





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 061585 0036 Rev. 03

Manufacturer: B. Braun Medical AG

> Seesatz 17 6204 Sempach **SWITZERLAND**

SRN Manufacturer - CH-MF-000017781

Authorized B. Braun Melsungen AG

Carl-Braun-Str. 1, 34212 Melsungen, GERMANY Representative:

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, Certification, Validation and Verification Regulations TÜV SÜD Group have to be complied with.

For details and certificate validity see: www.tuvsud.com/ps-cert?q=cert:G10 061585 0036 Rev. 03

713255484 Report No.:

Preceding Certificate No.: G10 061585 0036 Rev. 02

Valid from: 2024-08-13 Valid until: 2026-03-14

Date of Initial Issuance: 2021-03-15

Christoph Dicks

Head of Certification/Notified Body Issue date: 2024-08-13





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Classification: Class IIa

Device Group: D02010102 - CHLORHEXIDINE, HYDROALCOHOLIC SOLUTION

FOR THE DISINFECTION OF MEDICAL DEVICES

Intended Purpose: Soaked wipes for surface disinfection of non-invasive medical

devices

Classification: Class IIa

Device Group: D0701 - ETHANOL FOR THE DISINFECTION OF MEDICAL

DEVICES

Intended Purpose: Solutions for surface disinfection of non- invasive medical devices

Classification: Class IIa

Device Group: D0799 - ALCOHOLS FOR THE DISINFECTION OF MEDICAL

DEVICES - OTHER

Intended Purpose: Surface disinfection of non-invasive medical devices.

Classification: Class IIa

Device Group: D0901 - AMMONIUM SALTS FOR THE DISINFECTION OF

MEDICAL DEVICES

Intended Purpose: Cleaner and Disinfectant for the mechanical reprocessing of non-

invasive medical devices e.g. bedsteads, mattresses, containers, transport carts, OR tables, OR accessories, wheelchairs, OR

shoes, bedside furniture

Classification: Class IIa

Device Group: D0901 - AMMONIUM SALTS FOR THE DISINFECTION OF

MEDICAL DEVICES

Intended Purpose: Surface disinfection of non-invasive medical devices.

Classification: Class IIb

Device Group: D01010102 - GLUTARALDEHYDE, ACIDIC SOLUTION FOR THE

DISINFECTION OF MEDICAL DEVICES

Intended Purpose: Disinfectant for the mechanical reprocessing of medical devices /

flexible endoscopes.

Classification: Class Ilb

Device Group: D01010102 - GLUTARALDEHYDE, ACIDIC SOLUTION FOR THE

DISINFECTION OF MEDICAL DEVICES

Instrument disinfectant for manual processing of surgical

instruments, endoscopes incl. flexible endoscopes.





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Classification: Class IIa

Device Group: U0180 - URETHRAL PROSTATIC AND BLADDER CATHETERS -

ACCESSORIES

Intended Purpose: Sterile urinary catheter irrigation solutions

Classification: Class IIa

Device Group: D0902 - ASSOCIATED AMMONIUM SALTS FOR THE

DISINFECTION OF MEDICAL DEVICES

Intended Purpose: Solution for instrument disinfection of dental and surgical

instruments and invasive medical devices prior to sterilization

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

Revision History:

Rev.	Dated	Report	Description
00	2021-03-15	713183172	-
01	2023-04-24	713264897	-
			Supplemented: Change to the approved type(s)/device(s)
02	2024-03-20	713209669	Supplemented: Device(s)/group of device(s) added
03	2024-08-13	713255484	Supplemented: Device(s)/group of device(s) added