

Apply bar code Lab Number

Ethylene Oxide Residual Testing Extraction Specifics

| CON | MPANY: |
|---------------|---|
| CON | NTACT: |
| LAB | NUMBER: |
| | AERATION Yes (Please perform ambient aeration as described below) No (Not required/already completed) Please Specify: |
| | SAMPLE DETAILS |
| | Single Device Multi-Component Device (i.e., Catheter with Stent) (when multiple extraction categories are selected, specify components for each category) |
| | Device intended for adult use Device intended for pediatric/neonate use |
| | Extract entire device Extract specified portion of device (Please specify below and attach a diagram where available) |
| | EXTRACTION CATEGORIES Limited Use (<24 hours exposure) Prolonged Use (24 hrs – 30 days exposure) perform simulated use, exhaustive extraction Permanent Use (30+ days exposure) perform simulated use, exhaustive extraction |
| | Extraction Type: |
| | Extraction Time:, or |
| | Extraction Temperature: |
| | AnalyzeIndividually Dool Devices (number pooled) |
| _ _ ПОИ | Report TCL: Surface Area (cm²) Pictures Included [ES: |
| | |
| APF | PROVED BY: DATE: |

Study Director: Document confirmation/source of parameters when form is not signed by sponsor.

"Exhaustive Extraction: Extraction until the amount of EO or ECH in a subsequent extraction is less than 10% of that detected in the first extraction, or until there is no analytically significant increase in the cumulative residue levels detected". ANSI/AAMI/ISO 10993-7:200.