PRE-PURCHASE QUESTIONNAIRE

EXTENDED FORM PPQ - Jan 2004

Produced by NHS Purchasing and Supply Agency, Scottish Healthcare Supplies, Northern Ireland CSA Regional Supplies Service and Welsh Health Supplies in conjunction with the Association of British Healthcare Industries

This form is intended to supply prospective purchasers with information about equipment being considered for purchase. It is intended principally for pre-purchase information on electrical medical, dental, ophthalmic and laboratory equipment. The form may also be used for other products, including non-electrical items, and to give information prior to equipment being supplied on loan, in which case not all the questions will be relevant. Please ensure all relevant questions are answered.

For	issue c	and complet	ion by purchaser: P	PQ Master F	Reference:								
A u	nique r	eference (pr	referably ten character.	s maximum) n	nust be given by	the supplier:	Supplier	's Reference:	PP8060				
Ger	neric De	evice Type:	Oxygen Hood	d		Equipment	Model:	Size 3					
Country of Origin: U.K.						Manufactur	rer:	Viamed Ltd	ł				
Sup	plier:		Viamed Limit	ed		Telephone	No:	015356345	542				
Fax	No:		01535635582	2		e-mail:		info@viam	ed.co.uk				
CE N	IARK	ING											
1.	a)		roduct carry the CE ma	rking?						YES	X	NO	
	b)	CONSIDERATION OF THE PROPERTY											
		i) Active Implantable Medical Devices Directive (90/385/EEC)								YES			
		ii) Medical Devices Directive (93/42/EEC)							YES	X			
		If YES, state classification of device (93/42/EEC Annex IX)								lla			
		iii) In Vitro Diagnostic Medical Devices Directive (98/79/EC)								YES			
	If YES, is the device: For self-testing? YES Covered by Annex II: List A? YES List B? YES NO												
		For ii) and	iii) above, Identification	on No. of Noti	ified Body, if ap	plicable				800	6		
			C Directive (89/336/EE	eval been deen deer de en de	ding directive))					YES			
			Voltage Directive (73	-						YES			
		vi) Othe	er Directive(s) (please	specify)									
2.	a)	Is the product a 'custom-made device' (93/42/EEC)?								YES		NO	X
	b)		uct intended for 'clinic	Section and a little section in					?	YES		NO	Х
		If YES to a	a) or b) above, does the	device comp	ly with the UK I	Medical Devices	Regulati	ons?		YES		NO	1
MAN	NAGEN	MENT SYS	TEM STANDARDS										
3.	a)	ls the manufacturer currently registered to any management system standards (eg ISO 9001, ISO 14001, ISO 13485)? YES X											
		If YES, ple	ease state the standard(s) and certific	ation body:	SO 9001/200	08, ISO	13485/200)3				
	b)		lier's service and repair		00 S G	The second secon		- CONTROL OF CHILDREN OF WHILE OR		YES	Х	NO	45
		If YES, ple	ease state the standard(s) and certific	ation body: [IS	SO 9001/200	08, ISO	13485/200)3				
SAF	ETYS	TANDARD	s										
4.	For p	roducts not	CE marked to 1 b) i), ii) or iii) above	e, with which sat	fety standard(s)	does the p	product comply:	?				
		S	Standard	4	Test House		Certificate Number			Date			
				- No.									
	-												-
			INSTALLATION	nonconon T	Tarana IV	7	580	v v 5 89		1	84 S :		
5.	Is se		information available?	YES	NO X			tate current pric		J	dicate con	1	
(Please state YES, NO or N/		37/41	ull circuit diagrams	N/A	Fault finding		N/A		tative mainten		Director and the second		/A
		_ K	Repair information N/A Spare parts listing N/A List of special tools/te							est equi	pment/etc	N.	/A
If YE	S, plea	se state whe	ether also available on:	Disk	Website	If Web, plea	ase state a	address					
6.	a)	In addition	In addition to the service/repair information/manual, will training be required before competent technical personnel can provide										
		(Please sta	(Please state YES, NO or N/A) First-line maintenance N/A							Cal	Calibration N/A		
		Planned preventative maintenance N/A								Repair N/A			
	b)	Is the supplier able to provide this training for the purchaser's or a third party's technical personnel? YES NO X										X	
			Il this be free of charge ase indicate if details of		Or chargeable?		ainina ar-	availabla an	quest ⁹	YES		NO	
		n NO, pież	ise muicate ii detaiis 01	an organisati	ion mat is able to	o provide tilis tra	annig are	avanabie on re	quest:	1 E2		NO	X

		Supplier's Reference: PP8060								
	2)	Is the provision of service/repair information conditional upon completion of training?								
	c) d)	Is the provision of service/repair information conditional upon completion of training? In order to undertake maintenance/repair/calibration, is any special software/test equipment/tooling required? YES NO X Y Y Y Y Y Y NO X NO X Y NO X NO NO								
	u)	If YES, please indicate that details of special software/test equipment/tooling are provided on a separate sheet: YES								
7.	a)	Is the supplier able to provide an 'as required' repair/maintenance service in the UK? YES X NO								
	b)	Is the supplier able to provide a contract repair/maintenance service?								
		If YES, please confirm that details of repair/maintenance contracts are provided on a separate sheet.								
	c)	i) If repairs are normally performed by the supplier on the purchaser's site, please state typical response time:								
		ii) If repairs are performed off-site, where will these be carried out?								
		Company: Viamed Ltd Location: Keighley Typical turnround time: 10-14 Days								
		iii) Is free of charge loan equipment normally available?								
0	DI	VES V NO								
8.		se state if repair parts will be available to the purchaser's or a third party's suitably trained and equipped personnel: YES X NO								
	II YI	ES, is the supply of repair parts conditional upon acquisition of repair information? YES Or training? YES NOX								
9.	Plea	se indicate when this model was first placed on the market:								
10.	a) I	For how many years from the date of last manufacture is the supply of spare parts guaranteed? 7 Years								
	b) I	s the product still in current production? YES X NO If NO, indicate year of last manufacture:								
11.		stallation necessary? YES NO X								
	If YI	S, please confirm that details of all services required are provided on a separate sheet: YES								
12.	Will	software upgrades be notified? N/A YES NO								
ION	ISINO	GRADIATION								
13.		s the product contain a source of ionising radiation or is it capable of emitting ionising radiation?								
DEC										
		AMINATION / REPROCESSING Will the inverse to the control of the first of a stable of the control of the contro								
14.	a)	i) Will the item be reprocessed (cleaned, disinfected, sterilised)? YES X NO If NO, go to Question 15.								
		ii) If YES, is the item intended to be: Non-sterile for single use Sterilised Disinfected Other Cleaned								
		iii) Is there a recommended maximum number of uses? YES NO If YES, please state:								
		iv) Are decontamination/reprocessing instructions supplied? v) Are instructions available for safe disposal? YES X NO Y NO Y								
	L .	A								
	b)	i) Is manual cleaning the only cleaning method specified before further reprocessing? YES X NO What is the manufacture that can be used for the read disinfection?								
		ii) What is the maximum temperature that can be used for thermal disinfection? Temp: iii) Are there any restrictions on detergent/disinfectant types? YES X NO If YES, please state: Mild detergents only								
		iii) Are there any restrictions on detergent/disinfectant types? YES X NO If YES, please state: Mild detergents only iv) Can the item withstand autoclaving at 137 °C for 3 mins? YES NO X								
		v) Is the item compatible with other sterilization methods? YES NO If YES, please state:								
		vi) Does reprocessing require the use of specified equipment? YES NO X								
		If YES, please state equipment type (eg containers, processors, etc) and, where appropriate, parameters of operation (eg temp, pressure, etc):								
		11 123, please state equipment type (eg containers, processors, etc) and, where appropriate, parameters of operation (eg temp, pressure, etc).								
	c)	i) Are tools required to aid dismantling/reassembly, or are lubricants required?								
		ii) If YES, are they supplied with the device or available optionally? Supplied Optional Neither X								
	d)	Is decontamination/reprocessing training available? YES NO X If YES will this be: Free of charge? Chargeable?								
	e)	Are reprocessing instructions available on the Web? YES NO X If YES, please state address:								
WAI	RRAN	TTY								
15. Please confirm that a copy of the warranty is provided on a separate sheet: YES X										
DECLARATION When reference is made to this form and its attachments within the process of obtaining the item, we agree that the purchaser will be entitled to rely upon the										
contents and subsequent non-compliance with the statements contained herein will entitle the purchaser to seek redress.										
Name: Derek Lamb Position: Managing Director										
Co	npany	/Address:Viamed Ltd, 15 Station Road, Cross Hills, Keighley, Date: 13/Dec/2011								
	West Yorkshire, BD20 7DT Date: 13/DeC/2011									