1-901-396-2121 1-800-821-5700 www.smith-nehew.com



Urgent Medical Device Recall Notice R-2018-37

December 13, 2018						
<insert address=""></insert>						
This letter is to inform you that Smith & Nephew Inc., have voluntarily initiated a recall to remove a single lot of JOURNEY DCF AP Femoral Cutting Blocks Size 3, due to a manufacturing error. The knob on the affected devices was laser etched on the wrong side.						
Please see product details below:						
Product Number	Description	Batch Number				
74012413	JOURNEY DCF AP Femoral Cutting Block Size 3	18BM19943				
Shipment Date: 5/1/2018 – 6/8/2018 Potential Risk of Use of the Product In the event the affected device is presented for use, the surgeon would notice that the device is not in the neutral position. The surgeon would make the required adjustments to ensure the appropriate cuts are made. Therefore, the use of or exposure to the affected device presents a low risk of adverse health consequences.						
Required Actions: • Please follow the instructions on the attached Response Form.						
Enclosure: Response Form						

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December 13, 2018

<Insert Address>

PLEASE COMPLETE ALL ITEMS AND RETURN WITHIN 5 DAYS OF RECEIPT	

Required Actions:

No Product to Be Returned

- 1. Please inspect your inventory and locate any devices from the listed product and batch numbers on the first page of this Field Action Notification, and quarantine them immediately.
 - If you are a distributor, you must notify your customers of the field action and ensure that these actions are carried out.
- 2. If you have no product to return, please put an X in the appropriate location below.
- 3. If you have product to return, please list the item, batches and quantities that you are returning in the appropriate boxes below
- 4. Complete the remainders of the form sign and send to <u>FieldActions@smith-nephew.com</u> or fax to 901-566-7975. **Please Note** even if you have no product to return, this form must be completed, signed and returned.
- 5. Once the form is received by Smith & Nephew, you will be sent a Return Authorization (RA) number.

If you have any questions or concerns regarding this recall please contact FieldActions@smith-nephew.com.

Account #/	Product Part Number	Batch Number	Quantity of Units to be	RA Number
District Office Name			Returned	(for internal use only)
	_l	L	I.	L

Email:______ Telephone: (___) ____-__

We hereby confirm that we are aware of this Medical Device Field Action and it has been communicated within our organization.

Printed Name (required): _______Title: _____

Signature (required):______ Date (required):____/___/

Return affected product to: Smith & Nephew | Attn: Global Field Actions | Building G, 1450 Brooks Rd. East | Memphis, TN 38116