

URGENT FIELD SAFETY NOTICE

GE Healthcare

3000 N. Grandview Blvd. - W440 Waukesha, WI 53188, USA

<Date of Letter Deployment>

GEHC Ref# 34098

To: Chief of Anesthesia

Director of Biomedical / Clinical Engineering

Health Care Administrator / Risk Manager

RE: Aisys CS² anesthesia devices with software version 11 and Aisys anesthesia devices upgraded to software version 11 with End Tidal Control option (when Et Control auto-exits during Pause Gas procedure agent delivery is off and fresh gas total flow is 10 L/min, resulting in the agent concentration quickly decreasing).

This document contains important information for your product. Please ensure that all potential users in your facility are made aware of this safety notification and the recommended actions.

Please retain this document for your records.

Safety Issue

Aisys CS² anesthesia devices with software version 11 and Aisys anesthesia devices upgraded to software version 11 can, on rare occasions involving a non-typical workflow, fail to deliver the set agent concentration in End Tidal Control (Et Control) if Et Control is automatically exited while a Pause Gas Flow procedure is in progress. Following the auto-exit in this situation, if the clinician re-enters Et Control, agent delivery will not function. Fresh Gas Control delivery mode is not affected.

If this situation occurs, the anesthesia device does not immediately notify the user of the error and the agent delivery remains off while in Et Control despite the agent setting showing a non-Off value. The fresh gas flow changes to 10 L/min during this condition, which purges agent out of the breathing system causing under delivery of agent. The anesthetic gas concentration might become insufficient potentially leading to awareness. There have been no injuries reported as a result of this issue.

Safety Instructions

You can continue to use your anesthesia device.

If the above issue occurs, use one of the methods below to resolve the issue:

Option 1: Exit Et Control to Fresh Gas Control mode which allows manual control of fresh gas flows and anesthetic agent concentration,

Option 2: Re-enter Et Control and start and stop a Pause Gas Flow procedure, or

Option 3: Turn the anesthesia device off and back on.

Affected Product Details

All upgraded Aisys anesthesia devices (i.e. Aisys devices upgraded to software version 11SP01 or 11SP02) and Aisys CS² anesthesia devices with software version 11SP01 or 11SP02 (GTIN: 840682102292) and Et Control option.

Note: Software versions other than 11SP01 and 11SP02 are not affected. Anesthesia devices without the Et Control option are not affected.

Product Correction

GE Healthcare will correct all affected products at no cost to you. A GE Healthcare representative will contact you to arrange for the correction. If your site has not yet received the correction from Ref# 34094, those updates will be included in this correction.

After the GE representative has updated your system to Aisys CS2 11 SP03, any earlier versions of Aisys CS2 11 software media on site should be destroyed.

Contact Information

If you have any questions or concerns regarding this notification, please contact GE Healthcare Service or your local Service Representative.

GE Healthcare confirms that this notice has been notified to the appropriate Regulatory Agency.

Please be assured that maintaining a high level of safety and quality is our highest priority. If you have any questions, please contact us immediately per the contact information above.

Sincerely,		
GE Healthcare	GE Healthcare	



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MEDICAL DEVICE NOTIFICATION ACKNOWLEDGEMENT RESPONSE REQUIRED

Please complete this form and return it to GE Healthcare promptly upon receipt and no later than 30 days from receipt. This will confirm receipt and understanding of the Medical Device Correction Notice Ref# 34098. Customer/Consignee Name: Street Address: City/State/ZIP/Country: **Email Address:** Phone Number: We acknowledge receipt and understanding of the accompanying Medical Device Notification, and that we have taken and will take appropriate actions in accordance with that Notification. Please provide the name of the individual with responsibility who has completed this form. Signature: Printed Name: Title: Date (DD/MM/YYYY): Please return completed form scanning or taking a photo of the completed form e-mailing to: Recall34098.SP03SW@ge.com You may obtain this e-mail address through the QR code below: