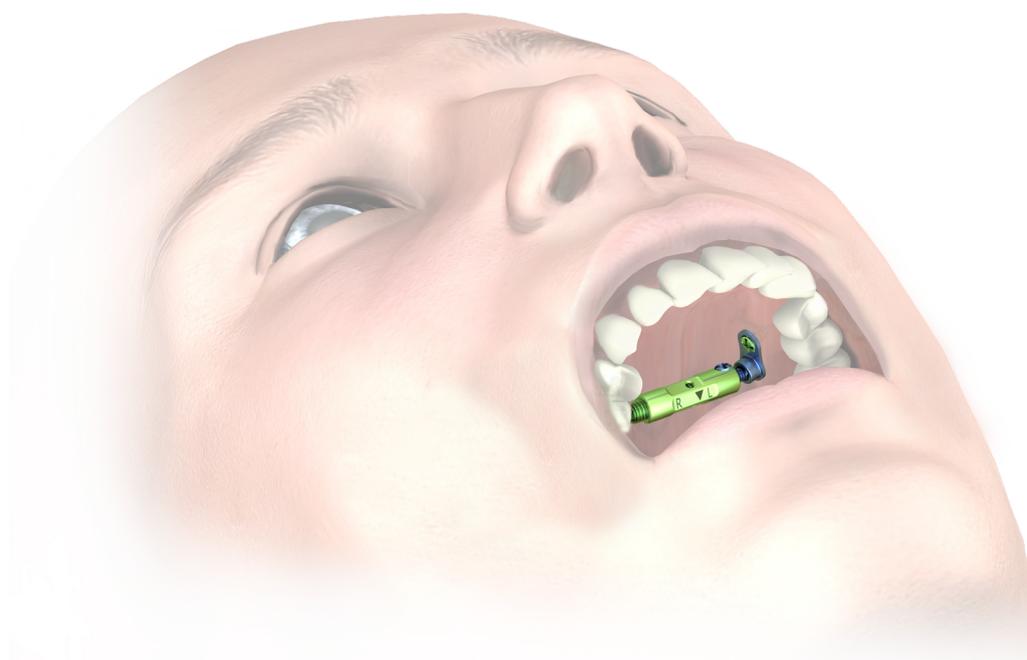


ChM[®]

2,0 ChM Micro Plates
ChMP system

TRANSPALATAL DISTRACTOR 3.4499



SYMBOLS DESCRIPTIONS

	Titanium or titanium alloy		H length [mm]
	Cobalt		Angle
	Left		available lengths
	Right		Available number of holes
	Available versions: left/right		Thickness [mm]
	Length		Scale 1:1
	Torx drive		Number of threaded holes in the shaft part of the plate
	Torx drive cannulated		Number of locking holes in the plate
	Hexagonal drive		Variable angle
	Hexagonal drive cannulated		Cortical
	Cannulated		Cancellous
	Locking		Available in sterile/ non- sterile condition
	Diameter [mm]		Refer to surgery technique

	Caution - pay attention to the particular proceeding.
	Perform the activity with X-Ray control.
	Information about the next stages of the proceeding.
	Proceed to the next stage.
	Return to the specified stage and repeat the activity.
	Before using the product, carefully read the Instructions for Use supplied with the product. It contains, among others, indications, contraindications, side effects, recommendations and warnings related to the use of the product.
	The above description is not a detailed instruction of conduct. The surgeon decides about choosing the operating procedure.

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The manufacturer reserves the right to introduce design changes.

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1. INTRODUCTION

This surgical technique applies to transpalatal distractors. The presented range of implants is made of materials in accordance with ISO 5832 standards. Compliance with the requirements of quality management systems and the requirements of Directive 93/42/EEC concerning medical devices guarantee high quality of the offered implants.

The system includes:

- implants (*distractor and microscrews*),
- instrument set used in the surgery,
- surgical technique.

Indications

- Correction of the deformities of the maxilla in surgically assisted rapid palatal expansion (*SARPE*) procedures, especially in skeletally mature patients

Plate selection

Transpalatal distractors are available in various length variants. This allows for optimal selection of the implant to the deformity type. The distractors are attached to the bone with bone microscrews of 2.0ChMP system.

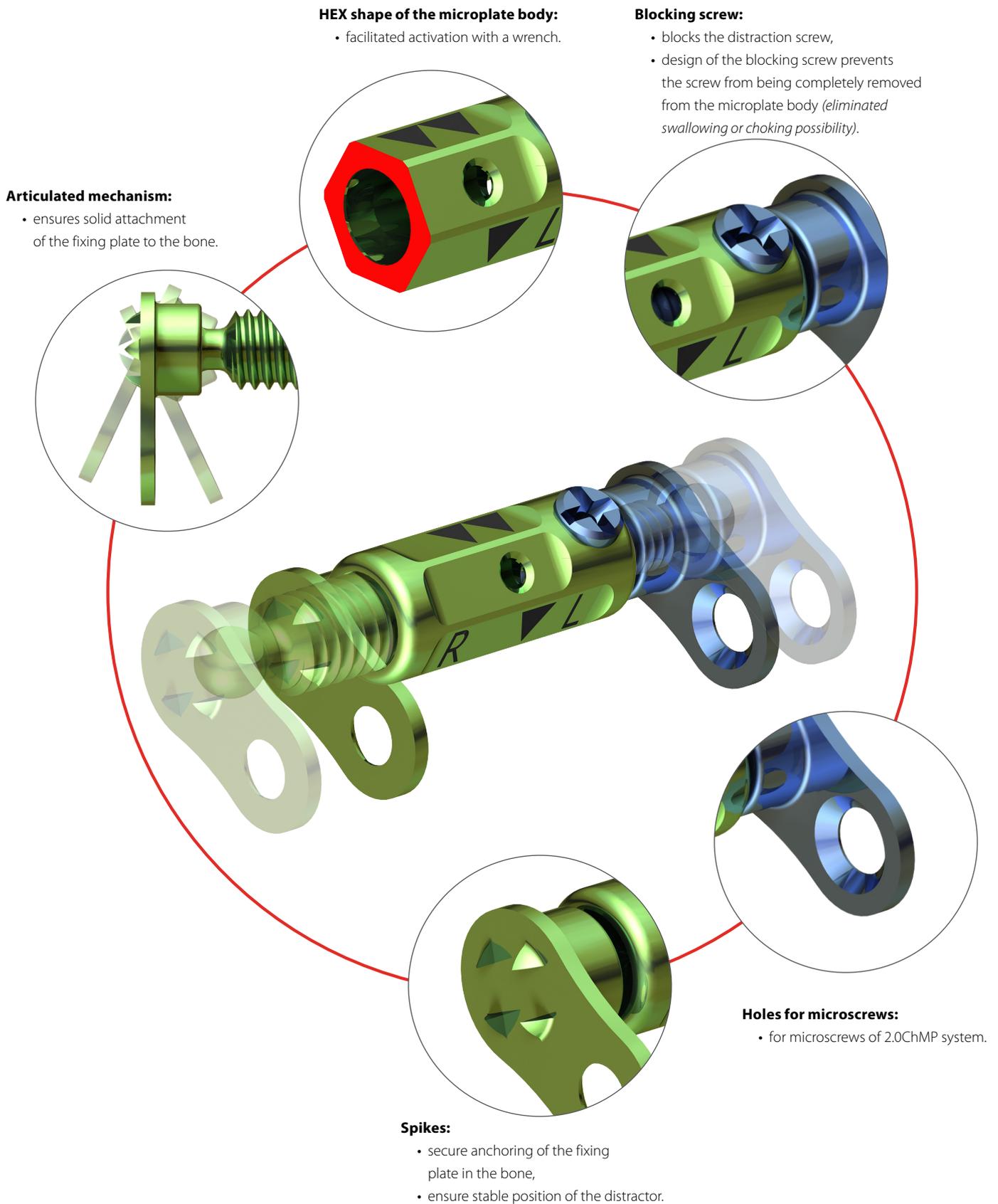
It is not allowed to profile the transpalatal distractors (*fixing plates included*).



Before using the product, carefully read the Instructions for Use supplied with the product. It contains, among others, indications, contraindications, side effects, recommendations and warnings related to the use of the product.



The above description is not a detailed instruction of conduct. The surgeon decides about choosing the operating procedure.



Markings on the transpalatal distractor

An additional patient-side identification system has been introduced in the transpalatal distractors: R - right side of the patient, L - left side of the patient. In addition, the fixing plates were colour-coded: right plate - green colour; left - blue.

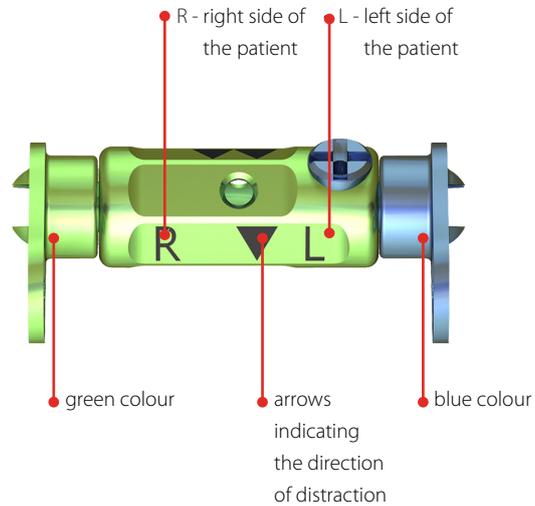
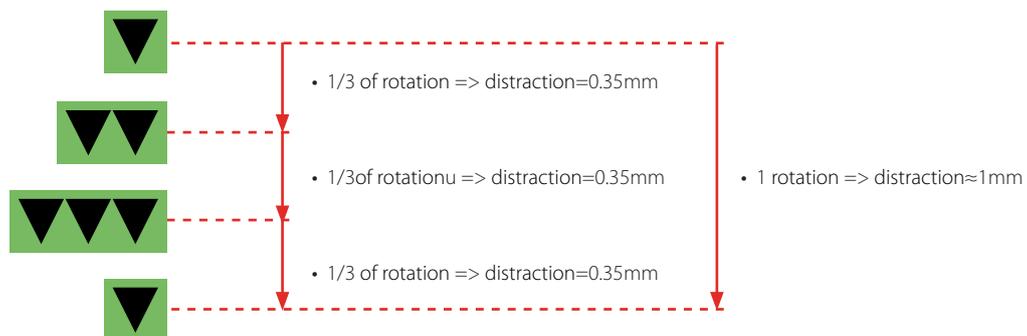


Diagram of subsequent rotation sequences

Distraction is performed by rotating the distractor body in the direction indicated by the arrows. Schematic description of subsequent rotation sequences:



3. SURGICAL TECHNIQUE

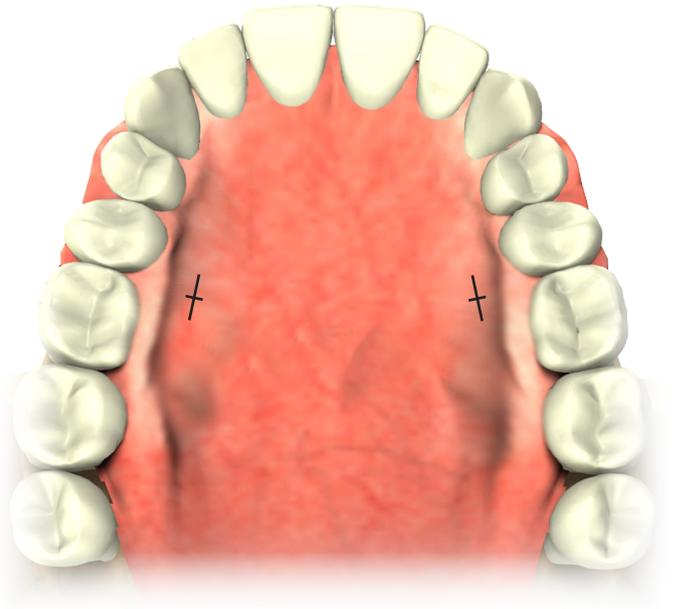
Perform planned osteotomies of the maxilla.



NOTE: It is recommended to place a gauze in the mouth to retain any small element in the event it is dropped in the mouth.

3.1. SURGICAL APPROACH

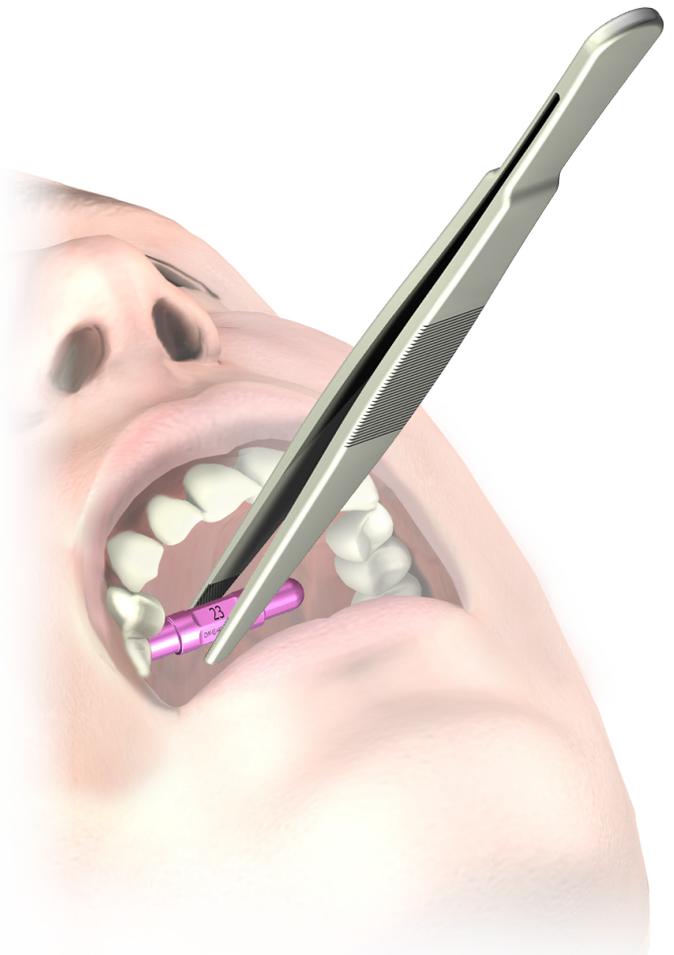
Perform an L-shaped or cross-incision of the palate between premolars and molars or between premolars. The length of the horizontal incision should be about 10mm parallel to the teeth, while the vertical one - about 3mm perpendicular to the teeth.



3.2. IMPLANT SELECTION

Use trials **[43.4499]** and forceps **[30.3303]** to choose the distractor of an adequate length.

	43.4499.017
	43.4499.020
	43.4499.023
	43.4499.026
	30.3303.000

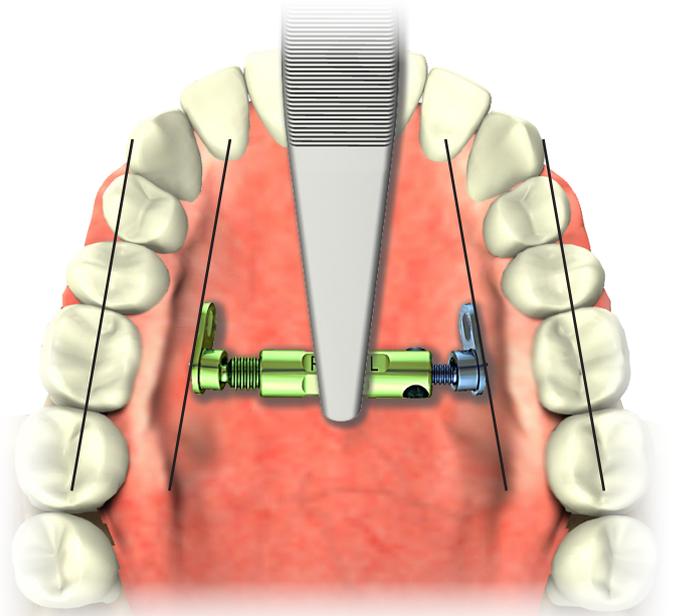


3.3. IMPLANT INSERTION

Use dissecting forceps STANDARD 14.5cm **[30.3303]** to position the implant on the bone. Set the fixing plates in horizontal position.

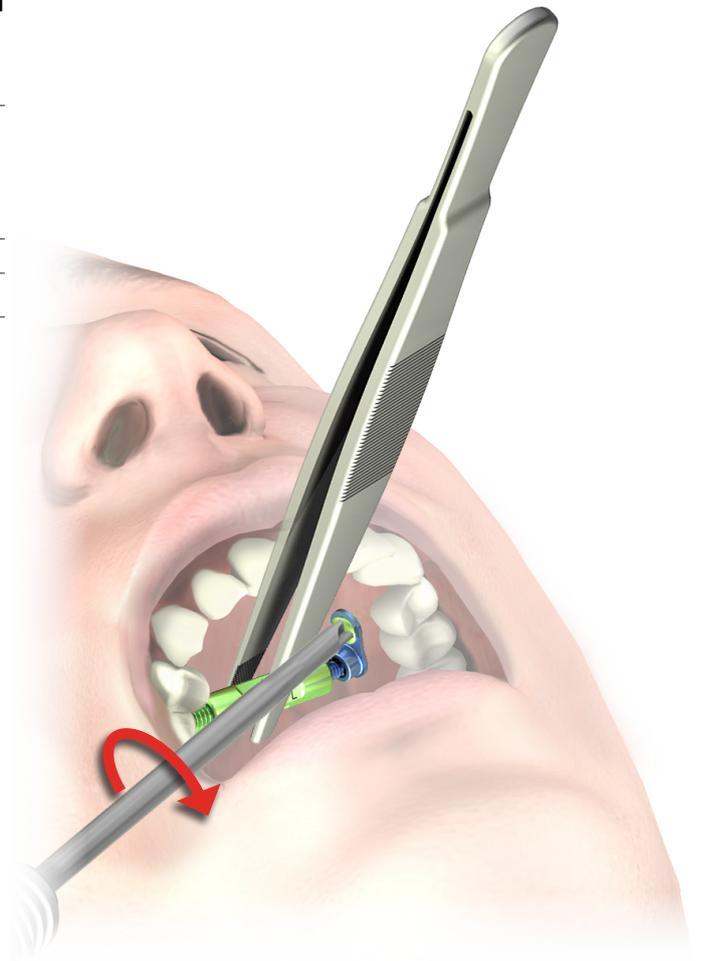


NOTE: Make sure the plate is positioned correctly: the left (L) side of the plate (blue) should be placed on the left side of the patient.



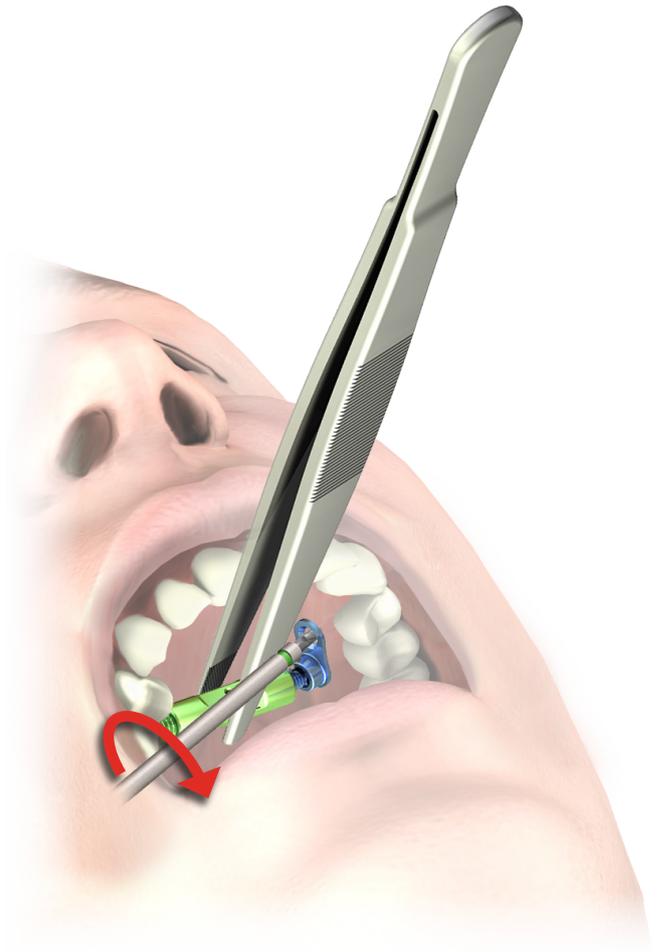
3.4. MICROSCREW INSERTION

Use the quick coupling handle **[40.6405]** and a screwdriver tip X **[40.6449]** to insert the microscrews, of the appropriate length, in the fixing plate holes.



If need be, use the 1.25/15 drill **[40.6422]** to drill a hard bone.

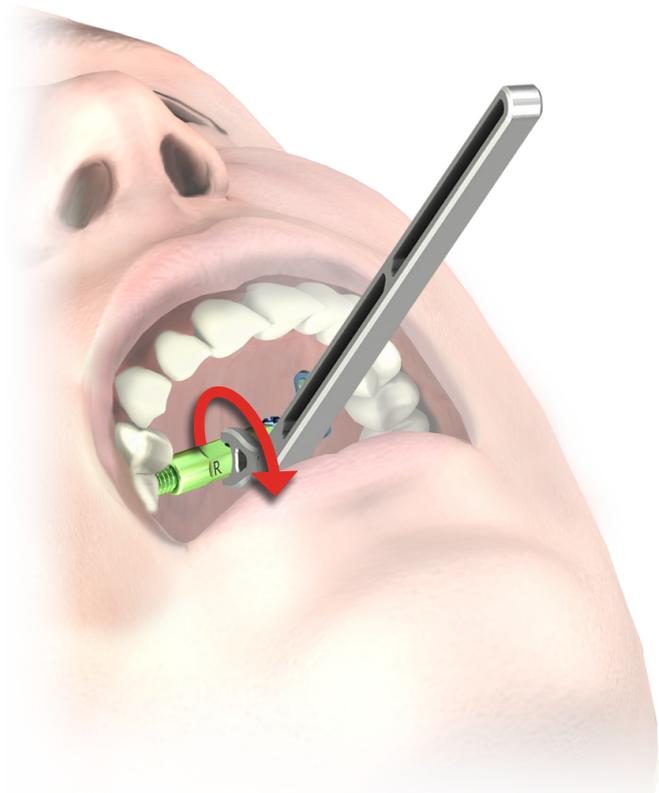
	40.6422.600
	40.6422.608



3.5. ACTIVATION

Use the flat wrench **[40.8402]** to activate the transpalatal distractor until diastema of about 1mm is observed.

	40.8402.100
---	-------------



Activate the distractor in accordance with the direction indicated by the arrows - refer to point 2 IMPLANT DESCRIPTION.

3.6. LATENCY PERIOD

Use the quick-coupling handle [40.6405] and screwdriver tip X [40.6449] to tighten up the blocking screw and block the distractor during the latency period.



NOTE: Tighten clockwise. Do not overtighten the blocking screw to avoid damage to the thread.



The latency period lasts about 1 week. The doctor decides on the length of the latency period.



3.7. DISTRACTION

Following the latency period, begin the distraction.

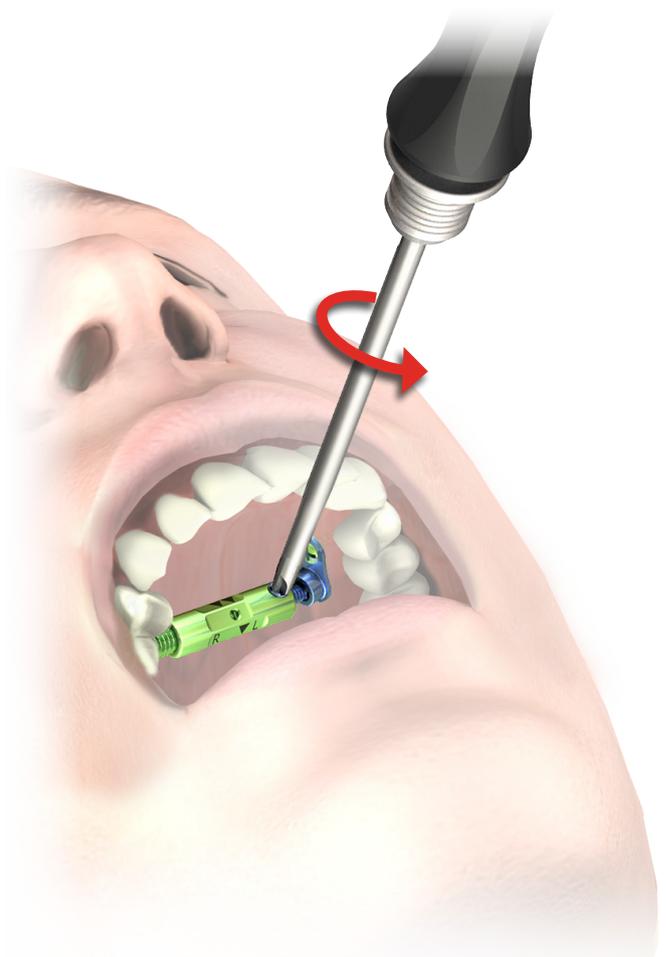
a) Use the quick-coupling handle [40.6405] and screwdriver tip X [40.6449] to unlock the blocking screw.



NOTE: Do not apply excessive force while unlocking since the blocking screw is secured against complete removal from the implant body.



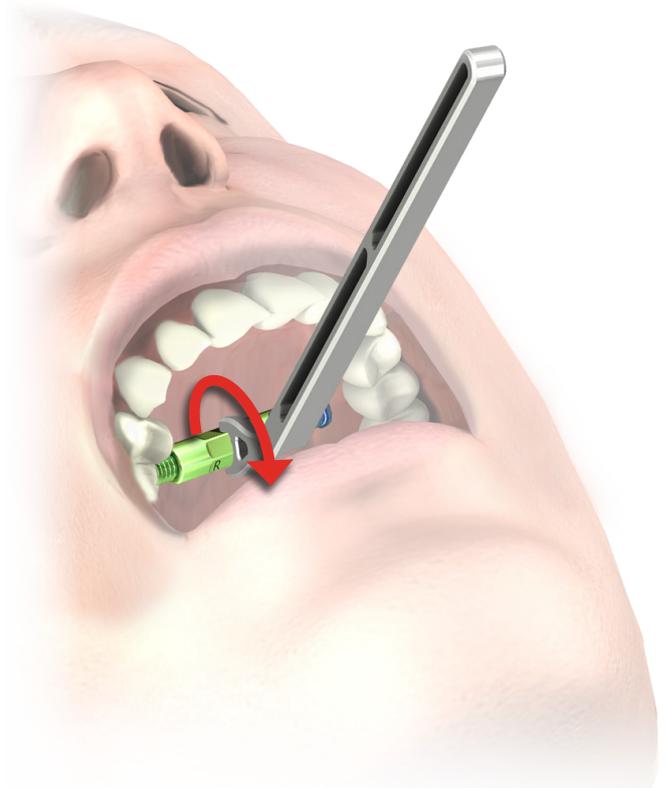
NOTE: Unscrew the screw counterclockwise.



b) Use the flat wrench **[40.8402]** to rotate the implant body until resistance is felt.



c) Make one or two rotations of the microplate body



d) In the distraction period, the patient performs 1/3 of the rotation twice a day using the flat wrench **[40.8402]**.



2 times a day x 1/3 rot. => distraction = 0.7 mm

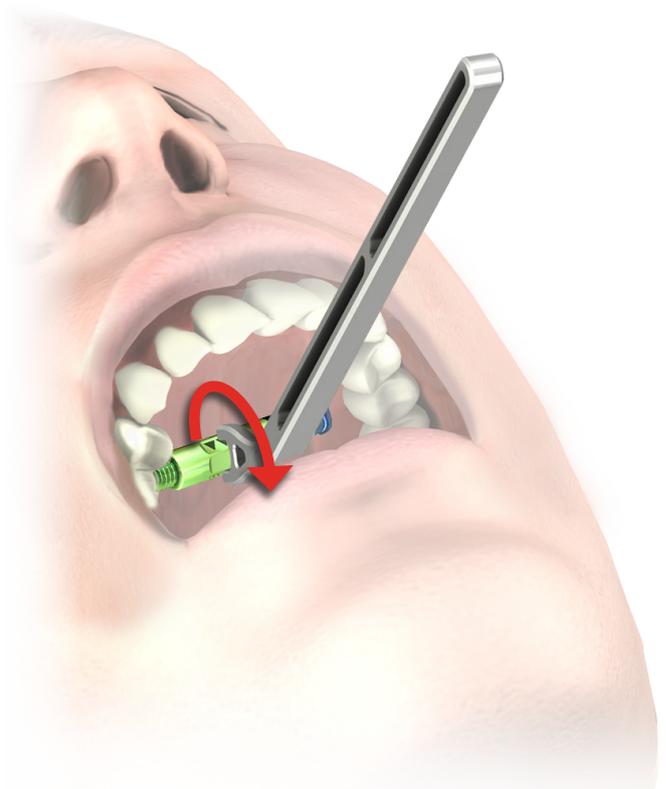


Detailed diagram of the rotation sequences - refer to point 2 IMPLANT DESCRIPTION.



The doctor determines the size of the entire and daily distraction. Depending on the size of the intended distraction, this period last from 1 to 4 weeks.

The doctor provides the patient with a distraction calendar for recording the sequence of rotations performed.



3.8. CONSOLIDATION PERIOD

Once the planned expansion is accomplished, the new bone must be given time to consolidate. Block the distractor with blocking screw using screwdriver tip X [40.6449] and quick-coupling handle [40.6405].



NOTE: Tighten clockwise. Do not overtighten the blocking screw to avoid damage to the thread.



The consolidation period lasts about 3÷6 months. The doctor decides on the length of the consolidation period.



4. IMPLANT REMOVAL

The doctor decides to remove the implant.

To remove the implant:

- unlock the blocking screw,
- loosen the microscrews (*do not remove them completely*),
- loosen the body of the transpalatal distractor
- remove microscrews and distractor.



NOTE: It is recommended to place a gauze in the mouth to retain any small element in the event it is dropped in the mouth.



NOTE: Unscrew the screw counterclockwise.

5. CATALOGUE PAGES

5a. INSTRUMENT SET

Instrument set for 2.0ChMP

40.8409.000

	Quick coupling handle	40.6405.000	1
	Screwdriver tip X	40.6449.021	1
	Screwdriver tip X	40.6449.081	1
	Drill 1.6/8	40.6422.600	1
	Drill 1.6/8	40.6422.608	1
	Dissecting forceps STANDARD 14.5cm	30.3303.000	1
	Flat wrench	40.8402.100	1
	Trial 3.4499.017	43.4499.017	1
	Trial 3.4499.020	43.4499.020	1
	Trial 3.4499.023	43.4499.023	1
	Trial 3.4499.026	43.4499.026	1
	Stand	40.8403.000	1

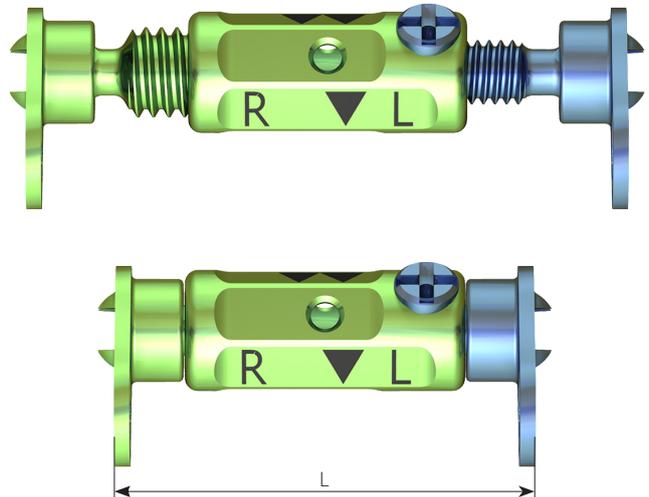
5b. DISTRACTORS



Transpalatal distractors

**	Len	Ti
8	17	3.4499.017
13.5	20	3.4499.020
19	23	3.4499.023
24	26	3.4499.026

** - distraction



5c. SCREWS



Len	Ti
5	3.6663.005
6	3.6663.006
7	3.6663.007

6. INSTRUCTIONS FOR USE

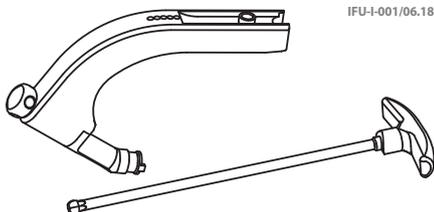
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CE

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IFU-I-001/06.18



GB
**INSTRUCTIONS FOR USE
REUSABLE ORTHOPAEDIC
AND SURGICAL INSTRUMENTS**

1 INDICATIONS

1. Surgical and orthopaedic instruments are intended for use only by skilled and trained medical professionals who are familiar with their use and application.

2 DESCRIPTION

1. The unit package contains one piece of the product in non-sterile condition. Clear plastic bags are a typical packaging material. The products may also be supplied as a complete set (arranged on palettes and placed into specially designed sterilization containers). This Instructions For Use is attached both to the unit packages and the sets.
2. The package is equipped with the product label. The label (as a primary label) contains, among others:
1) Logo ChM and the address of the manufacturer.
2) Catalogue number (REF), e.g.: 40.XXXXXX, and device name and size.
3) Production batch number (LOT), e.g.: XXXXXXX.
4) NON-STERILE sign - indicates non-sterile product.
5) Information symbols (described in the footer of this Instructions For Use).
6) CE conformity mark.
3. Depending on the size or type of the product, the following information may be marked on its surface: manufacturer's logo, production batch no. (LOT), catalogue no. (REF), type of material and device size.

3 MATERIALS

1. For the production of instruments, ChM sp. z o.o. uses mainly: steel, aluminum alloys and plastics, approved for use in surgical instruments and in accordance with applicable procedures.
2. Instruments are produced from corrosion-resistant steel. The protective layer (passive layer) against corrosion is formed on the surface of the device due to high content of chromium.
3. Devices produced of aluminum are mainly stands, palettes, cassettes and some parts of instruments such as e.g. handles. The protective oxide layer which may be dyed or stays in natural colour (silver-grey) is formed on the aluminum as an effect of electrochemical treatment of its surface.
4. Devices made of aluminum with processed layer have good corrosion resistance. However, the contact with strong alkaline cleaning and disinfecting agents, solutions containing iodine or some metal salts, due to chemical interference with the processed aluminum surface, shall be avoided.
5. Devices produced of plastics are mainly stands, palettes, cassettes and some parts of instruments such as e.g. handles. Plastics used in the manufacture of instruments are mainly: PPSU (Polysulfone), PEEK (Polyetheretherketone), teflon (PTFE - Polytetrafluoroethylene) and silicone. The above-mentioned materials can be processed (washed, cleaned, sterilized) at temperatures not higher than 140°C. They are stable in aqueous solution of washing-disinfecting agents with a pH value from 4 to 10.8.
6. Steel surgical instruments with a hardened insert are more durable than steel products. The advantage of the product is the sintered carbide insert placed in the working part of the instrument. This insert is characterized by great hardness and abrasion resistance.
7. If the material of the device cannot be specified, please contact ChM sp. z o.o. representative.

4 WARNINGS AND PRECAUTIONS

1. Instruments are intended for use only by skilled and trained medical professionals who are familiar with their use and application.
2. Inappropriate, careless and inconsistent with the recommendations provided below handling of the instruments can lead to their chemical, electrochemical or mechanical damage which can adversely affect corrosion resistance and shorten the service life of the devices.
3. Instruments are intended only for specific procedures and must be used strictly according to their intended purpose. Use of instruments not in accordance with their intended purpose may lead to malfunction, accelerated wear and, in consequences, damage to the instrument.
4. The surgeon should be familiar with all components of the device before use and should personally verify if all components and instruments are present before the surgery begins.
5. Before the procedure begins, all instruments should be carefully inspected for their condition and proper functioning. They should be undamaged and without any signs of corrosion. Blades and cutting edges should be sharp and undamaged. Damaged or corroded instruments should be immediately replaced. The use of bent, damaged or corroded instruments is not allowed.
6. Tissue structures close to the operative site must be protected.
7. Collision of the instrument with metal operating equipment, retractor or other device may cause damage that necessitates intraoperative replacement of that instrument.
8. Do not apply excessive force when using the instrument - it may lead to its permanent damage and, in consequences, to mal-function of the device.
9. Instruments are subject to constant wear processes. While rare, intraoperative fracture or breakage of the instrument can occur. Instruments which have been subjected to prolonged use or excessive forces are more susceptible to fractures, depending on care taken during surgery and the number of procedures performed. Should breakage occur, the instrument parts must be removed and disposed of immediately in accordance with valid medical facility procedures.
10. In order to confirm the removal of all undesired metal fragments from the surgical field, intraoperative X-Ray examination is recommended.
11. In the case of suspected or documented allergy or intolerance to metallic materials, surgeon shall find out if the patient develops allergic reaction to the instrument material by ordering appropriate tests.
12. It is extremely important to follow the calibration deadline which is permanently marked on the torque instruments (see CALIBRATION). Use of a torque instrument with an overstepped calibration date may lead to potential injury, implant or device damage, or loss of correction. If there appear any irregularities in device operation, e.g. due to heavy usage, prior to next calibration date, the instrument should be immediately sent to the manufacturer for its re-calibration.
13. Instrument which had contact with tissues or body fluids of another patient cannot be re-used prior to its re-processing due to a potential risk of cross-infection caused by viruses, bacteria and prions.
14. Middle and working part of the surgical devices with hardened insert shall be used during the surgical procedure. Improper or inconsistent with the intended purpose usage of the product may lead to damage of the working part e.g. damage to the inserts.

5 CLEANING, DISINFECTION, STERILIZATION

1. Prior to use of a non-sterile device, the following rules apply:
1) The device must undergo cleaning, disinfection and sterilization procedures.
2) Effective cleaning is a complicated procedure depending on the following factors: the quality of water, the type and the quantity of used detergent, the technique of cleaning (manual, automated), the proper rinsing and drying, the proper preparation of the device, the time, the temperature and carefulness of the person conducting this process, etc.
3) The hospital facility remains responsible for the effectiveness of the conducted cleaning, packaging and sterilization processes with the use of existing equipment, materials and properly trained personnel.
2. Preparation of the place of use.
1) Immediately after use, remove from instrument blood and other contaminants with disposable cloth or paper towels. Additionally, it is recommended to rinse the instrument under running water or to place it in the aqueous disinfectant solution. Do not let blood, tissues, body fluids or other biological impurities dry out on the surface of the device.
2) In order to prevent blood and debris from drying out on the instrument surface, transport the product to the

processing area in a closed container or covered with a damp cloth.
3) In order to avoid contamination during transportation, the dirty instruments should be separated from the clean ones.

3. Preparation for washing and disinfection (for all methods).
1) The used instruments should be reprocessed as soon as possible.
If the instrument can be disassembled, it must be done before cleaning processes.
3) Rinse under running water and remove surface debris using a disposable cloth, paper towel or plastic brushes (nylon brushes are recommended). Particular attention should be paid to openings and places difficult to be cleaned. Very dirty devices should be soaked in an aqueous solution of a detergent or a washing-disinfecting agent, e.g. needisher® MedClean forte, at temperature of 40 +/- 2°C and pH of 10.4-10.8 (follow the information contained in the instructions prepared by the manufacturer of the agent, in respect of temperature, concentration, exposure time and water quality).
4) CAUTION: It is forbidden to use brushes made of metal, bristles or materials which could damage the product.
4. Cleaning and disinfection process.

1) This Instructions for Use describes two ChM-approved cleaning and disinfection methods: manual with ultrasound cleaning and automated method. It is recommended to use automated cleaning and disinfection procedures (in a washer-disinfector).
2) The chosen washing and disinfecting agents must be suitable and approved for use with medical devices. It is important to follow the instructions and restrictions specified by the producer of those cleaning agents. It is recommended to use aqueous solutions of washing-disinfecting agents with a pH value between 10.4 and 10.8. ChM used the following materials during the validation process of the described recommendations for cleaning and disinfection. It is allowed to use other materials than those listed below which may also give a comparable effect:

- a) detergent - Dr. Weigert (producer) needisher® MedClean forte (name of the detergent);
- b) disinfectant - Dr. Weigert (producer) needisher® Septo Active (name of disinfectant).
- 3) To prevent product damage (pitting, rust, discoloration), do not use aggressive cleaning agents (NaOH, NaOCl), saline solutions and unsuitable cleaning agents.
- 4) Where possible, it is recommended to use demineralized water to avoid the formation of spots and stains caused by chlorides and other compounds present in ordinary water.
- 5) Manual with ultrasound cleaning.
- a) Equipment and materials: a device for ultrasound cleaning, soft, lint-free cloths, plastic brushes, syringes, aqueous solutions of cleaning agent.
- b) Manual cleaning: Initial manual cleaning must be performed prior to ultrasound cleaning.
- c) Rinse under running water until the product is visually clean. Use plastic brushes to remove heavy or large debris.
- d) Soak the product for at least 10 minutes in an aqueous solution of a detergent at temperature of 40 +/- 2°C and pH of 10.4-10.8 (follow the information contained in the instructions prepared by the manufacturer of the agent, in respect of temperature, concentration, exposure time and water quality).
- e) Rinse the product under cold water for at least 2 minutes, paying particular attention to the holes and places difficult to be cleaned.
- f) Prepare fresh washing solution. Clean the surfaces and gaps of the product, carefully. Use suitable brushes to clean the holes. Clean the product immersed in the solution.
- g) Rinse the product thoroughly under warm running water for at least 2 minutes, paying special attention to the gaps, blind holes, hinges and joints. When cleaning, use brushes and perform multiple reciprocating movements on the surface of the product.
- h) Visually inspect the entire surface of the product for debris and impurity. Repeat the steps described in subsections c-h until the product is visually clean.
- i) Ultrasound cleaning: prepare an aqueous cleaning solution at a temperature of 40 +/- 2°C and pH of 10.4-10.8 (follow the information contained in the instructions prepared by the manufacturer of the cleaning agent, in respect of temperature, concentration, exposure time and water quality). Immerse fully the product in the aqueous cleaning solution and have it washed in ultrasounds for 15 minutes.
- j) Rinse the product thoroughly under demineralized water, paying particular attention to the holes and places difficult to be cleaned.
- k) Visually inspect the entire surface of the product for debris and impurity. Repeat the steps described in subsections c-h until the product is visually clean.
- l) Use demineralized water for final rinsing of the device.
- m) Dry the device thoroughly using disposable, soft, lint-free cloth or compressed air.
- n) Prepare an aqueous solution of disinfecting agent at a temperature of 20 +/- 2°C using 20g of the agent per 1 liter of water. Immerse the product in the solution, exposure time - 15min (follow the information contained in the instructions prepared by the manufacturer of the agent, in respect of temperature, concentration, exposure time and water quality).

o) After the exposure time, rinse the product thoroughly under demineralized water, paying particular attention to the holes and places difficult to be cleaned.
p) The cannulated instruments should be treated using a compressed air or air supplied from the syringe.
q) Dry the device thoroughly. It is recommended to dry the product in a dryer at a temperature ranging from 90°C to 110°C.
r) Visually inspect the entire surface of the device.

CAUTION: If the obstruction in the cannula cannot be removed as indicated in the Instructions for Use, the device should be considered at the end of its useful life and should be discarded in accordance with facility procedures and guidelines.
6. The automated method using a washer-disinfector.
a) Equipment and materials: a washer-disinfector, aqueous solutions of cleaning agent.
b) Cleaning in the washer-disinfector must be preceded by a manual and ultrasound cleaning, following the procedure described in subsections c-h of paragraph 5.
c) CAUTION: The equipment used for washing/disinfection should meet the requirements of ISO 15883. Procedure of washing in the washer-disinfector shall be performed according to internal hospital procedures, recommendations of the washer-disinfector manufacturer, and instructions for use prepared by the washing-disinfecting agent manufacturer.

d) The device should undergo the process of machine washing in the washer-disinfector using the following cycle parameters: (1) - pre-washing in cold tap water, duration - 2min; (2) - washing in an aqueous solution of cleaning agent at 55 +/- 2°C and pH of 10.4 - 10.8, duration - 10min; (3) - rinsing under demineralized water, duration - 2min; (4) - thermal disinfection in demineralized water at 90°C, minimal duration - 5min; (5) - drying at the temperature ranging from 90°C to 110°C, duration - 40min.

5. Inspection
1) Each time before re-use and re-sterilization, all medical devices should be inspected.
2) All parts of the product should be checked for visible dirt and corrosion. Particular attention should be paid to:
a) Holes, grooves and gaps the debris could have been pressed into during use.
b) Places where dirt can be found, such as joints, latches, etc.
c) Generally unamplified visual inspection under good light conditions is sufficient.

4) Each time before re-use and re-sterilization, the functional check of the product should be performed, consisting of:
a) Verifying the connections in the mating instruments, such as tips, shafts and quick coupling devices.
b) Verifying the correct functioning of mechanisms, e.g. screw, ratchet, snap mechanism, etc.
c) Verifying all rotating devices for straightness (this can be simply achieved by rolling the device on a flat surface).
d) Verifying cutting edges for sharpness.
e) Verifying instruments for damage to material structure (cracks, dents, peels, etc.).
5) Damaged or defective product cannot be approved for further use.
6) Prior to storage, the instrument must be checked for dryness.

7. CAUTION:
a) The ChM sp. z o.o. does not define the maximum number of uses appropriate for re-usable medical instruments. The useful life of these devices depends on many factors including the method and duration of each use, and the handling between uses. Careful and proper use reduces the risk of damage to the product and extends its serviceable life.
b) The manufacturer does not recommend using any preservatives on medical devices.

6. Packaging
1) Washed and dried devices shall be stored (if possible) in suitable stands placed in special sterilization containers. Separate items should be packed in a packaging intended for the recommended steam sterilization. Sterilization containers, item packaging and packaging process itself have to meet the requirements of ISO 11607 standards. The packaging procedure must be performed in controlled purity conditions. The device must be packed so that during its removal from the packaging, when used, there is no risk for its re-contamination.

7. Sterilization
1) Washed, disinfected, and dried device shall undergo the sterilization process. The recommended method of sterilization is vacuum-type steam sterilization (with water vapor under overpressure):
a) temperature: 134°C
b) minimum exposure time: 7 min,
c) minimum drying time: 20 min.
2) CAUTION:
a) The sterilization process must be validated and routinely monitored in accordance with the requirements of EN ISO 17665-1.
b) Sterilization must be effective and in accordance with requirements of the EN 556-1 standard to ensure the required level of guaranteed sterility SAL 10⁻⁶ (where SAL stands for Sterility Assurance Level).
c) Device must not be sterilized in the packaging in which it was delivered, except specially designed sterilization containers.
d) The method of sterilization using ethylene oxide, gas plasma and dry heat should not be used, unless the Instructions for Use for the product contains sterilization recommendations using these methods.
e) The sterilization temperature for plastic products (PPSU, PEEK, PTFE, silicone) cannot be higher than 140°C.

6. STORAGE
1) The devices should be properly stored. When storing surgical instruments, it is recommended that they never be stacked together. It may lead to damage of cutting edges (nick or dull) and/or initiation of corrosion centers. Instruments should be stored in a clean and dry room, at room temperature and off the direct sunlight. If possible, instruments should be stored in suitable palettes placed into specially designed sterilization containers.

7 CALIBRATION

1. Regular calibration is required in case of torque wrenches, handles and connectors. Torque instruments are factory-calibrated, the nominal torque of a calibrated instrument is marked on the device (e.g. 4 Nm). To maintain

a high level of safety and accuracy of operation of a torque instrument, it is necessary to follow the calibration deadline which is marked on the device.
2. Instrument calibration is performed by the manufacturer. Any attempt of unauthorized modifications to the construction or factory setting of the torque devices can lead to a potential injury or damage to the product and is prohibited.

8 COMPATIBILITY

1. ChM specialist instrument sets are designed for insertion of ChM implants. A specific, illustrated operating technique that describes the proper use of instruments included in the instrument set that is designed for particular implant system, is provided together with such instrument set. It is not allowed to combine ChM instruments with products from other manufacturers. The physician bears all responsibility for the use of the ChM instruments together with implants and instruments from other manufacturers.

If this instructions appears unclear, please contact the manufacturer, who shall provide all required explanations.
Updated INSTRUCTIONS FOR USE are available on the following website: www.chm.eu
IFU-I-001/06.18, Date of verification: June 2018

IFU-I-001/06.18, Date of verification: June 2018

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