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Zentralstelle der Länder
für Gesundheitsschutz
bei Arzneimitteln und
Medizinprodukten
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ZLG-BS-244.10.08



Product Service

EC Certificate

Production Quality Assurance System
Directive 93/42/EEC on Medical Devices (MDD), Annex V
(Devices in Class IIa, IIb or III)

No. G2 092486 0008 Rev. 01

Manufacturer:

**Suzhou Yuyue Medical
Technology Co., Ltd.**

No. 9 Jinfeng Road
Suzhou Science & Technology Town
215163 Suzhou, Jiangsu
PEOPLE'S REPUBLIC OF CHINA

Facility(ies):

Suzhou Yuyue Medical Technology Co., Ltd.
No. 9 Jinfeng Road, Suzhou Science & Technology Town,
215163 Suzhou, Jiangsu, PEOPLE'S REPUBLIC OF CHINA

Product Category(ies):

**I.V. Catheter for Single Use,
Positive Airway Pressure Units,
Humidifier**

The Certification Body of TÜV SÜD Product Service GmbH declares that the aforementioned manufacturer has implemented a quality assurance system for manufacture and final inspection of the respective devices / device categories in accordance with MDD Annex V. This quality assurance system conforms to the requirements of this Directive and is subject to periodical surveillance. For marketing of class IIb and III devices an additional Annex III certificate is mandatory. See also notes overleaf.

Report No.:

SH1985202

Valid from:

2019-10-17

Valid until:

2024-05-26

Date, 2019-10-17

Stefan Preiß
Head of Certification/Notified Body



**Add value.
Inspire trust.**

TÜV SÜD Product Service GmbH · Ridlerstr. 65 · 80339 Munich · Germany

Suzhou Yuyue Medical
Technology Co., Ltd.
Suzhou Science & Technology Town
No. 9 Jinfeng Road
215163 SUZHOU, JIANGSU
PEOPLE'S REPUBLIC OF CHINA

Your reference/letter of	Our reference/name	Tel. extension/Email	Fax extension	Date	Page
092486	713317868	+86 21 6140 8685 Yongbo.Wan@tuvsud.com	+86 21 6140 8600	2024-03-12	1 of 3

**TÜV SÜD Product Service GmbH
Confirmation Letter
CL 092486 0012 Rev. 00**

Reference: 713317868

To whom it may concern,

Confirmation of the status of a formal application, written agreement, and appropriate surveillance in the framework of Regulation EU 2023/607 amending Regulations (EU) 2017/745 (in the following referenced as MDR) as regards the transitional provisions for certain medical devices and in vitro diagnostic medical devices.

With this letter TÜV SÜD Product Service GmbH, designated under MDR and identified by the number 0123 on NANDO, confirms that we have received a formal application in accordance with Section 4.3, first subparagraph of Annex VII of MDR and has signed a written agreement in accordance with Section 4.3, second subparagraph of Annex VII of MDR with the above stated manufacturer with the following SRN Number:

SRN Number: CN-MF-000015854

The devices covered by the formal application and the written agreement mentioned above are identified in the Tables below.

- Table 1 identifies the devices for which an MDR application has been received, written agreement concluded and for which TÜV SÜD Product Service GmbH is also responsible for appropriate surveillance of the corresponding devices under the applicable Directive.
- Table 2 identifies the devices for which an MDR application has been received and a written agreement concluded, but TÜV SÜD Product Service GmbH has not yet taken the responsibility for appropriate surveillance of the corresponding devices under the applicable Directive.

If devices covered by certificates issued under Directive 90/385/EEC (AIMDD) or Directive 93/42/EEC

Registered Office: Munich
Trade Register Munich HRB 85 742
UniCredit Bank AG · BIC HYVEDEMMXXX
IBAN DE13 7002 0270 0048 8522 11
VAT ID No. DE129484267
Information pursuant to § 2 [1] DL-InfoV
(Germany) at tuvsud.com/imprint

Supervisory Board:
Holger Lindner (Chairman)
Board of Management:
Walter Reithmaier (CEO)
Patrick van Welij

TÜV SÜD Product Service GmbH
Certification Body for Medical Products
Ridlerstr. 65
80339 Munich
Germany

tuvsud.com/ps
Hotline: +49 89 50084-747





(MDD) that expired after 26 May 2021 and before 20 March 2023, without having been withdrawn, this letter also confirms that

- the manufacturer signed the written agreement under MDR by the date of MDD/AIMDD certificate expiry; or
- provided evidence that a competent authority of a Member State had granted a derogation or exemption from the applicable conformity assessment procedure in accordance with Article 59(1) of MDR or Article 97(1) of the MDR respectively.

The transition timelines in accordance Article 120 (3) of MDR that apply to the devices covered by this letter, subject to the manufacturer's continued compliance to the other conditions specified in Article 120 (3c) of MDR, are shown below:

- 26 May 2026 for Class III custom-made implantable devices
- 31 December 2027 for Class III devices and Class IIb implantable devices (except sutures, staples, dental fillings, dental braces, tooth crowns, screws, wedges, plates, wires, pins, clips and connectors)
- 31 December 2028 for other Class IIb devices, Class IIa, Class I devices placed on the market in sterile condition, measuring function
- 31 December 2028 for devices not requiring the involvement of a notified body under MDD but requiring it under MDR (e.g., class I devices that qualify as re-usable surgical instruments)

The issuance of the first confirmation letter is free of charge. We reserve the right to invoice further copies, amendments and / or changes of the confirmation letter according to effort.

For confirmation letter validity see www.tuvsud.com/ps-cert?q=cert:CL 092486 0012 Rev. 00

In case of inquiries please contact medical_devices@tuvsud.com.

On behalf of the Notified Body TÜV SÜD Product Service GmbH,
2024-03-12

TÜV SÜD Product Service GmbH
Medical and Health Services

A handwritten signature in black ink, appearing to read 'Yongbo Wan'.

Mr. Wan Yongbo
Conformity Assessment Responsible (CARE)

TÜV SÜD Product Service GmbH
Medical and Health Services

A handwritten signature in black ink, appearing to read 'Michael Mauermeir'.

[Michael Mauermeir \(Mar 12, 2024 10:47 GMT+1\)](#)

Mr. Michael Mauermeir
Application Reviewer



Table 1: Devices covered by this letter and for which TÜV SÜD Product Service GmbH is also responsible for appropriate surveillance of the corresponding devices under the applicable Directive:

Device name or Basic UDI-DI (under MDR application)	MDR Device classification (as proposed by the manufacturer and verified during application review)	If the MDR device is a substitute device, identification of the corresponding MDD/AIMDD device	MDD/AIMDD Certificate Reference(s) of the devices under MDR application, and the NB Identification
Positive Airway Pressure Units Basic UDI-DIs: 69221665YHC001L4 69221665YHC002L6 69221665YHC003L8 69221665YHB001KV 69221665YHB002KX	<input type="checkbox"/> Class III <input type="checkbox"/> Class IIb implantable (non-exempted) <input type="checkbox"/> Class IIb / Class IIb implantable (exempted) <input checked="" type="checkbox"/> Class IIa <input type="checkbox"/> Class I devices in sterile condition <input type="checkbox"/> Class I devices with measuring function <input type="checkbox"/> Class III implantable custom-made-device	<input checked="" type="checkbox"/> N/A	<input checked="" type="checkbox"/> Certification as follows: G2 092486 0008 Rev.01; NB# 0123
Sleep apnea breathing therapy mask Basic UDI-DIs: 69221665YFM001ML 69221665YNM001QC 69221665YPM001R2	<input type="checkbox"/> Class III <input type="checkbox"/> Class IIb implantable (non-exempted) <input type="checkbox"/> Class IIb / Class IIb implantable (exempted) <input checked="" type="checkbox"/> Class IIa <input type="checkbox"/> Class I devices in sterile condition <input type="checkbox"/> Class I devices with measuring function <input type="checkbox"/> Class III implantable custom-made-device	<input checked="" type="checkbox"/> N/A	<input checked="" type="checkbox"/> Certification as follows: G2 092486 0010 Rev.00; NB# 0123

Table 2: Devices covered by this letter and for which TÜV SÜD Product Service GmbH is NOT responsible for appropriate surveillance of the corresponding devices under the applicable Directive:

Device name or Basic UDI-DI (under MDR application)	MDR Device classification (as proposed by the manufacturer and verified during application review)	If the MDR device is a substitute device, identification of the corresponding MDD/AIMDD device	MDD/AIMDD Certificate Reference(s) of the devices under MDR application, and the NB Identification
Not applicable	<input checked="" type="checkbox"/> N/A	<input checked="" type="checkbox"/> N/A	<input checked="" type="checkbox"/> N/A

Confirmation Letter Version History

Date	TÜV SÜD Product Service GmbH internal reference traceable to each version of the letter	Action
2024-03-12	713317868	Initial issue

Declaration, including the attached schedule, should be printed on form as used for a Declaration of Conformity per manufacturer's QMS (e.g. manufacturer's letterhead)

Manufacturer's Declaration

in relation to Regulation (EU) 2023/607 amending Regulations (EU) 2017/745 and (EU) 2017/746 as regards the transitional provisions for certain medical devices and in vitro diagnostic medical devices, in particular with respect to

- the validity of certificates issued under Council Directive 90/385/EEC on Active Implantable Medical Devices (AIMDD) or Council Directive 93/42/EEC on Medical Devices (MDD) (Directive Certificates) *and/or*¹
- the compliance of the devices and us as their manufacturer with the conditions for the continued placing on the market and putting into service

Manufacturer name	Suzhou Yuyue Medical Technology Co.,Ltd.
Manufacturer address and contact details	No.9 Jinfeng Road, Suzhou Science & Technology Town, 215163 Suzhou, Jiangsu PEOPLE'S REPUBLIC OF CHINA
Single Registration Number (SRN) (if available)	CN-MF-000015854

Authorised Representative name (if applicable)	Metrax GmbH
Authorised Representative address and contact details	Rheinwaldstraße,2278628Rottweil Germany
Single Registration Number (SRN) (if available)	DE-AR-000005481

Notified body name (if applicable)	<input type="checkbox"/> See attached schedule
Notified body number (if applicable)	<input type="checkbox"/> See attached schedule
Directive Certificate number(s) to which this confirmation is made (if applicable)	<input type="checkbox"/> See attached schedule
Original expiry date as indicated on the Directive Certificate prior to the extension of the validity (if applicable)	<input type="checkbox"/> See attached schedule

¹ The first condition is not applicable in case of devices for which the conformity assessment procedure pursuant to MDD did not require the involvement of a notified body, for which the declaration of conformity was drawn up prior to 26 May 2021 and for which the conformity assessment procedure pursuant to this Regulation requires the involvement of a notified body.

Declaration, including the attached schedule, should be printed on form as used for a Declaration of Conformity per manufacturer's QMS (e.g. manufacturer's letterhead)

End date of extended validity/transition period	<input type="checkbox"/> See attached schedule
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We, as the manufacturer declare under our sole responsibility:

- for the above listed **Directive Certificate** (or see attached schedule, if multiple certificates) the conditions for the legal extension of validity as required in Article 120.2 of the MDR are met *and/or*²
- the listed **device(s)** in the attached schedule and we as their manufacturer are in compliance with the conditions listed in Article 120.3c of the MDR for continued placing on the market and putting into service,

namely by fulfilling the following conditions:

➤ **Directive Certificate(s)** as listed above or in the attached schedule

- Directive Certificate(s) covering the listed device(s) was/were issued after 25 May 2017, was/were valid on 26 May 2021 and have not been withdrawn afterwards.

Choose applicable statements:

☐ Expired *before* 20 March 2023:

- ☐ Before the original date of expiry as indicated on the Directive Certificate(s), we and the notified body have signed written agreement(s) in accordance with Section 4.3, second subparagraph of Annex VII to this Regulation for the conformity assessment(s) in respect of the device(s) covered by the expired certificate(s) or in respect of a device(s) intended to substitute that/those device(s), or
- ☐ A Competent Authority has granted a derogation from the applicable conformity assessment procedure in accordance with Article 59(1) MDR (may be provided upon request), or
- ☐ A Competent Authority has required the manufacturer, in accordance with Article 97(1) MDR, to carry out the applicable conformity assessment procedure (may be provided upon request)

Choose one of the following statements only if a derogation per Article 59(1) or a requirement per Article 97(1) has been granted by a Competent Authority:

- ☐ Formal application(s) to the notified body in accordance with Section 4.3, first subparagraph of Annex VII MDR for conformity assessment has/have been made or will be made/submitted by us to a notified body no later than 26 May 2024 for the device(s) listed in the attached schedule or its/their substitute(s) and signed written agreement(s) is/will be in place in accordance with Section 4.3, second subparagraph of Annex VII MDR before 26 September 2024.
- ☐ We do not intent to lodge an application for conformity assessment by 26 May 2024, therefore the transition period will end on 26 May 2024.

² The first condition is not applicable in case of devices for which the conformity assessment procedure pursuant to MDD did not require the involvement of a notified body, for which the declaration of conformity was drawn up prior to 26 May 2021 and for which the conformity assessment procedure pursuant to this Regulation requires the involvement of a notified body

Declaration, including the attached schedule, should be printed on form as used for a Declaration of Conformity per manufacturer's QMS (e.g. manufacturer's letterhead)

Declaration, including the attached schedule, should be printed on form as used for a Declaration of Conformity per manufacturer's QMS (e.g. manufacturer's letterhead)

☐ Expired/expires *after* 20 March 2023:

Choose one applicable statement:

☒ Formal application(s) to the notified body in accordance with Section 4.3, first subparagraph of Annex VII MDR for conformity assessment has/have been made or will be made/submitted by us to a notified body no later than 26 May 2024 for the device(s) listed in the attached schedule or its/their substitute(s) and signed written agreement(s) is/will be in place in accordance with Section 4.3, second subparagraph of Annex VII MDR before 26 September 2024.

☐ We do not intent to lodge an application for conformity assessment by 26 May 2024, therefore the transition period will end on 26 May 2024.

➤ **Upclassified devices**

In case of devices for which the conformity assessment procedure pursuant to MDD did not require the involvement of a notified body, for which the declaration of conformity was drawn up prior to 26 May 2021 and for which the conformity assessment procedure pursuant to this Regulation requires the involvement of a notified body:

Choose one applicable statement:

☐ Formal application(s) to the notified body in accordance with Section 4.3, first subparagraph of Annex VII MDR for conformity assessment has/have been made or will be made/submitted by us to a notified body no later than 26 May 2024 for the device(s) listed in the attached schedule or its/their substitutes and signed written agreement(s) is/will be in place in accordance with Section 4.3, second subparagraph of Annex VII MDR before 26 September 2024.

☐ We do not intent to lodge an application for conformity assessment by 26 May 2024, therefore the transition period will end on 26 May 2024.

➤ **Quality Management System (QMS)**

Choose one applicable statement:

☐ A QMS in accordance with Article 10(9) MDR will be put in place by no later than 26 May 2024.

☒ A QMS in accordance with Article 10(9) MDR is in place.

☐ A notified body has issued the attached certificate for the MDR-compliant QMS.

➤ **Device(s) as listed in the attached schedule**

- The device(s) continue to comply with the AIMDD or MDD.
- There are no significant changes in the design and intended purpose.
- The device(s) do not present an unacceptable risk to health or safety of patients, users or other persons, or to other aspects of the protection of public health.

Signed for and on behalf of the manufacturer:

Full Company Name: JIANGSU YUYUE MEDICAL EQUIPEMENT & SUPPLY CO., LTD.

Location & Date: Danyang 2023-9-26

Signature, Print Name, Title: Wu Guangming, Chairman

Declaration, including the attached schedule, should be printed on form as used for a Declaration of Conformity per manufacturer's QMS (e.g. manufacturer's letterhead)

Contact Details (at least email)

Mr Guangying



Declaration, including the attached schedule, should be printed on form as used for a Declaration of Conformity per manufacturer's QMS (e.g. manufacturer's letterhead)

Schedule of Devices

The above Manufacturer's Declaration is valid for the following devices:

Identification of the device(s)³ (e.g., device name, family/group name, device model or catalogue number)	Directive Certificate number(s) to which this confirmation is made (if applicable)	Original expiry date as indicated on the Directive Certificate (s) prior to the extension of the validity (if applicable)	Notified Body name and number that issued the Directive Certificate (if applicable)	Notified Body name and number where the MDR application was lodged/contract signed (if applicable)	End date of extended validity / transition period	Substitute Device(s) (if applicable)
<u>Positive Airway Pressure Units</u>	<u>G2 092486 0008 Rev.01</u>	<u>2024-5-26</u>	<u>TUVSUD0123</u>	<u>TUVSUD0123</u>	<u>31/12/2028</u>	
<u>Sleep apnea breathing therapy mask</u>	<u>G2 092486 0010 Rev.01</u>	<u>2024-5-26</u>	<u>TUVSUD0123</u>	<u>TUVSUD0123</u>	<u>31/12/2028</u>	

³ for devices with AIMDD/MDD certificate(s) the identification should be as in the certificate, and only if the certificate has a generic scope it should be as defined above)