

URGENT FIELD SAFETY NOTICE

Zethon Ltd
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Aston Clinton
Bucks
HP22 5WF England

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Zethon Reference	ZFSN-002
Date of Notice	8 th June 2015
ATTENTION TO	All
Affected products	REM-101, REM-101-D, REM-101-SP, REM-102, REM-102-D, REM-103, REM-103-D, REM-104, REM-104-D, REM-105, REM-105-D – ALL BATCHES
Manufacturer	Zethon Limited 2 Halton Brook Business Park, Weston Road, Aston Clinton, Bucks HP22 5WF, UK
Pre Feb 2015 Manufacturer formerly known as	Ross Electro Medical Limited Units K1-K3, Quarry Field Industrial Estate, Mere, BA12 6LA, UK
Intended device use	The above listed product is designed to be used as a bipolar forceps with irrigation.
Event description	Zethon has advised that all batches of the product listed above have the incorrect supporting regulatory documentation required to be placed on the market.
Patient Risk	There have been no reported safety incidences from using the product.

Advise on action to be taken immediately

1. Immediately inform hospital staff, product users, sales representatives, distributors and any other personnel who may be in contact with the above listed to quarantine products.
2. Please complete, print, sign date and return the attached Customer Response Form to confirm the effectiveness of the resulting action and to assist with stock accountability
3. Return all stock to the manufacturer for the above address. Each shipment must be clearly labelled with the following details:
Attn. Zethon Vigilance – FSN002

MHRA have been informed of this recall. Should you have any queries or would like further assistance with the issue please contact:

Email: vigilance@zethon.com
Telephone: +44 (0) 1296 634 090

Thank you in advance for your cooperation.

Yours faithfully



Will Desoutter
Director

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Customer Response Form

Regulatory Action	Field Safety Notice
Description	Bipolar Forceps with Irrigation

Please complete this page to confirm which product(s) you hold in stock that are listed in the above letter.

Product Code	Batch Number	Quantity

Representative/Distributor/ Hospital Name and Address at location for the above listed batches	
Contact Name	
Contact Title	
Contact Signature	
Contact Telephone Number	
Contact Email Address	
Date of form completion	