

SUSPICIOUS LASER PRODUCT PROTOCOL (SLaPP)

This form contains a self-directed documentation process which assists in the disposition of laser-based products which appear to be non-compliant.

Person Completing Form/POC	
Organization	
Address	
City, State, Zip	
Phone/FAX/Email	
Product Description	
Model/Stock Number/Serial No	
Manufacturer	
Address	
Phone/FAX/Email	
Purchase Price	
Purchase Date/Delivery Date	
Third Party Assembler/POC	
Organization	
Address	
City, State, Zip	
Phone/FAX/Email	

Upon suspicion of non-compliance and/or safe laser device or product, complete the following steps. POC **must** initial each step, supervisor/manager **must** sign completed form.

STEP ID	TASK	COMPLETED (POC Initials)	NOTES (keep track of call dates/times with vendors)															
01	DEACTIVATE/REMOVE POWER FROM PRODUCT- This includes physical separation of power cords and batteries from product	_____																
02	SEQUESTER INTO A SECURE AREA- Transfer into an area or container and secure with lock.	_____																
03	CREATE ISOLATED SECURE AREA TO PERFORM TESTS- Create or isolate a Class IV/4 LCA	_____																
04	TAKE PICTURES- Take pictures to document device or product- do so with a scaling element in frame	_____																
04a	Front (port aimed camera)	_____																
04b	Rear (port aimed away from camera)	_____																
04c	Top (port on right side)	_____																
04d	Side (port on right side)	_____																
05	TAKE MEASUREMENTS- Using appropriate Photometer-based test equipment, and as stipulated by 21CFR1040.10/11 (e- Tests for determination of compliance) and/or IEC/EN60825 (Section 5- Determination of the accessible emission level and product classification), test emission five (5) times	_____	<table border="1"> <thead> <tr> <th>EQ</th> <th>Mfg</th> <th>Model</th> <th>Stk #</th> <th>S/N</th> </tr> </thead> <tbody> <tr> <td>Meter</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Sensor</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	EQ	Mfg	Model	Stk #	S/N	Meter					Sensor				
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5.01	Test Data Point 01	_____	
5.02	Test Data Point 02	_____	
5.03	Test Data Point 03	_____	
5.04	Test Data Point 04	_____	
5.05	Test Data Point 05	_____	
06	MAKE DETERMINATION - Does the product emit what was advertised (and is stated on labeling and documentation)? <input type="checkbox"/> YES <input type="checkbox"/> NO Are the labels correct and in the proper locations? <input type="checkbox"/> YES <input type="checkbox"/> NO If BOTH YES, then introduce into organization with the proper tracking and cognizance (supervisor/manager signature in Notes section). If not, continue to 07 below.	_____	
07	NOTIFY THIRD PARTY ASSEMBLER, DISTRIBUTOR AND/OR VENDOR - Let the assembler/distributor/vendor know the product, as you have determined, is NOT compliant to US and/or EU standards. Do they have an accession number? <input type="checkbox"/> YES <input type="checkbox"/> NO If YES (record in Notes), will they take the product back and correct the issues? <input type="checkbox"/> YES <input type="checkbox"/> NO If BOTH YES, then return to vendor. If not, continue to 08 below. <i>(it may be possible that installation results in a modification of the original product under 21CFR1040.10(i).)</i>	_____	
08	ALERT APPROPRIATE AGENCIES - Contact the appropriate federal, state, and local authorities	_____	
8.01	(FDA-CDRH) PHONE 800-638-2041 EMAIL radhealthcustomerservice@fda.hhs.gov MAIL U.S. Food and Drug Administration Center for Devices and Radiological Health Document Mail Center – WO66-G609 10903 New Hampshire Avenue Silver Spring, MD 20993-0002 Both EMAIL and MAIL Submit with header on a letter containing the form or a cover sheet may include: “Laser Products Trade Complaint – Please forward to the Branch Chief for Magnetic Resonance and Electronic Products in OIR/DRH” NOTE An assessment of the laser product should be made to the rest of the FDA general and laser performance standard (21CFR1010; 1040.10(f), (g), (h), and (i); & 1040.11. Alternatively, IEC 60825-1, Edition 2 may be used as per LN 50: http://www.fda.gov/downloads/MedicalDevi ces/.../ucm094366.pdf)	_____ _____ _____ _____ _____	

8.02	(State/Local)-Contact specific state and/or local authorities as necessary. <table border="1" style="width: 100%;"> <tr> <td style="width: 15%;">PHONE</td> <td></td> </tr> <tr> <td>EMAIL</td> <td></td> </tr> <tr> <td>MAIL</td> <td></td> </tr> </table>	PHONE		EMAIL		MAIL			
PHONE									
EMAIL									
MAIL									
09	DETERMINE DISPOSITION - Discuss state of compliance with all stakeholders involved with its selection, acquisition, and use.								
9.01	If it is determined the product is non-compliant and/or unsafe (and manufacturer will not make compliant), It will be used under specific circumstances, and a permanent label bearing the words "THIS PRODUCT IS NON-COMPLIANT WITH US AND INTERNATIONAL STANDARDS, WILL NOT LEAVE THIS FACILITY, AND NOT BE INTRODUCED INTO COMMERCE" shall be applied on a prominent surface in a position such that it does not expose the reader to the emission of the laser.								
9.02	Review and determine if any action is required as per 21CFR1003 (Notification of Defects or Failure to Comply) and/or 21CFR1004 (Repurchase, Repairs, Or Replacement of Electronics Products). If so, coordinate with any/all stakeholders.								
10	NOTE DECISION AND DISPOSITION - In order to ensure a complete process, note final disposition in note field, attach communications (email, physical letter) or note who, date, time)								

LSO

Signature Date

Print Name

Supervisor/Manager

Signature Date

Print Name