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| --- | --- | --- | --- |
| General information Customer | | | SHIPMENT TO |
| Company name |  | **Synergy Health Utrecht B.V.**  De Liesbosch 88  3439 LC Nieuwegein  The Netherlands | |
| Contact person |  |
| Email address |  |
| Phone number |  |
| Add. Remarks CoA | | | |

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| **Product information** | | **AREA FOR LABEL** | |
| Article name |  | |  | |
| Product Type  (tubing, catheter, drape etc.) |  | |
| Batch number |  | |
| Reference to order  (PO number)\* |  | |
| **Quote number**\*\* | N/A | |

*\* Please note; requests without a PO number cannot be processed.*

*\*\*Please note: without a valid quotation number standard catalogue price will be applicable.*

*The quote number can be found on your quote.*

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| **Sample and test information** |
| **Please note:** Attach a picture or schematic of the sample to be tested as appendix. |

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| **1** | **Product Reference/ Batch number** | **Purity** | **Extraction type** | | **Extraction time** | **Extraction temperature** |
|  | EO  ECH EG | Cut up and immerse Static fluid path Other: | | Exhaustive Specific: hrs | 20 - 25°C  37°C  Other: °C |
| Remarks¹ | | | | | |
| Contact area cm² N/A | | | Number of samples to be tested | | |

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| **2** | **Product Reference/ Batch number** | **Purity** | **Extraction type** | | **Extraction time** | **Extraction temperature** |
|  | EO  ECH EG | Cut up and immerse Static fluid path Other: | | Exhaustive Specific: hrs | 20 - 25°C  37°C  Other: °C |
| Remarks¹ | | | | | |
| Contact area cm² N/A | | | Number of samples to be tested | | |

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| **3** | **Product Reference/ Batch number** | **Purity** | **Extraction type** | | **Extraction time** | **Extraction temperature** |
|  | EO  ECH EG | Cut up and immerse Static fluid path  Other: | | Exhaustive Specific: hrs | 20 - 25°C  37°C  Other: °C |
| Remarks¹ | | | | | |
| Contact area cm² N/A | | | Number of samples to be tested | | |
| **Additional Remarks** | | | | | | |

¹ Analysis will be performed on full content within packaging unless otherwise specified (excluding mounting cards, IFU’s or other paper based materials)

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| Specify Acceptable Residual limits according to **ISO 10993-7** | Limited exposure device <24h  Permanent contact device >30d  Other: | Prolonged exposure device >24h <30d  Tolerable contact limits: μg/cm2 |
| Testing post sterilisation  1  2  3 Postconditioning Time hrs | | |

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| **Sample Handling** | Normal  (10 working days target) | Priority (additional costs) Only on advance notice, confirmation by  Synergy Health Utrecht required.  Please mark the shipping box with **PRIORITY.** |

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| **Sample storage conditions** | -20°C ± 5°C  Ambient temperature | Temperature logger enclosed  Yes  No  Return address: |
| **Please note:** Samples will be disposed after analysis are reported. | | |

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| Signature Customer: |  | Date: |  |