

**Konformitätserklärung
Declaration of Conformity**

Wir

We

**B. Braun Melsungen AG
Carl-Braun-Str. 1
34212 Melsungen
Deutschland/Germany
SRN DE-MF-000000201**erklären in eigener Verantwortung,
dass das/die Produkt/e**Transfix®**Transferset für sterile Flüssigkeiten
(Artikelnummern und Basic UDI-DI siehe Anlage I)mit den Anforderungen der Medizinprodukte
Verordnung (EU) 2017/745
übereinstimmt/übereinstimmen**Konformitätsbewertungsverfahren**
nach Anhang IX
der oben genannten Verordnung**Klassifizierung**gemäß Anhang VIII der oben genannten
Verordnung
Klasse I steril**Benannte Stelle**TÜV SÜD Product Service GmbH
Kennnummer 0123**Gültig bis**gemäß gültigem EU Zertifikat
(Nr. G11 012974 0626)hereby declare in our own responsibility
that the product/s**Transfix®**Transfer set for sterile fluids
(article numbers and Basic UDI-DI see attachment I)is/are in conformity with the requirements of the
Medical Device Regulation (EU) 2017/745**Conformity Assessment Procedure**
according to annex IX
of the Regulation named above**Classification**according to annex VIII of the Regulation named
above
Class I sterile**Notified Body**TÜV SÜD Product Service GmbH
Identification number 0123**Valid until**according to our valid EU Certificate
(No. G11 012974 0626)

Anlage I / Attachment I**Basic UDI-DI: 403923900000271ZV****Art.-Nr. / Art. No. Produktname / Product name**

4090500

Transofix®

4090500IN

Transofix®

Klasse / Class

I steril / I sterile

I steril / I sterile

Document amendment information

Version	Description of the changes
1.0	Initial Version under MDR

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This document is signed electronically in compliance with the B. Braun electronic signature policies and procedures by following persons:

UserName: Olbricht, Susanne (olbrsude)
Title: HC-RA-DE08E Regulatory Affairs Manager IV-Systems
Date: Thursday, 19 October 2023, 11:21 W. Europe Daylight Time
Meaning: Document signed as Author

UserName: Brand, Thomas (brantode)
Title: HC-QM-DE08 Vice President QM for non-active Medical Devices
Date: Wednesday, 25 October 2023, 17:49 W. Europe Daylight Time
Meaning: Approve Document

UserName: Seidel, Stefan (seidstde)
Title: Head of Regulatory Affairs CoE Infusion & Pain Therapy
Date: Wednesday, 25 October 2023, 17:49 W. Europe Daylight Time
Meaning: Approve Document
