Attachment

Report on the results of confirmation of package inserts regarding reusable medical devices

Please send the report by email to md-safety-info@pmda

For Inquiries on the Notification：Pharmaceutical Safety Division, Pharmaceutical Safety and Environmental Health Bureau, Ministry of Health, Labour and Welfare email：ISEANZEN@mhlw.go.jp

Date of submission	Number of products to be manufactured and sold	Number of products subject to self-inspection (Fill in the number of the products which can be contacted with the brain, spine, dura mater, cerebral ganglion, spinal ganglion, retina or optic nerveganglion)	Number of products for which the package inserts has been revised or needs to be updated in the future as a result of self-inspection	Number of products for which the package inserts has been revised or needs to be updated in the future as a result of self-inspection	Scheduled date of revision of package inserts of products for which the package insets have not been revised	Name of medical device marketing authorization holder	Name of the contat person of medical device marketing authorization holder	Contact address (TEL)	Contact address (e-mail)
DDMMYYYY	N products	N products	N products	N products	untill end of MM	XXXXXX	XXXXX		