

REVA INDUSTRIES LIMITED

Rotterdam Road, Sutton Fields Industrial Estate, Hull HU7 0XD Telephone +44 (0) 1482 32 77 04 Fax +44 (0) 1482 58 52 73

URGENT FIELD SAFETY NOTICE: REF NO. REV001

DATE: 23RD December 2009

RE: APPOLLO SPECIAL NEEDS BATHING PRODUCTS MODELS -ELEGANCE, EXCALIBUR AND APOLLO

Attention: All distributors, installers, therapists, carers and users of Appollo Bathing Products

DETAILS ON AFFECTED MODELS:

The Elegance, Excalibur ,Appollo and Highgrove baths

DESCRIPTION OF THE PROBLEM:

Following reports of injuries caused to occupants falling from special needs bathing products as a result of not being adequately secured Reva Industries have issued this FSN with regard to their products. This requests that all Appollo bathing product seats be fitted with a lap strap (both new and also products already in the field). A lap belt suitable for these devices together with fitting and cleaning instructions is available with effect from 1st January 2010.

Action to be taken by the therapist/carer/user

Prior to Use of the Product:

- A risk assessment should be conducted to verify that the patient has sufficient upper body strength to enable him/her to maintain a steady position in the seat. The assessment should also verify that the patient has sufficient mental capacity to understand and adhere to caregivers instructions. The assessment should be carried out by a competent person before lifting a patient on an Appollo assisted bathing seat.
- Obtain a new lap belt complete with fitting and cleaning instructions to fit your Appollo range bath seat. To request a new lap belt and fitting instructions please contact Reva Industries Ltd, details on page 2, this item will be provided free of charge for products purchased from Reva Industries Ltd.

- New Lap Belts will be available from January 2010
- With effect from 1st January 2010 all Appollo Bathing products will be provided with a lap belt fitted to the seat.
- Future replacement lap belts can be purchased from Reva Industries Ltd., (details below) by quoting part no: B1305X
- To confirm your understanding and compliance to this Field Safety Notice please complete the Field Safety Notice Receipt form and return it to Reva Industries Ltd. Customer Care Department as instructed.

Transmission of this Field Safety Notice:

This notice needs to be passed on to all those who need to be aware within your organisation or to any organisation or individual where the potentially affected devices have been transferred. This includes a copy of the Field Safety Notice Receipt Form.

Please maintain awareness on this notice and any resulting action for an appropriate period to ensure effectiveness of the corrective action.

Contact Details:

Karen Noice Customer Service Coordinator Reva Industries Ltd Rotterdam Road Sutton Fields Industrial Estate Hull East Yorks HU7 0XD

Tel: Airbath Appollo Careline 0044 (0)1482 373813 Fax: 0044 (0) 1482 585273

The undersigned confirms that this notice has been notified to the appropriate Regulatory Agency.

Karen Noice Customer Service Co ordinator



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FIELD SAFETY NOTICE RECEIPT FORM

- URGENT FIELD SAFETY NOTICE: REV001
- DATE: 1st January 2010
- RE: APPOLLO SPECIAL NEEDS BATHING PRODUCTS -MODELS ELEGANCE, EXCALIBUR, HIGHGROVE AND APOLLO

Reva Industries Ltd. Require your acknowledgement as confirmation that you have received (and understood) the important safety information contained within the above Field Safety Notice (FSN).

Please complete the details below in clear print:

١,_	, acknowledge I am in receipt of the above Field Safety Notice
ar	nd that the information contained within this FSN has been communicated to all users who I/or my
C	ompany have supplied the above bathing products to.

(If required, this blank form may be copies and distributed to end users as part of your management activity in communicating this FSN)

In respect of this product, I am the:

Please Specify _____(Carer, Partner, Relative, Friend, Dealer etc)

Organisation (if applicable)_____

Address: _____

Product Purchased: _____

Product Serial Number:

The information forwarding has been completed

Date Completed: / /

Completed By: _	
(please print name	<i>)</i>

Signature _____

PLEASE RETURN THIS COMPLETED FORM TO REVA INDUSTRIES EITHER BY FAX ON: 01482 585273 OR BY POST TO CUSTOMER CARE, REVA INDUSTRIES LTD. ROTTERDAM RD., SUTTON FIELDS IND. EST. HULL HU7 0XD