

March 27, 2023

URGENT: MEDIA FIELD SAFETY CORRECTIVE ACTION

SAGE™ Vitrification Media Kit

Dear Valued CooperSurgical Customer,

CooperSurgical, Inc. is issuing a Field Safety Corrective Action (FSCA) for one (1) lot number of its SAGE Vitrification Media Kit (Reference Number ART-8026, **LOT 211112-002333)** (referred to in this letter as the "Product").

Per the Product Instructions for Use, these Products are intended for the vitrification and containment of human oocytes and embryos (pronuclear zygotes through day three cleavage stage embryos and blastocyst stage embryos) in Assisted Reproductive Technology (ART) procedures. This Product is designed to be used in conjunction with the SAGE™ Warming Kit (ART-8031) for warming and recovery of specimens.

Reason for Recall:

It has come to CooperSurgical's attention that certain SAGE Vitrification Media Kits within **LOT 211112-002333** may contain mislabeled vials. Specifically, the impacted kits may contain vials labeled as Vitrification Solution (VS) but actually contain Equilibration Solution (ES).

Risk to Health:

Use of an impacted SAGE Vitrification Media Kit from **LOT 211112-002333** may impact the viability of oocytes/embryos.

Actions to be Taken:

For **CUSTOMERS** and **DISTRIBUTORS**:

- Inspect your inventory for Product from this lot. Note the lot's labeled expiration date is November 12, 2022. Lot information can be found on the box and bottle labeling.
 - o If found, discontinue use / distribution of the Product immediately and guarantine.
- Please complete the appropriate included Acknowledgment Form and send it via email to Recall@coopersurgical.com.

For CUSTOMERS:

 Check your records to determine whether you utilized SAGE Vitrification Media Kits from LOT 21112-002333. If so, follow up with your local sales representative for more information regarding implications of its use.



For DISTRIBUTORS:

If the Product has been distributed to your customers, send a copy of this letter and the Customer
Acknowledgement Form to each of these customers.

We regret any inconvenience caused by this FSCA. CooperSurgical is committed to high quality, safe and effective Products.

Where appropriate, Regulatory Agencies will be notified of this issue.

You may reach us at **+1-203-601-5200** during normal operating hours of 09:00 – 17:00 M-F EST. Follow the phone prompt to enter extension **3300**. Our email address is Recall@coopersurgical.com.

Sincerely,

Karen Gienau Sr. Post Market Surveillance Manager



Customer Acknowledgement Form

IMMEDIATE RESPONSE REQUIRED – TIME-SENSITIVE ACTION NEEDED

Please complete this form and return it via email to Recall@coopersurgical.com.or via fax to +1.203.601.9870, ATTN: Product Surveillance.

Customer Account #: Street Address:		Account Name:	
		Country, Town, State, & Zip Code:	
Contact Name:	Phone Number:		Email address:
I have read and understand the notice 2023.	e instructions prov	ided in the letter	dated March 27,
AGE Vitrification Media Kit (part r	s below and com	olete the table i	
We have NO record of use for		•	
☐ We have records of use for this representative for more inform	•		•
☐ We have the following affected		•	
affected Product for return to	CooperSurgical.		
Part Number	Lot No	ımbers	Quantity of kits to be Returned
ART-8026	211112	-002333	
Have any adverse events been associated with affected Product(s)?			☐ Yes ☐ No
If yes, please explain:			
If you have additional questions, pleas	se contact a Coone	Surgical Product	Surveillance representative at

+1.203.601.5200 Ext. 3300 or email us at Recall@coopersurgical.com.



Distributor Acknowledgement Form

IMMEDIATE RESPONSE REQUIRED – TIME-SENSITIVE ACTION NEEDED

Please complete this form and return it via email to Recall@coopersurgical.com or via fax to +1.203.601.9870, ATTN: Product Surveillance.

FOR DISTRIBUTORS ONLY:				
Customer Account #: Street Address:		Account Name: Country, Town, State, & Zip Code:		
l have read and understand the notic 2023.	ce instructions provi	ded in the letter	dated March 27, Yes No	
SAGE Vitrification Media Kit (part n	umber: ART-8026, l	OT 211112-002	333)	
Please check the appropriate box be	elow and complete t	the table if appli	icable.	
☐ We have NO kits of the affected	lot at our facility.			
☐ We have the following affected distribution and quarantine the		•		
Product/Part	Lot N	Lot Numbers Quantity of kits to		
Number				
ART-8026	211112	2-002333		
Quantity of devices shipped to custo		- lease select one	of the following:	
☐ I have identified and notified al customers to whom the affects Product may have been distribu			cation:	
☐ I am providing a list of all custo contact information.	mers to whom affec	ted Product may	have been distributed along with their	

Kommenteerinud [DH1]: Again, they would not be using, but rather distributing the product.