FLEXmedics*

Declaration of Conformity - Class I Devices

Doc. No. - DOC003 Revision: 0 Effective Date: February 6, 2024 DCR: 24-016

Flexmedics 40 Linville Way

Franklin, IN 46131, United States

T: +1 (317) 346-6655 F: +1 (317) 346-6663 E-mail: orders@ghortho.com

Single Registration Number			
US-MF-000013090			
Conformity Assessment			
Device Classification Class I Conformity Assessment Route Annex VIII, Rule 5 Quality Management Certificate #: MD 635659			
Notified Body			
BSI (2797) Say Building, John M. Keynesplein 9, 1066 EP, Amsterdam, Netherlands CE Certificate# Not Applicable for Class I Devices			
European Authorized Representative			
RN: NL-AR-000022839			
G&H Europe BV Edisonstraat 3 3861 Nijkerk Netherlands			
Quality Management Certificate #: MD 635659 Notified Body BSI (2797) Say Building, John M. Keynesplein 9, 1066 EP, Amsterdam, Netherlands CE Certificate# Not Applicable for Class I Devices European Authorized Representative SRN: NL-AR-000022839 G&H Europe BV Edisonstraat 3 3861 Nijkerk			

- I. The EU Declaration of Conformity is issued under the sole responsibility of the manufacturer.
- II. Manufacturer declares, under its sole responsibility, that the product(s) covered in this document are in conformance with the Medical Devices Regulations (EU) 2017/745 Annex II and III and carried out according to the Quality Management System ISO 13485:2016.
- III. Please reference the General Safety and Performance Requirements for a list of all applicable standards and common specifications.

UMD NS	Intended Purpose	Product Family / Description	Part number Prefix (Part Number begins with)
Code			
16-350	A performed impression tray is intended to hold impression material, to reproduce the structure of a patient's teeth and gums.	Disposable Impression Tray Disposable Impression Tray	Basic UDI-DI:0195291DispImpTraysAT DIT*
16-191	Extraoral Headgear is	Extra-oral Headgear	Basic UDI-DI: 0195291Headgear79
	device intended	Facemasks	PFM* RPFM*
	to exert pressure	Highpull Headcaps	HPL* HPS SOF*
	on the teeth from	Neckpads	CP*
	outside the mouth. It is designed for intrusion and extrusion of molars, expansion, and distalization.	Safety Modules	SRD* SRB*
16-189		Dental Wax	Basic UDI-DI: 0195291DentalWax6U

TMP.90.016.E DCR: 24-016 Effective Date: February 6. 2024 Page **1** of **2**

FLEXmedics'

Declaration of Conformity - Class I Devices

Doc. No. - DOC003 Revision: 0 Effective Date: February 6, 2024 DCR: 24-016

UMD NS Code	Intended Purpose	Product Family / Description	Part number Prefix (Part Number begins with)	
	Orthodontic Wax is intended to protect the inner	Bite Wax Patient Wax/ Flavor Wax	BWX* PWX*	
	lips from the brackets or wires or the take a bite impression.	Utility Wax	UWX*	

UMD NS Code	Intended Purpose	Product Family / Description	Part number Prefix (Part Number begins with)
	A performed impression tray	Disposable Impression Tray	Basic UDI-DI:0195291DispImpTraysAT
	is intended to hold impression material, to reproduce the structure of a patient's teeth and gums.	Disposable Impression Tray	DIT*
16-191	Extraoral Headgear is	Extra-oral Headgear	Basic UDI-DI: 0195291Headgear79
	device intended	Facemasks	PFM* RPFM*
	to exert pressure	Highpull Headcaps	HPL* HPS SOF*
	on the teeth from	Neckpads	CP*
	outside the mouth. It is designed for intrusion and extrusion of molars, expansion, and distalization.	Safety Modules	SRD* SRB*
16-189	Orthodontic Wax	Dental Wax	Basic UDI-DI: 0195291DentalWax6U
	is intended to	Bite Wax	BWX*
	protect the inner	Patient Wax/ Flavor	PWX*
	lips from the	Wax	
	brackets or wires or the take a bite impression.	Utility Wax	UWX*

Signed in Franklin 2024-February-06 on behalf of Flexmedics

John Browder

Director, RA/QA

Person Responsible for Regulatory Compliance

TMP.90.016.E

DCR: 24-016

Effective Date: February 6. 2024

Page 2 of 2