VENNER PNEUX™ SYSTEM

SERVICE REQUEST FORM

☐ Venner™ Trachheal Seal Monitor  ☐ Venner™ Trachheal Seal Monitor Extension tube
☐ Venner™ PneuX P.Y.™ Endotracheal Tube  ☐ Venner™ PneuX P.Y.™ Tracheostomy Tube

Serial / Lot No(s):  CCR No.: For Venner to assign the number

Quantity(pcs):  

Date of Report:  Reporter:  (Distributor)/ (Hospital)

Contact Name:  Contact Details  

Date of Discovery:  

Discovery conditions:

☐ Pre-use check  ☐ Insertion /set up  ☐ In patient / use  ☐ After removal  ☐ Other

Fault Details:

Has the complaint sample been decontaminated?  ☐ Yes / ☐ No

Decontamination certificate supplied:  ☐ Yes / ☐ No

If you have indicated ‘No’ for the above questions, please indicate reason:

Note:
In the first instance please contact customer service to arrange complaint sample with filled fault report for return (email: quality@venner.com, Tel:+65 6511 2351 - 53)

Please identify the Serial no. of Venner™ Tracheal Seal Monitor being complaint/returned.

Once the approved for return all complaint samples should be sent directly to QA department at Chelle Medical Ltd, PO Box 221 Le Rocher, Mahé Seychelles Tel: +248 438 0900 ext 913.

Please identify the lot no. of Venner™ PneuX P.Y.™ Endotracheal Tube or Venner™ PneuX P.Y.™ Tracheostomy Tube or Venner™ Tracheal Seal Monitor extension tube being complaint/returned.

Once the approved for return all complaint samples should be sent directly to QA department at Venner Medical (Singapore) Pte. Ltd., 35 Joo Koon Circle, Singapore 629110.Tel: +65 6511 2353.