Welch Allyn[®]

DECLARATION OF CONFORMITY

Corporate Headquarters Welch Allyn, Inc. 4341 State Street Road Skaneateles Falls, NY 13153 USA Phone: 800.535.6663 Fax: 315.685.3361 www.welchallyn.com

SAP DIR No.:

80020143 Version: A

Manufacturer's

Welch Allyn, Inc.

Name and

4341 State Street Road

Business

Skaneateles Falls, NY 13153

Address:

I, Paul G Oris. Hereby declare that the below mentioned medical device

(i) complies with all the requirements under the Act;

has been classified according to the classification rules as specified in First Schedule on (ii) Rules of Classification of Medical Device; and

conforms to requirements specified in APPENDIX 1 of Third Schedule on Essential Principles for Safety and Performance of Medical Devices under Medical Devices Regulations 2012.

Particular of

Product name: Welch Allyn Spot Vision Screener

Medical

Brand/model:

Device(s):

901029 Vision Screener Country of origin: USA

Manufacturing

Welch Allyn, Inc.

Site:

4341 State Street Road

Skaneateles Falls, NY 13153, USA

Risk-based

Class A, rule 12

Classification:

GMDN code

46390 Visual Screening Analyser

Quality Management

Certificate Number: 314505 MP2012

System Certificate:

Issue Date: 2013-12-09 Expiry Date: 2016-12-08

QMS Standard: EN ISO 13485:2012 + AC: 2012

Certification Body: DQS Medizinprodukte GmbH

Standards Applied:

EN 60601-1

Medical Electrical equipment -Part 1: General requirements for Safety.

EN 60601-1-2

Medical electrical equipment – Part 1-2: requirements for safety - Collateral Standard Safety

requirements for medical electrical systems.

ISO 15004-2

Ophthalmic instruments-- Fundamental requirements and test methods: Part 2:Light hazard Protection

I am fully responsible with all the information provided in this declaration. This declaration of conformity is valid from: 03-March-2015.



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I fully understand and acknowledge that it is an offence under Section 76 of the Medical Device Act 2012 [Act 737] to make, sign or furnish any declaration, certificate or other document which is untrue, inaccurate or misleading.

Authorised Signatory:

Paul G. Oris, Regulatory Affairs Representative

Date (Year-Month-Day)