

### 1. Device identification and general information

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| <b>Trade Name of the Device (s):</b>               | memsorb™   |
| <b>Product codes:</b>                              | MS-DR (for Dräger anaesthesia machines)<br>MS-GE (for GE anaesthesia machines) |
| <b>Manufacturer's Name:</b>                        | DMF Medical Incorporated   |
| <b>Manufacturer's Address:</b>                     | 1 Research Drive<br>Dartmouth, Nova Scotia<br>Canada, B2Y 4M9                  |
| <b>SRN (Single Registration Number):</b>           | CA-MF-000038004  |
| <b>Basic UDI-DI:</b>                               | 754016236  |
| <b>GMN Codes:</b>                                  | 42414  |
| <b>Medical device nomenclature description:</b>    | R9099 - Respiratory and Anaesthesia Devices – Other                            |
| <b>Classification:</b>                             | Class IIa non-implantable as per Rule 2 and Rule 3 of Annex VIII               |
| <b>CE Certificate Year of Issue</b>                | MDR 766014 (2024)  |
| <b>Authorized Representative Name:</b>             | OBELIS S.A   |
| <b>Authorized Representative Address:</b>          | Bd. Général Wahis, 53<br>1030 Brussels,<br>Belgium                             |
| <b>Authorized Representative SRN:</b>              | BE-AR-000000106  |
| <b>Notified Body name:</b>                         | BSI Group The Netherlands B.V.   |
| <b>Notified Body Address:</b>                      | Say Building, John M. Keynesplein 9<br>1066 EP Amsterdam, The Netherlands      |
| <b>Notified Body Single Identification number:</b> | 2797   |

### 2. Intended use of the device

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| <b>Intended Purpose:</b>                       | memsorb™ is intended to remove carbon dioxide (CO <sub>2</sub> ) from the breathing systems of anesthetic workstations.  |
| <b>Indication(s) and target population(s):</b> | <p>memsorb™ can be used to remove CO<sub>2</sub> during general anesthesia procedures that utilize the following anesthetic vapors: desflurane and sevoflurane.</p> <p>memsorb™ is made of inert materials and does not react with anesthetic agents, therefore it may be used with no fresh gas flow restrictions.</p> <p>memsorb™ may also be used to remove CO<sub>2</sub> during general anesthesia procedures that utilize intravenous or total intravenous anesthesia.</p> <p>memsorb™ is compatible with the following anesthesia machines:<br/>Dräger Medical models: Fabius, Perseus, Primus, and Zeus.<br/>GE Healthcare model: Aisys.</p> <p>memsorb™ is for use in populations 18 years of age and older</p> |
| <b>Contraindications and/or limitations:</b>   | memsorb™ is not intended to be used with Nitrous Oxide.  |

### 3. Device description

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| <b>Description of the device:</b>  | memsorb™, a carbon dioxide (CO <sub>2</sub> ) filter, consists of an impact resistant, recyclable and BPA free plastic (Tritan™) shell that houses an inner polymeric (polymethylpentene) hollow fiber membrane. The outer shell is equipped with a machine specific top connector that allows it to replace the existing CO <sub>2</sub> absorbers that are used on the anaesthetic machine.  |
| <b>Previous generation(s) or variants if such exist, and a description of the differences:</b>                     | There are no previous generations<br><br>There are two variants of memsorb™:<br>MS-DR for use with Dräger anaesthesia machines<br>MS-GE for use with GE anaesthesia machines   |
| <b>Description of any accessories which are intended to be used in combination with the device:</b>                | <ul style="list-style-type: none"> <li>- Heat and moisture exchanger with bacterial and viral filter (HMEF)</li> <li>- Medical oxygen (O<sub>2</sub>) and medical air supply for connecting to the blender</li> <li>- Medical air-oxygen blender able to provide 21 to 100 % medical oxygen in medical air</li> <li>- A flow meter with the ability to maintain and display the blender flow rate of 13 to 15 Liters per minute (Lpm)</li> <li>- 1/4" tubing for connecting flow meter output to memsorb™</li> <li>- Scavenging system that is capable of handling a minimum flow rate of 15 Lpm</li> <li>- For passive scavenging systems: 30 mm (ANSI Standard) hose or a same-size adapter for connecting memsorb™ to the scavenging system</li> <li>- For passive scavenging systems: a scavenging pressure relief valve that conforms to ISO 80601-2- 13</li> <li>- For active scavenging systems: 5/16" tubing for connecting memsorb™ to the scavenging system</li> <li>- Tubing adapters as necessary</li> </ul> |
| <b>Description of any other devices and products which are intended to be used in combination with the device:</b> | Dräger anaesthesia machines<br>GE anaesthesia machines   |

### 4. Possible diagnostic or therapeutic alternatives

The function of memsorb™ is to remove CO<sub>2</sub> from the anaesthesia circuit via filtration, rather than via a chemical reaction, as in CO<sub>2</sub> absorbers. It is designed to fully replace chemical CO<sub>2</sub> absorbers and perform the same function. It is not a therapeutic device. memsorb™ functions as expected when etCO<sub>2</sub> remains in the normal physiological range and the concentration of vapour remains in the clinical range ensuring the patient remains anaesthetised.

### 5. Harmonised standards and CS applied

|              |   |
|--------------|---|
| EN ISO 14971 | Medical devices – Application of risk management to medical devices               |
| EN ISO 13485 | Medical device – Quality management system – Requirements for regulatory purposes |

## 6. Summary of clinical evaluation and post-market clinical follow-up (PMCF)

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|---|---|
| <b>Summary of clinical data related to equivalent device, if applicable:</b>                                      | NA  |
| <b>Summary of clinical data from conducted investigations of the device before the CE-marking, if applicable:</b> | <p>Studies provide evidence that:</p> <ul style="list-style-type: none"> <li>- memsorb™ membrane filtration technology is equivalent to chemical CO<sub>2</sub> absorbers in the ability to remove CO<sub>2</sub> from the patient rebreathing circuit during general anesthesia procedures.</li> <li>- memsorb™ membrane filtration technology for removing CO<sub>2</sub> from the patient rebreathing circuit during general anesthesia procedures is a safe and effective alternative to chemical CO<sub>2</sub> absorbers.</li> <li>- memsorb™ uses membrane-based technology and therefore inspired CO<sub>2</sub> is not a measure of the device function. Inspired CO<sub>2</sub> levels in excess of 5 mmHg may be observed. Manage expired CO<sub>2</sub> levels as per the anaesthesia machine manufacturer's instructions.</li> <li>- memsorb™ is installed on the anesthesia machines in the same space as current chemical CO<sub>2</sub> absorbers</li> <li>- The established performance and functionality of memsorb™ is safe and effective for use when removing CO<sub>2</sub> from the patient rebreathing circuit during general anesthesia procedures.</li> <li>- A leak free installation of memsorb™ is achievable on the anesthesia machines</li> <li>- memsorb™ did not negatively impact the performance of the anaesthesia machines.</li> </ul> |
| <b>Summary of clinical data from other sources, if applicable:</b>  | <p>An extensive literature review was performed to evaluate the state-of-the-art in CO<sub>2</sub> removal. The differences between memsorb™ and CO<sub>2</sub> absorbers is related to the mechanism of action. memsorb™'s mechanism of action removes CO<sub>2</sub> from the rebreathing circuit via diffusion across a chemically inert polymer membrane. A concentration gradient is maintained across the membrane using a continuous gas supply through the sweep compartment, which pulls the CO<sub>2</sub> out of the patient compartment and into the sweep gas (scavenging) compartment. The CO<sub>2</sub> enriched sweep gas is then fed into the scavenging system of the hospital, thereby removing it from the patient circuit. The risk of toxic by-product formation via chemical interaction of anesthetic vapours with the highly reactive granulate has been eliminated by using an inert membrane to remove CO<sub>2</sub>.</p>  |
| <b>Overall summary of the clinical performance and safety</b>   | <p>memsorb™ functions as expected when etCO<sub>2</sub> remains in the normal physiological range and the concentration of vapour remains in the clinical range ensuring the patient remains anaesthetised.</p>   |
| <b>Ongoing or planned post-market clinical follow-up</b>  | <p>Post-market clinical follow-up studies are not deemed necessary at this time.</p>  |

## 7. Suggested profile and training for users

For Professional Use Only

memsorb™ must be used under the constant supervision and attention of qualified health care professionals trained in the use of anaesthesia machines.

**8. Risks and warnings**
**Residual risks and undesirable effects:**

There are no side effects as memsorb™ is not intended for treatment of specific clinical conditions.

The risk of using the CO<sub>2</sub> removal filter, memsorb™, is very low since the device is used under the direct supervision and monitoring of qualified health professionals. In the event of a complete device failure, general anesthesia can be performed in the absence of any carbon dioxide removal device.

The following risks were identified that required actions to mitigate these risks:

- Risk of interoperative awareness due to device leaks.
  - o Events leading to risk: Cracks in the housing or delamination of the glue could lead to leaks and loss of anaesthetic vapour.
  - o Mitigation: Perform leak test prior to use.
- Risk of hypercapnia due to membrane fiber occlusions or defects.
  - o Events leading to risk: Occluded or defective fibers could prevent the removal of CO<sub>2</sub> from the breathing circuit.
  - o Mitigation: Each device is tested for CO<sub>2</sub> removal prior to release to market and device must only be used in conjunction with CO<sub>2</sub> monitoring.
- Risk of hypercapnia due to lack of sweep gas flow.
  - o Events leading to risk: Incorrect connection of sweep gas tubing or kinking of tubing. Loss of sweep gas flow can lead to the accumulation of CO<sub>2</sub> in the breathing circuit.
  - o Mitigation: Device must only be used in conjunction with CO<sub>2</sub> monitoring, safe operation requires that the air-oxygen sweep gas flow must be maintained at 13 to 15 Litres per minute at all times, and passive scavenging requires the use of an in-line pressure relief valve.
- Risk of bacterial or viral contamination.
  - o Events leading to risk: Bacterial and viral filter not placed in the breathing circuit.
  - o Intended for use by trained personnel

**Warnings and precautions:**

- memsorb™ must be used with an air-oxygen blender. The air-oxygen concentration in the sweep gas affects the patient-gas concentration and as a result they should be matched using the blender.
- memsorb™ must only be used in conjunction with CO<sub>2</sub> monitoring.
- CO<sub>2</sub> removal will not take place in the breathing system when memsorb™ is removed.
- memsorb™ is intended for use in adult populations 18 years of age and older.
- Safe operation requires that the air-oxygen sweep gas flow must be maintained at 13 to 15 Litres per minute at all times.
- memsorb™ removes moisture from the machine-side gas mixture.
- memsorb™ must be used with a Heat and Moisture Exchange Filter (HMEF) installed between the patient and anesthetic circuit to retain moisture on the patient side and to prevent cross-contamination.
- memsorb™ MS-DR requires a specialty functional leak test.
- Do NOT attempt to sterilize or disassemble memsorb™ under any circumstances.
- Handle memsorb™ with care. Damage may occur if the unit is bumped or knocked

**Other relevant aspects of safety, including a summary of any field safety corrective action (FSCA including FSN) if applicable:**

There are no FSCAs or FSNs.



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### 9. Other Benefits

Other benefits of using memsorb™

- eliminates the risk of exposure to dangerous caustic dust that is present in chemical CO<sub>2</sub> absorbers
- chemical composition is inert unlike chemical CO<sub>2</sub> absorbers.
- eliminates CO production
- eliminates risk of toxic by-product production unlike chemical CO<sub>2</sub> absorbers

### 10. Revision history

| Version | Change description   | Date issued |
|---------|--|-------------|
| V01     | First Issue  | 2023-09-19  |
| V02     | Add SRN  | 2024-04-22  |
| V03     | Added new SRN and GRN code, also added new warning statement to handle with care | 2024-11-24  |