

Cressier, 10.02.2017

## Urgent: Field Safety Notice / 001-17

**Affected device:**

| Product Name                    | Catalog No      | Serial/ Lot No             | Expiry Date |
|---------------------------------|-----------------|----------------------------|-------------|
| ID-Dia (Diego) Positive         | 004134          | All lots currently in date |             |
| ID-DiaCell SF                   | 003640          |                            |             |
| ID-DiaCell Pool                 | 003630 / 003631 |                            |             |
| ID-DiaCell ABO/I-II *           | 003610          |                            |             |
| ID-DiaCell ABO/I-II-III *       | 003618          |                            |             |
| ID-DiaScreen I-II-III-IV-VP-VIP | 004316          |                            |             |
| ID-DiaCell I-II                 | 003613          |                            |             |
| ID-DiaPanel                     | 004114          |                            |             |
| ID-DiaCell I-II-III             | 004310          |                            |             |
| ID-DiaScreen I-II-III-IV        | 004311          |                            |             |
| ID-DiaCell I-II-III Asia        | 003614          |                            |             |
| ID-DiaScreen Prophylax          | 004330          |                            |             |
| ID-DiaPanel Plus 6              | 004414          |                            |             |
| ID-DiaCell I-II                 | 003613VJ        |                            |             |
| ID-DiaPanel (1-11)              | 004114VJ        |                            |             |
| ID-Dia Positiv                  | 004134VJ        |                            |             |
| ID-DiaCell I-II-III             | 004310VJ        |                            |             |

\* Vials ID-DiaCell I, ID-DiaCell II, ID-DiaCell III only (ID-DiaCell ABO out of scope)

Dear **Customer**,

This letter contains important information that requires your immediate attention.

**Description of the problem:**

We would like to share with you, and your team, information about unexpected reactions primarily on eluates and QC samples but also with some patient samples when using the above mentioned products.

This phenomenon is observed randomly between batches, and also within single batches.

**Impact on the patient:**

A risk assessment has been done, and the conclusion is that this unexpected result requires further confirmation testing before a final transfusion decision is made and. Negative results can be reliably accepted as negative.

**Immediate protective measure:**

In case of doubtful reactions, please re-test with a new kit. If the results remain in doubt, we would advise you to send the sample to a reference laboratory and if an urgent transfusion is required, perform a crossmatch.



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Fax: +41 (0)26 674 54 45

A team of internal and external experts has been and continues working to identify the root cause and determine corrective actions.

Further investigations are still ongoing and will continue until we can provide a solution.

Please note that the relevant European Regulatory Agency has been advised of this FSQA.

In case of questions, in the first instance, please contact our Customer Service Laboratory:

**slabor\_cressier@bio-rad.com**

Our representatives are briefed to help you manage this situation.

We apologize for any inconvenience that may have been caused by this action and we appreciate your prompt cooperation in this matter.

Yours sincerely,

Quality Assurance Director, Clinical  
Diagnostics Group - Europe

Agnes Eude Goethals

Vice President and General Manager,  
Immunohematology Division

Ann Madden

Please fill out and sign this document until 2017-02-17

**Urgent: Field Safety Notice / 001-17**  
**Reply Form for Customers**

**PRODUCT:**

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| ID-DiaPanel (1-11)              | 004114VJ        |                            |             |
| ID-Dia Positiv                  | 004134VJ        |                            |             |
| ID-DiaCell I-II-III             | 004310VJ        |                            |             |

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**CUSTOMER INFORMATION:**

|   |  |
|---|--|
| <b>Hospital / Laboratory</b>                  |  |
| <b>Address</b><br>(Street, Postcode, Country) |  |
| <b>Phone Number</b>                           |  |
| <b>Undersigning manager name</b>              |  |
| <b>Customer Account Number</b>                |  |

**STATEMENT:**

I have read and understood this Field Safety Notice, and shared the information with laboratory staff.

**Date:** .....

**Signature:** .....