

[Month DD, YYYY]

via FedEx

**URGENT FIELD SAFETY NOTICE  
MEDICAL DEVICE CORRECTION**

**Datascope Cardiosave Hybrid and Rescue Intra-Aortic Balloon Pumps (IABP)**

Product Description:	Product Code/Part Number:	UDI Code:
Cardiosave Hybrid	0998-00-0800-31 0998-UC-0800-31	10607567109053 N/A
Cardiosave Hybrid	0998-00-0800-32	10607567111117
Cardiosave Hybrid	0998-00-0800-33 0998-UC-0800-33	10607567109008 N/A
Cardiosave Hybrid	0998-00-0800-34	10607567111940
Cardiosave Hybrid	0998-00-0800-35	10607567109107
Cardiosave Hybrid	0998-00-0800-45	10607567108421
Cardiosave Hybrid	0998-00-0800-52 0998-UC-0800-52	10607567108438 N/A
Cardiosave Hybrid	0998-00-0800-53 0998-UC-0800-53	10607567108391 N/A
Cardiosave Hybrid	0998-00-0800-55 0998-UC-0800-55	10607567108414 N/A
Cardiosave Hybrid	0998-00-0800-65	10607567113432
Cardiosave Rescue	0998-00-0800-75	10607567112312
Cardiosave Rescue	0998-00-0800-83	10607567108407
Cardiosave Rescue	0998-00-0800-85	10607567113449

Distributed Affected Lot Number:	All
Manufacturing Dates:	Since December 2011
Distribution Dates:	Since March 06, 2012

Dear **Hospital Contact**,

Datascope Corp., a subsidiary of Getinge is initiating a voluntary Medical Device Correction for the Cardiosave Hybrid and Cardiosave Rescue Intra-Aortic Balloon Pump (IABP) due to an issue that could affect IABP performance:

An unexpected shutdown of the IABP may occur due to the loss of communication between the Executive Processor PCBA and the Video Generator PCBA.

## **Unexpected Shutdown due to loss of communication between the Executive Processor PCBA and the Video Generator PCBA.**

### **Identification of the issue:**

As part of an ongoing investigation into unexpected shutdown of the Cardiosave IABP, the Datascope/Getinge Investigation team determined there is a correlation between unexpected shutdown complaints and the loss of communication between the Executive Processor PCBA and the Video Generator PCBA. The loss of communication results in the IABP displaying error code 111 and error code 112.

Code 111: A local Virtual Address Space (VAS) Watch Dog Timer (WDT) Failure

Code 112: A main application Watch Dog Timer (WDT) Failure

Datascope/Getinge has received 28 reported complaints of Code 111 and/or Code 112 occurrences resulting in unexpected shutdown over a 2 year period.

There have been 0 adverse events reported.

### **Risk to Health:**

An unexpected shutdown and resulting interruption to therapy may threaten the hemodynamic stability of the supported patient as the user is left unaware to the status of the Cardiosave IABP.

### **User Actions to be taken now:**

1. Should you experience an unexpected shutdown of Cardiosave IABP during therapy, or a present frozen or black screen, utilize another IABP to continue therapy. Until an alternative IABP is located you may attempt to restart the IABP. If the IABP remains non-operational, immediately remove from the patient care environment for further product evaluation.
2. If your device remains inoperable, please contact your service representative to identify the cause and take the necessary actions required.

### **Type of Action by the Company:**

Datascope/Getinge is developing a software correction to address this issue. Once available, a Datascope/Getinge service representative will contact you to schedule the installation of the updated software. This work will be done at no cost to your facility.

**Actions to be taken by the User related to all issues provided in this notification:**

A review of our records indicates that you may have a Cardiosave Hybrid and/or Cardiosave Rescue Intra-Aortic Balloon Pump (IABP) in your facility. Please examine your inventory immediately to determine if you have any Cardiosave Hybrid and/or Rescue IABPs.

Please complete and sign the attached URGENT FIELD SAFETY NOTICE MEDICAL DEVICE CORRECTION - RESPONSE FORM (Page 4) to acknowledge that you have received and understand this notification. Return the completed form to Datascope/Getinge by e-mailing a scanned copy or by faxing the form to your local Datascope/Getinge Representative or office.

**Please forward this information to all current and potential Cardiosave Hybrid and/or Cardiosave Rescue Intra-Aortic Balloon Pump (IABP) users within your hospital/facility.**

**If you are a distributor who has shipped any affected products to customers, please forward this letter to their attention for appropriate action**

This voluntary correction notification only affects the products listed on page 1; no other products are affected by this voluntary correction.

We apologize for any inconvenience this Medical Device Correction may cause. If you have any questions, please contact your local Datascope/Getinge Representative or office.

Sincerely,

[FULL NAME]  
[TITLE]  
Getinge

[Month DD, YYYY]

**URGENT FIELD SAFETY NOTICE**  
**MEDICAL DEVICE CORRECTION – RESPONSE FORM**  
**Datascope Cardiosave Hybrid and Rescue Intra-Aortic Balloon Pumps (IABP)**

[ADD ACCOUNT#  
 FACILITY NAME  
 STREET ADDRESS  
 CITY, STATE, ZIP CODE]

I acknowledge that I have reviewed and understand this Urgent Medical Device Correction Letter regarding unexpected shutdown due to loss of communication between the Executive Processor PCBA and the Video Generator PCBA related to the affected Cardiosave Hybrid and Rescue Intra-Aortic Balloon Pump(s) (IABP(s) at this facility.

I confirm that all users of the Cardiosave Hybrid and Rescue Intra-Aortic Balloon Pump(s) (IABP(s) at this facility have been notified accordingly.

Please provide the required information and signature below.

**Facility Representative Information:**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Title: \_\_\_\_\_ Department: \_\_\_\_\_

Hospital Name: \_\_\_\_\_

Address, City and State: \_\_\_\_\_

We have scrapped our Cardiosave Hybrid and Rescue Intra-Aortic Balloon Pump(s):  
 Circle one **YES NO** If yes, list **Serial Numbers:** \_\_\_\_\_

We have sold/moved our Cardiosave Hybrid and Rescue Intra-Aortic Balloon Pump(s) to another facility:  
 Circle one **YES NO** If yes, list **Serial Numbers:** \_\_\_\_\_

**If you answered YES above: please provide new facility information below.**

**New Facility Name:** \_\_\_\_\_

**New Facility Address:** \_\_\_\_\_

**New Facility Contact Name:** \_\_\_\_\_ **New Facility Phone #:** \_\_\_\_\_

Return the completed form by **FAX to XXXXXXXX** or by EMAIL to **xxxxxxxxx@getinge.com**