



## EU Quality Management System Certificate (MDR)

Pursuant to Regulation (EU) 2017/745 on Medical Devices, Annex IX Chapters I and III  
(Class IIa and Class IIb Devices)

**No. G10 093930 0010 Rev. 00**

**Manufacturer:** **Berpu Medical Technology Co., Ltd**

No.14 Xingji Road  
Yongxing Street, Longwan District  
325000 Wenzhou, Zhejiang Province  
PEOPLE'S REPUBLIC OF CHINA

**SRN Manufacturer:** CN-MF-000012430

**Authorized Representative:** Shanghai International Holding Corp. GmbH (Europe)  
Eiffestraße 80, 20537 Hamburg, GERMANY

The Certification Body of TÜV SÜD Product Service GmbH certifies that the manufacturer has established, documented and implemented a quality management system as described in Article 10 (9) of the Regulation (EU) 2017/745 on medical devices. Details on device categories covered by the quality management system are described on the following page(s).

The Report referenced below summarises the result of the assessment and includes reference to relevant CS, harmonized standards and test reports. The conformity assessment has been carried out according to Annex IX Chapter I and III of this regulation with a positive result.

The quality management system assessment was accompanied by the assessment of technical documentation for devices selected on a representative basis.

The certified quality management system is subject to periodical surveillance by TÜV SÜD Product Service GmbH. The surveillance assessment shall also include an assessment of the technical documentation for the device or devices concerned on the basis of further representative samples. All applicable requirements of the testing and certification regulation of TÜV SÜD Group have to be complied with.

For details and certificate validity see: [www.tuvsud.com/ps-cert?q=cert:G10\\_093930\\_0010\\_Rev.00](http://www.tuvsud.com/ps-cert?q=cert:G10_093930_0010_Rev.00)

**Report No.:** BJ22084401

**Valid from:** 2022-12-14

**Valid until:** 2027-12-13

Christoph Dicks  
Head of Certification/Notified Body

**Issue date:** 2022-12-14

Effective



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<b>Classification:</b>	IIa
<b>Device Group:</b>	A010101 - HYPODERMIC NEEDLES
<b>Intended Purpose:</b>	-
<b>Classification:</b>	IIa
<b>Device Group:</b>	A010105 - NEEDLES FOR COLLECTION UNDER VACUUM
<b>Intended Purpose:</b>	-
<b>Classification:</b>	IIa
<b>Device Group:</b>	A010601 - CARPULE NEEDLES
<b>Intended Purpose:</b>	-
<b>Classification:</b>	IIa
<b>Device Group:</b>	A020102 - INFUSION AND IRRIGATION SYRINGES, SINGLE-USE
<b>Intended Purpose:</b>	-
<b>Classification:</b>	IIa
<b>Device Group:</b>	A020106 - INSULIN SYRINGES, SINGLE-USE
<b>Intended Purpose:</b>	-
<b>The validity of this certificate depends on conditions and/or is limited to the following:</b>	-none-

Effective