

1025 Willa Springs Drive Winter Springs, FL 32708 PH: 407-677-8022 FX: 407-677-5037

DECLARATION OF CONFORMITY

Application of Council Directive(s): Medical Device Directive 93/42/EC	
Regulation(s) to which Conformity is Declared: Medical Device Directive 93/42/EC	
Standard(s) to which Conformity is Declared: <u>IEC 60601-1, IEC 60601-2-24, ISO 80601-2-61</u>	
Manufacturer:	Iradimed Corporation 1025 Willa Springs Drive Winter Springs, FL 32708 USA www.iradimed.com
Authorized Representative:	Medical Device Safety Service GmbH Schiffgraben 41 30175 Hannover Germany www.mdssar.com
Importer's Name: Refer	to accompanying Packing Slip
Importer's Address: Refer	to accompanying Packing Slip
Type of Equipment: MRId	ium 3860 Infusion Pump System and accessories
Model No(s).: 3860+	-/3860 Pump, 3861 Channel B SideCar, and 3865 Remote Series Infusion Sets, Type 1056, 1057 and 1058
Lot/Serial No(s).: Refer	to accompanying Packing Slip
Year of Manufacture: Refer	to accompanying Packing Slip
	X II, EC Marking Certificates No. 1434-MDD-408/2019 1434-MDD-409/2019
Equipment Class(es):	Class IIa and IIb
MDD Conformity Assessed By: Polish Center for Testing and Certification (1434)	
I, the undersigned, hereby declare that the equipment specified above conforms to the above Directive(s), Regulation(s) and/or Standard(s).	
Place Winter Springs, FL Mucin Carley	
Date December 3, 2019	(Signature) Francis Casey (Full Name)
	Vice-President, Q.A. & Regulatory Affairs (Position)