DEPARTMENT OF HEALTH AND HUMAN SERVICES FOOD AND DRUG ADMINISTRATION			
DISTRICT OFFICE ADDRESS AND PHONE NUMBER Food and Drug Administration, Bldg. 20, Denver Federal Center P.O. Box 250087, Denver, Colorado 80225-0087 303-236-3000	DATE(S) OF INSPECTION 3/26/02-4/15/02 FEI NUMBER 1718873		
NAME AND TITLE OF INDIVIDUAL TO WHOM REPORT IS ISSUED	1710073		
To: Kevin L. Cornwell, CEO and President			
FIRM NAME Utah Medical Products, Inc.	STREET ADDRESS 7043 South 300 West		
CITY, STATE AND ZIP CODE Salt Lake City, Utah 84047	TYPE OF ESTABLISHMENT INSPECTED Medical Device Manufacturer		
DURING AN INSPECTION OF YOUR FIRM I OBSERVED:			
THE OBSERVATIONS NOTED IN THIS FDA-483 ARE NOT AN EXHAUSTIVE LISTING OF OBJECTIONABLE CONDITIONS. UNDER THE LAW, YOUR FIRM IS RESPONSIBLE FOR CONDUCTING INTERNAL SELFAUDITS TO IDENTIFY AND CORRECT ANY AND ALL VIOLATIONS OF THE GMP REGULATION.			
1.1 In $\times$ $\times$ the IUP line of devices underwent a change in catheter material from $\times$ $\times$ $\times$ $\times$ Validation review revealed the following:			
<ul> <li>A. There are no raw test data or a validation protocol for the sterilization, which was approved for the devices;</li> <li>B. There are no raw test data or a validation protocol for the sterilization, which was approved for the device;</li> <li>C. There is no evidence to support the five-year expiration date given to the devices.</li> </ul>			
1.2 In  the IUP product line was approved for a second exposure to sterilization per  however,			
<ul> <li>A. There are no raw test data or a validation protocol for a sterilization and,</li> <li>B. The testing of the catheters after the sterilization did not include tests of the physical integrity of the devices (i.e. tensile strength of the plastic catheter, inspection for discoloration or abnormalities in the catheter plastic), The only tests performed were functional/electrical evaluation tests.</li> <li>C. There is no statistical rationale for the number of devices selected for the tests that were performed.</li> </ul>			
1.3 A Memo dated   states that the IUP line of devices underwent   however, the test results do not indicate			
A. How the devices were sterilized prior to the testing; B. How many devices were evaluated.			
1.4 In   , the firm switched from  There is no evidence that an sterilization validation of the IUP device in a   was ever completed.			
SEE REVERSE OF THIS	A. Chase-Off, CSO C. Smith, SCSO  CAC 115762		

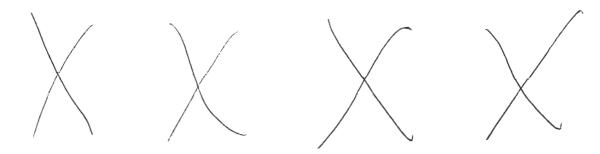
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## DEPARTMENT OF HEALTH AND HUMAN SERVICES FOOD AND DRUG ADMINISTRATION DISTRICT OFFICE ADDRESS AND PHONE NUMBER DATE(S) OF INSPECTION Food and Drug Administration, Bldg. 20, Denver Federal Center 3/26/02-4/15/02 P.O. Box 250087, Denver, Colorado 80225-0087 FEL NUMBER 303-236-3000 1718873 NAME AND TITLE OF INDIVIDUAL TO WHOM REPORT IS ISSUED TO: Kevin L. Cornwell, CEO and President FIRM NAME STREET ADDRESS 7043 South 300 West Utah Medical Products, Inc. TYPE OF ESTABLISHMENT INSPECTED CITY, STATE AND ZIP CODE Salt Lake City, Utah 84047 Medical Device Manufacturer 2. Corrective/Preventive Action Report (CPAR) 🐎 was opened on 💢 and closed on x to address complaints of Intran (IUP) catheters, which had cracked lumens. A review of



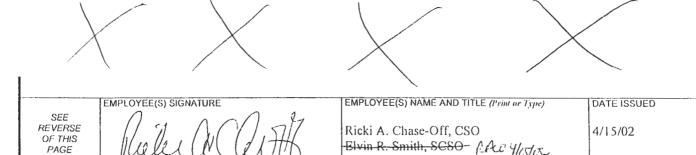
- 3.1 On ∠ CPAR ≻ was initiated in response to complaint ∠ ➤ received on which found that ∠ IUP units returned for evaluation failed the ∠ Test. Review of CPAR × found that the complaint failure investigation did not consider the following points in root cause analysis,
- A. A review of the preventative maintenance performed on the mold prior to the affected lots being manufactured;



- C. A review of the Device History Records (DHR) for the affected lots (111757 & 111758), which require  $\swarrow$  inspection for  $\swarrow$  function prior to release of the finished product;
- D. A review of the mold qualification;

CPAR 😕 revealed that,

E. A review of the machine set up/operation parameters.



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Ricki A. Chase-Off, CSO

Elvin R. Smith, SCSO - PAREY/15/02

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A. Procedures  , allow for retest and rework activities without those activities being documented in the DHR;  B. Further, there is no justification for the acceptance of retest "pass" results for devices, which failed the first test and passed the second test, without rework activities being performed to		
correct the initial failure.  5. Not all significant quality data are being captured and reviewed in that,		
<ul> <li>A. Form</li></ul>		
Review of the firm's Preventative Maintenance program for equipment used in device manufacturing revealed that,		
A. Procedure Preventative and Unscheduled Maintenance states that unscheduled maintenance will be tracked and trended at least on an Although data of unscheduled maintenance are being tracked, there is no evidence that trending analysis is being performed. Further, the last Preventive Maintenance Annual review minutes dated do not mention a review or analysis of unscheduled maintenance;		
B. From there were instances of the going off on the machine, responsible for manufacturing devices. A Corrective Action was not generated for these reoccurring alarms, there was no evaluation of the machine's performance in view of the alarms, there was no evaluation of the effect the cause of the alarm may have on the production of devices and no cause for the alarms was ever determined.		
7. There is no documented statistical rationale for the sampling plans used in component manufacturing in-process inspection, or Intran Plus Catheter Final Inspection. Specifically,		
EMPLOYEE(S) SIGNATURE , EMPL	OYEE(S) NAME AND TITLE (Print of Type) DATE ISSUED	
SEE REVERSE Rick	i A. Chase-Off, CSO  R. Smith, SCSO-PACE 4/15/02	

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<ul> <li>A. Lot 111409 consisted of the manufacture of devices were selected for sampling with no statistical B. IUP lots are broken down into batches of number of units sampled is always There is devices. (Lots 111757, 111758)</li> <li>C. However, the process qualification failed to explain of the statistical sampled in the statistical sample</li></ul>	stical rationale;  for sampling purposes. The no statistical justification for sampling  ain the statistical rational behind the selection	
8. Procedure Change Proposals does n evaluated to determine the other areas of the qu change. For example, on for change in device failure test specifications in complaints were not changed and remained at	ality system that may be effected by the UP devices was corrected to reflect a However,	
<ol><li>Internal Quality Audits have failed to identify and Requirement in the following areas:</li></ol>	correct deviations from the Quality System	
<ul><li>A. Validation;</li><li>B. Change Control;</li><li>C. Corrective and Preventive Actions;</li><li>D. Device History Records; as is documented by the observations on this FDA-483.</li></ul>		
10. In reviewing procedure Corrective/P คลอง ปุ่นประว K. The procedure does not require the following da	reventive Action, it was noted that,	
A. X. preventative maintenance, both scheduled and unscheduled b. 2. Results of Internal Quality Audits		
SEE REVERSE A Ricki	A. Chase-Off, CSO  R. Smith, SCSO LAW HIJOZ	

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES FOOD AND DRUG ADMINISTRATION DISTRICT OFFICE ADDRESS AND PHONE NUMBER DATE(S) OF INSPECTION Food and Drug Administration, Bldg. 20, Denver Federal Center 3/26/02-4/15/02 P.O. Box 250087, Denver, Colorado 80225-0087 FEI NUMBER 303-236-3000 1718873 NAME AND TITLE OF INDIVIDUAL TO WHOM REPORT IS ISSUED TO: Kevin L. Cornwell, CEO and President STREET ADDRESS FIRM NAME 7043 South 300 West Utah Medical Products, Inc. CITY, STATE AND ZIP CODE TYPE OF ESTABLISHMENT INSPECTED Medical Device Manufacturer Salt Lake City, Utah 84047 11. Procedure Nonconforming Materials, does not require the findings of NCMR investigations to be communicated to persons directly involved in the event which to the issuance of the NCMR. 12. The Internal Audit procedure $\longrightarrow$ and the Internal Audit training program lack a definition of specific items, which at a minimum, should be reviewed during an internal audit of each audit area, to ensure the audit is thorough and effective. 13. Software systems are being used as an integral part of the Quality System. There are no procedures for the: A. Validation of systems to ensure the accuracy, reliability, consistent intended performance or the ability to discern invalid or altered records; B. The ability to generate accurate and complete records; C. Protection of records throughout the record retention period; D. Limit of system access; E. Audit trails that are computer generated and time stamped to independently record the date and time of operator's entries and actions. PURG EMPLOYEE(S) SIGNATURE EMPLOYEE(S) NAME AND TITLE (Print or Type) DATE ISSUED SEE REVERSE Ricki A. Chase-Off, CSO 4/15/02 OF THIS Elvin-R. Smith, SCSO-PAROGICTO-2 PAGE