EU DECLARATION OF CONFORMITY



manufacturer: ZARYS International Group sp. z o.o. sp.k. address: ul. Pod Borem 18, 41-808 Zabrze, Poland contact: tel. +48 32 271 69 91, fax +48 32 274 72 84, e-mail: zarys@zarys.pl, website: www.zarys.com

SRN: PL-MF-000000410

We declare under our sole responsibility that a medical device:

ID WRISTBAND

colours*: white; pink; blue

types*: insert-card type; write-on type

(*detailed list of products covered by this declaration is available in document TD-22-l.1.1.b-1 – Identification – Annex 1, batch code - release document DZDO-01 – Annex 2)

classification:

• class I, rule 1 (in accordance with Annex VIII of Regulation (EU) 2017/745)

Basic UDI-DI: 59079968V0299SX

intended purpose: Disposable device used to identify and provide basic patient information to prevent medical errors and ensure patient safety.

is in conformity with Regulation (EU) 2017/745 of the European Parliament and of the Council of 5 April 2017 on medical devices.

The device described above meets all applicable provisions of the Annex I of Regulation (EU) 2017/745. Conformity assessment procedure has been performed in accordance with Article 52 (7).

The medical device covered by the present declaration of conformity complies with European standards. The list of supervised standards is included in document TD-22-I.4.c-1 - Annex 3.

place and date of issue: Zabrze, 1.12.2021 name: Bożena Smolnik position: Product Manager

> signature (on behalf of the President of the General Partner's Management Board)

10 sp. z a.o. sp.k.

