

## <u>Urgent FIELD SAFETY NOTICE</u>

Device: Accessory Pack for ROCsafe™ with Flexible Venous Reservoir

Reference: **FSN903** - EN
Action: **Product Recall** 

Date: 10-02-2010

Attention: Chief of Perfusion, Dept. of Cardiovascular Surgery

-or-

**Director of Operating Room Services** 

Terumo Europe was reported the inversion of the inlet and outlet tubing lines mounted on the Flexible Venous Reservoir (FVR) of the Accessory Pack used in with minimized extracorporeal circuit Terumo ROCsafe.

#### **Details on affected devices:**

Reference code	Description	Affected Lot Numbers
CX-ROCA	Accessory Pack for ROCsafe™ with Flexible Venous Reservoir	0909045 0911044

#### **Description of the problem**

Terumo Europe confirms the inverted assembling of the inlet/outlets caused by a specification change of the Venous Reservoir not reflected in the I technical drawing for the tubing pack assembly.

#### **Patient hazard**

Blood collected by the vent or sucker line via the left heart vent/intracardiac sucker into the FVR can contain excessive air. This air can be removed by the purge line of the FVR, mounted before the filter of the bag. Inverted inlet with the outlet will no longer allow excess air to be purged out, therefore it might be pushed through the inner FVR filter to the oxygenator.

The bubble trap mounted prior to the oxygenator and arterial filter provided downstream in the arterial line might not stop massive presence of air in unusual situations, establishing a risk of gaseous emboli.

There has been no incorrect line effectively used so far and no patient injury was reported as result of this error.



### **Customer instructions**

- (1) Review this Field Safety Notice
- (2) Assure that all involved users are aware of the information in the notice.
- (3) Quarantine the accessory packs of the above listed lot numbers and indicate the number of packs on the enclosed form.
- (4) Please immediately confirm receipt of this communication by completing and faxing the attached "CUSTOMER RESPONSE FORM" to the fax number indicated on the form, even if you no longer have a device listed in this notice. We will contact you to organize the return and replacement as soon as possible.

For any questions or concerns, please contact immediately your local Terumo representative:

Organisation (to be completed by the sales or dealer) Contact name (function) Contact phone, mobile, email

We sincerely apologize for any inconvenience this may cause to our customers.

MV Vigilance Manager Terumo Europe NV Leuven, Belgium



# Field Safety Notice - CUSTOMER RESPONSE FORM

Device:	Accessor	/ Pack	for ROCs	afe ™ with	Flexible Ven	ous Reservoir
Date:	10-02-2010					
Please complete, sign and fa			this back:	То:	to whom telefa	x must to be sent back
				Telefax:	telefax No	
	Hospital Name					
	City	,				
	Country	,				
are listed	on the Field S	afety No	tice:			space below, of the lots that
	no Accesso		-	this Notice:		
We have	the following	affecte				
	Reference		Lot Numbers affected		ed Nun	nber of packs isolated
	CX-ROCA		0909045			
			C	911044		
Please collect the isolated packs, and ship the replacement devices at the following address and contact person: (if other than below)						
Ву сотр	letion and retu	rn of this	form, I am co	onfirming rece	eipt, reading and a	ncting on this Safety Notice.
Persor	n Responding:					[Please Print]
	Title:				Phone Number:	
Signature:					Date	
			<u> </u>			

**FSN903 A** 



## Field Safety Notice - WHOLESALER RESPONSE FORM

	Accessor	y Pack for ROCsa	ıfe ™ with	Flexib	le Veno	us Reservoir
Date:	10-02-2010					
Please c	omplete, sign	and fax this back:	To: Telefax:	to who		must to be sent back
Co	ompany Name					
	City					
	Country					
Safety No customer will provi	otice. Please c r's response, p de you.	ommunicate it to the cu	istomers to i	whom yo	u have sei for exchai	concerned by this Field nt these devices, obtain nge with new ones that we
Refere	nce					Dates
CX-R	OCA -	0909045		0 packs		25/09/2009
		0911044	30	0 packs	6	11/12/2009
and our e	engagement to and organize	and consolidate the re	our affected of	custome	r(s) with th lose in ou	ne Customer Response r own inventory. I will
	ese actions to	the local Health Author		ired by a	pplicable r	national legislations.
Perso	n Responding	the local Health Author		ired by a	oplicable r	national legislations. [Please Print
Perso		the local Health Author			Number	-
Person	n Responding	the local Health Author		Phone		-
Perso	n Responding Title	the local Health Author		Phone	Number	-
STEP 2 We confi	n Responding Title Signature Replacen irm that our o	nent request customers have no m	nore Access	Phone Da sory Pac	Number te 1	[Please Print
STEP 2 We confi	n Responding Title Signature Replacen irm that our o	nent request customers have no m	nore Access	Phone Da sory Pac urn to ye	Number te 1 ks affecte	[Please Print
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