

Plier grinding service-return form

Customer-ID:

Date:

RMA No.:

Part. No.	Product description	LOT No.	Quantity

EXCLUSIVELY DECONTAMINATED AND PROCESSED PLIERS ARE ACCEPTED

I herewith confirm that: (please tick the appropriate box)

- the attached medical device has NOT come into contact with blood or body fluids and is hygienically harmless.
- the attached medical device has come into contact with blood or body fluids. It has been cleaned and decontaminated:
 - Steam sterilisation (134°C for 3 minutes or 121°C for 15 minutes)
 - Other procedure (please describe):
- the attached medical device did NOT need to be decontaminated, as it was not in medical use.

In case of further questions, please contact:

Name: _____ Phone no.: _____ E-mail: _____

Sterilized by:		Signature:		Plain writing:	
Date:		Practise stamp:		Date:	