



Product Service

EU Quality Management System Certificate (MDR)

Pursuant to Regulation (EU) 2017/745 on Medical Devices, Annex IX Chapters I and III (Class IIa and Class IIb Devices)

No. G10 012974 0611 Rev. 01

Manufacturer: B. Braun Melsungen AG

Carl-Braun-Str. 1 34212 Melsungen GERMANY

The Certification Body of TÜV SÜD Product Service GmbH certifies that the manufacturer has established, documented and implemented a quality management system as described in Article 10 (9) of the Regulation (EU) 2017/745 on medical devices. Details on device categories covered by the quality management system are described on the following page(s). The Report referenced below summarises the result of the assessment and includes reference to relevant CS, harmonized standards and test reports. The conformity assessment has been carried out according to Annex IX Chapter I and III of this regulation with a positive result. The quality management system assessment was accompanied by the assessment of technical documentation for devices selected on a representative basis.

The certified quality management system is subject to periodical surveillance by TÜV SÜD Product Service GmbH. The surveillance assessment shall also include an assessment of the technical documentation for the device or devices concerned on the basis of further representative samples. All applicable requirements of the testing and certification regulation of TÜV SÜD Group have to be complied with. For details and certificate validity see: www.tuvsud.com/ps-cert?q=cert:G10 012974 0611 Rev. 01

Report No.: 713169695

Preceding Certificate No.: G10 012974 0611 Rev. 00

 Valid from:
 2020-11-19

 Valid until:
 2025-03-12

Date of Initial Issuance: 2020-03-13

Christoph Dicks

Issue date: 2020-11-19 Head of Certification/Notified Body





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No. G10 012974 0611 Rev. 01

Device Group: A030101 - INFUSION CONTROLLERS

Classification: lla

Intended Purpose:

Device Group: Z120303 - INFUSION INSTRUMENTS

Classification: IIb

Intended Purpose: Transportable infusion pump that is used in combination with

> authorized disposables and accessories. The pump is intended for use on adults, pediatrics, and neonates for the intermittent or continuous delivery of parenteral and enteral fluids through

clinically accepted routes of administration.

These routes include, but are not limited to intravenous, intra-

arterial, subcutaneous, epidural, irrigation and enteral.

The system is used for the delivery of fluids indicated for infusion

therapy.

The validity of this certificate depends on conditions and/or is limited to the following:

Revision History: Rev. Dated Report

> 00 2020-03-13 713169695

