers upon receipt of a completed response form to certify product destruction. Smiths Medical have corrected the manufacturing process that led to the potential for this issue to occur. Note: A new order must be placed if replacement is needed.

For further inquiries, please contact Smiths Medical using the following information:

| Smiths Medical Contact | Contact Information | Areas of Support |
|--------------------------------|--|--|
| Global Complaint Management | globalcomplaints@icumed.com | To report adverse events or product complaints |
| Technical Support | servicece@icumed.com | Additional information or technical assistance, |
| Customer Service | https://www.icumed.com/about- us/contact-us | Questions about product replacement and/or credit. |

General Information

Your country regulatory agency has been notified of this action.

Smiths Medical is committed to providing quality products and service to our customers. We apologize for any inconvenience this situation may cause.

Sincerely,

Jim Vegel

Vice President, Quality

See below: Customer Response Form



URGENT: FIELD SAFETY NOTICE – RESPONSE FORM

CADD™ Medication Cassette Reservoirs

5th Sept 2024

Check your inventory and complete the information below, even if you do not have the affected product. Failure to complete all sections of this page may result in improper, delayed or denied credit.

Please return the completed form to EMEA-FSN@icumed.com, If you have questions about this form please contact EMEA-FSN@icumed.com, or your local sales representative.

| Name of Hospital / Facilit | | | | | | | |
|---|------------------------------|--------------------------------|----------------------|---------------------|-------|-----------|---|
| | У | | | | | | |
| Hospital / Facility Address | | | | | | | |
| Telephone Number | | | | | | | |
| Name and Title of Person | Completin | g this Form | | | | | |
| Signature of Person Com | oleting this | Form | | | | | |
| Date | | | | | | | |
| If Purchased through a di name/location here for to | | | or | | | | |
| I have <u>NO</u> affected production of the productio | ducts, I hav (see table l | ve notified users in below) | n my faci omplete | ility and I have fo | | Destroyed | provided to me and Date of Destruction |
| | | | ilivei | itory (Lacries) | (Laci | 163) | |
| | | | | | | | |

Medical's Global Complaint Management Department at globalcomplaints@icumed.com.



ADDITIONAL AFFECTED PRODUCT DESTROYED

| Item / SKU Number | Lot Number | Quantity in inventory (Eaches) | Quantity Destroyed (Eaches) | Date of Destruction |
|-------------------|------------|--------------------------------|-----------------------------|---------------------|
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