

A must in Medical Chain

Submission form - Laboratory analysis

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SUBMISSION FORM - LABORATORY ANALYSIS

to be sent prior to you shipment to Medistri SA at lab@medistri.swiss for laboratory analysis

CUSTOMER REFERENCES					
Company's name			Contact person (your reference)		
Address (street, n°)			PLZ / postcode, City , Country		
E-mail address for sending of certificates			E-mail address for sending of invoices		
Customer, requirement, need		Pharma level Medical device		Medical device I	evel
ORDER DETAILS					
express standard					
Orders are processed upon receipt (working days), in priority and according to the m charged. Certificates are only released on working days.		imum deadlines TAT (see price list). An additional 25% will be Orders are processed during business days, according to our analysis sch Certificates are only released on working days.		edule	
Products		IT / individual tests PT / pooltest (precise the quantity of products)	Samples storage conditions		 ☐ frozen (min20° C) ☐ refrigerated (2 to 8° C) ☐ room temperature (15 to 25° C)
Tests to be performed according to GLP (extra charge)		□ yes □ no	Sterilisation conditions of samples		 non-sterile sterile sterilisation to be performed by Medistri SA (□ EtO □ Steam □ other :)
Samples disposition after analysis		discard return keep the samples during : (nb days)	Have you received an offer from Medistri ? (if yes, please mention the offer reference n° ; if no, don't hesitate to ask for one)		□ yes □ no #
Language of the final report		englishfrench	Certificate of analysis *		 one report for each sample one report per kind of analysis
INFORMATIONS REGARDING THE SAMPLES					
Quantity	Analysis to perform (code Medistri or description)	Name / lot n° of the sample (your référence)	IT	РТ	Remarks/Validation Report
SAFETY DECLARATION					
Is there any chemical, drugs, toxic substances or explosive products inside your products / box ? VES NO (if yes, please join the <u>Safety Data Sheet</u> , cross the concerned <u>pictogrammes</u> below and precise the <u>UN code</u> :)					
Image: Second					
FINALISATION AND S			.		c
By its signature, the customer confirms that all the form are correct and agrees with Medistri's gene (available on : www.medistri.com/en/general-terms-and-conditions)		eral sales conditions	Date		Signature
TO BE FILLED BY MED	DISTRI SA ONLY		l		
Date de réception		Nombre de paquets reçus		Signature opérateur	
Heure de réception		Nombre d'échantillons reçus		Medistri SA	
		□ Bon état		I <u> </u>	Plus-value administrative
Etat des échantillons à la réception		Dommage mineur	Actions et plus-values		Plus-value manipulation
		Dommage majeur			Envoi des photos des dommages au client (préciser la date :)
N° de labo-batch			* In case of results supported by specific regulatory limits (chemical residues, biological response), the test is evaluated as "conform" if the result (including the measure uncertainty) is within the specified limits. The test is evaluated as "non-conform" for any other result (potentially non-		

conform or strictly non-conform).

Title