

27 March 2013

**URGENT  
FIELD SAFETY NOTICE**

<b>COMMERCIAL NAME OF AFFECTED PRODUCTS:</b>	Teleflex Medical Rusch® Belly Bag® Urine Collection Bag with Hip Belt	
<b>TYPE OF ACTION:</b>	Recall	
<b>TELEFLEX REFERENCE:</b>	40003502	
<b>PRODUCT DESCRIPTION</b>	<b>PART NUMBER</b>	<b>LOT NUMBERS</b>
Belly Bag 1000mL	B1000	All Lots
Belly Bag with 24inch Drain	B1000CT	
Belly Bag with Sample Port	B1000P	

Dear Customer,

**1. Details of affected devices**

Teleflex has initiated a voluntary Field Safety Corrective Action for the above listed products.

**2. Description of the problem**

Teleflex Medical has issued a voluntary recall for the above listed products as the packaging may be compromised, and therefore the sterility of the product cannot be guaranteed. If non-sterile products are used, there is a possible risk of infection.

**3. FIELD SAFETY CORRECTIVE ACTION INSTRUCTIONS:**

**ADVICE ON ACTION TO BE TAKEN BY MEDICAL STAFF**

1. We request that you check your inventory for product within the scope of this field action. Users should cease use and distribution of stock of affected product and quarantine immediately.
2. If you do not have stock in scope of this field action as referred to in above table then mark the according checkbox on the Acknowledgement form (Appendix 1) and return the form to the fax number or e-Mail-address mentioned there.
3. If you have stock from the affected product as referred to in above table, mark the according checkbox on the Acknowledgement form (Appendix 1). Contact customer service by calling the phone number mentioned in section 6 who will issue you with a return number. Write this return number into the respective field in the Acknowledgement form.
4. Complete 'Appendix 1' for all products in your possession and under control. Return this form immediately to the following fax number: **+353 (0)1 4370773** or provide a completed copy to your local Sales Representative.
5. Agree the return of the affected product with the Teleflex Customer Service (or your local dealer).
6. Teleflex (or your local dealer) will issue a credit note upon receipt of the returned affected product.

**INSTRUCTION FOR DISTRIBUTORS OF AFFECTED PRODUCT**

1. If you are a distributor, provide this field safety notice to all of your customers who have received product in scope of this Field Action. Your customer is then required to complete the acknowledgement form and return this to you.
2. As a Distributor you are required to confirm to Teleflex that you have informed all of your customers affected by the Field Action. Upon completion of your actions, please forward the completed Acknowledgement Form to the following fax number: +353 (0)1 4370773
3. Please be aware that all European Economic Area/Switzerland (EEA/CH) and Turkey Member State Competent Authorities in which Teleflex distribute directly will be notified by Teleflex.
4. If you are a distributor and/or have a reporting responsibility within or outside the EEA/CH/TK area, please notify your local Competent Authority of this action. Please forward the notification and all communication with your local competent authority to Teleflex.

**4. Teleflex**

Teleflex informs all customers, employees of Teleflex and distributors on this Field Action.

**5. Transmission of this Field Safety Notice**

This notice should be passed on all persons who need to be aware within your organization or to any organization where the potentially affected devices have been transferred. Please consider end users, clinicians, risk managers, supply chain/distribution centres etc. in the circulation of this notice.

Maintain awareness of this notice until all required actions have been completed in your organisation

**6. Contact reference person**

Should you require any further information or support concerning this issue, please contact:

**Customer Service:**

**Contact:** Shane Kenny

**Telephone:** +353 (0)90 6460869

**FAX:** +353 (0)1 4370773

**E-mail:** orders.intl@teleflex.com

**Product Specific Queries:**

**Contact:** Vladamir Vasek

**Phone:** +420 602 791 683

**Email:** vvasek@teleflex.com

Please be advised that all European Economic Area/Switzerland (EEA/CH) and Turkey Member State Competent Authorities to which Teleflex distribute directly will be notified by Teleflex.

Teleflex is committed to providing high quality, safe and effective products. We sincerely apologize for any inconvenience this action may cause your operations. If you have any other questions, feel free to contact your local sales representative or Customer Service at orders.intl@teleflex.com

***For and on behalf of Teleflex,***

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██████████

*International VP Quality Assurance & Regulatory Affairs*

Customer No _____
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**FIELD SAFETY CORRECTIVE ACTION**  
**ACKNOWLEDGEMENT FORM**

**PRODUCT FIELD ACTION BY TELEFLEX**  
**IMMEDIATE ATTENTION REQUIRED**

RETURN COMPLETED FORM IMMEDIATELY TO: [orders.intl@teleflex.com](mailto:orders.intl@teleflex.com) or by fax  
on +353 (0)1 4370773

<input type="checkbox"/> Our inventory does <b>NOT</b> include products affected by this Field Action.	<input type="checkbox"/> Our inventory does include products affected by this Field Action. The use and further distribution of the affected products is stopped. All products are put on hold and the amount below will be returned.  Return Authorisation No _____
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**PLEASE PRINT PRODUCT QUANTITY NUMBERS CLEARLY.**

<b>COMMERCIAL NAME OF AFFECTED PRODUCTS:</b>			Teleflex Medical Rusch® Belly Bag® Urine Collection Bag with Hip Belt		
PRODUCT NUMBER	LOT NUMBER	QUANTITY	PRODUCT NUMBER	LOT NUMBER	QUANTITY
B1000			B1000		
B1000CT			B1000CT		
B1000P			B1000P		

Complete this Acknowledgement form and send back to Teleflex immediately by using the fax number or e-mail address above.

Print Name/Title	Date
Signature	Telephone Number
Institution Name	Address
Address	City, Zip Code