

## Liquid Assayed Specific Protein Controls

**Date:** 03 May 18

**Complaint Reference: REC326** 

Action Type: Device Modification

#### **Detail on Affected Devices:**

Our records indicate that your facility may have received the following product.

Assay	Catalogue Number	GTIN		
Liquid Assayed Specific Protein Controls	PS2682	05055273204896 05055273204902 05055273204919		
	PS2683 PS2684			

#### Reason for Recall:

Randox have confirmed that Free Kappa light chains in our Liquid Assayed Specific Protein Controls increase over shelf life of the product.

### Risk to Health:

The quality control results which are not within range can lead to a delay in reporting Free Kappa Light Chains results.

Free kappa light chains are used as an aid in diagnosis of monoclonal gammopathy of undetermined significance and for Multiple Myeloma through review of the ratio with free lamda chains. A short delay in reporting this result would not prevent diagnosis of these progressive diseases and therefore is unlikely to pose an immediate risk to health.

#### Action to be taken:

- Discuss the contents of this notice with your Medical Director.
- Place a copy of the important notice and updated IFU into any remaining stock.
- Complete and return the vigilance response section of this form to technical.services@randox.com within five working days.)



# Liquid Assayed Specific Protein Controls

**Transmission of Field Safety Notice:** Send a copy of the FSN to all affected customers and to those who need to be aware within your organisation.

### **Contact Reference:**

Randox Technical Services Randox Laboratories Ltd, 55 Diamond Road, Crumlin, United Kingdom, BT29 4QY

Email: technical.services@randox.com

Tel: +44 (0) 28 9445 1070 Fax: +44 (0) 28 9445 2912

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Please accept our apologies for any inconvenience caused. Thank you for your patience and understanding. If you have any questions or concerns please contact Randox Technical Services.

The undersigned confirms that this notice has been notified to the appropriate Regulatory Agency



# Liquid Assayed Specific Protein Controls

Vigilance Response Form (Response Plan must be completed by the importer of the device)

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Importer Details									
Company Name									
Address									
f,									
Total Quantity									
Received									
Distributed									
Area of Distribution (To be completed by	Distrib	outors	and Rar	ndox Off	īces)				
Consignee	Country		Quantity Received		Analyser Serial Numb	er	Replacements Required		
I have read and under	rstood	the Uı	gent Fie	eld Safet	y Noti	ce. The	e actions to be	taken a	are completed.
Completed By								Date	
Contact		Tel	ĺ			Email			

