



提交: □企业所在地省级食品药品监督管理部门

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Rev. 1

─器械注册/备案部门

## 医疗器械召回事件报告表

Medical Device Recall Reporting Form

のA学1491号 2012年4月15日

	and Drug Administratio tion / Record Departmen	n Department of Enterpris t	se's Location
产品名称 Product Name	乳房旋切穿刺针及 配件 Breast Biopsy Probe	注册证或备案凭证编码 Code of Registration or Record Certificate	国械注进 20173016309
生产企业名称 Name of Manufacturer	Bard Peripheral Vascular, Inc.		
代理人名称 Name of Agent	巴德医疗科技(上海)有限公司 Bard Healthcare Science (Shanghai) Co., Ltd		
召回单位负责人和联系方式,经办人和联系方式 The Name and Contact Information of Responsible Person and Handler of the Recall Implementing Unit  产品的适用范围	凌晓云 021-23254526 谭小燕 021-23254261 该产品主要用于乳房病	LTHCAP.	SUENCE (SHANG)
Application Scope of the Product	像下异常组织,供组织学检查使用。		
涉及地区和国家 The Countries and Regions Involved	韩国	召回级别 Level of Recall	III 三级
涉及产品生产(或进口中国)批次、 数量 The Batch Number and Quantity of Involved Domestic Product or Import Product	总进口数量: 0	涉及产品 型号、规格 The Model No. and Specification of Involved Product	型号: ECP017G

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		涉及产品在中国的销			
识别信息 (如批号)	批号: VTFT0349	售数量	总销售数量: 0		
Identifying Information		Sales Quantity of			
(e.g., Batch Number)		Involved Product In			
		Chinese Market			
召回原因简述	该产品的境外生产企业识别出,在乳房旋切穿刺针尖端发现了异物。				
Briefly Describe the Reason for Recall					
纠正行动简述					
(包括召回要求和处理方式等)	该涉及批号产品并未进口至中国,该召回事件不影响中国市场,故在				
Briefly Describe the Corrective	中国无需采取任何行动和处理措施。				
Activity (Including Recall	ENCE (CI)				
Requirements, Dealing Methods, etc.)					

报告单位: (盖章)

Reporting Unit: (Affix with Stamp)

负责人: 凌晓云

Responsible Person: (Signature)

报告人: (签字) 谭小燕

Reporter: (Signature)

报告日期: 2022年11月10日

Reporting Date: Kithin.

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