NATIONAL COMPETENT AUTHORITY REPORT

 $This form \ should \ be \ used \ for \ the \ exchange \ of \ medical \ device \ information \ between \ NCAR \ participants \ only.$

Completed forms should not be released to the public.

1. Is this report confidential?

Yes [] No [X]

2. NCA report ref. no.:	3. Local NCA reference no.:	4. Related NCA report nos.: (if any)	
DE-BfArM-2024-07-30-4754	23795/24		
5. Manufacturer Ref/Recall no.:	6. Sent by: (Name and Organization)	7. Contact person: (if different from 6)	
REC 2024-01	BfArM, Division Medical Devices Rainer Harhammer		
8. Tel:	9. Fax:	10. E-mail:	
+49 228 207 - 5390	+49 228 207 - 5300	md-vigilance@bfarm.de	

Device Data

11. Generic name/ kind of device: Spinal dynamic-stabilization system		20. CAB/Noti	
12. Nomenclature id: GMDN	13. No.: 58446	0123	
14. Trade Name and Model / Catalogue: HP HBI92527	S 2.0 Rod coupler, S=25N/mm, 27mm; N/A /	21a. Device a	
15. Software version: N/A			
16. Serial no.: N/A	17. Lot/batch no.: Please see REC 2024-01 Product List	21b. Risk Clas	
18. Manufacturer: Paradigm Spine GmbH	19. Authorized rep:	22. Action tak	
Country: DE	Country:	[] Safeguard A [X] Field Safe Action	
Full Address: Eisenbahnstrasse 84	Full Address:	[] Other (spec	
78573			
Wurmlingen			
Contact:	Contact:		
Camilla-Noémi Sommer			
Tel:	Tel:		
07461963599-0			
Fax:	Fax:		
07461963599-20			
E-mail:	E-mail:		
csommer@paradigmspine.com			

20. CAB/Notified Body no.:
0123
21a. Device approval status:
21b. Risk Class: MDD Class
IIb 22. Action taken:
22. Action taken.
[] Safeguard Action
[X] Field Safety Corrective
Action
[] Other (specify)

Event Data

23a. Background information and reason for this report:

The manufacturer has informed BfArM about a corrective action concerning the above mentioned device.

23b. Is the investigation of the report complete? Yes [\mathbf{X}] No []

24a. Conclusions:

The manufacturer issued the enclosed FSN.

24b. Have the manufacturer's actions been made public? Yes [X] No []

24c. The originator of this NCAR will take the lead and co-ordinate the investigation - Yes [X] No []

25a. Recommendation to receivers of this report:

For your information and be aware of the problem.

25b. Device known to be in the market in (include copy of manufacturer's letter):

AT, DE, GB, IT

25c. Device also marketed as (trade name):

Report Distribution

26a. This report is being distributed to:

[] The NCAR Secretariat for further distribution to FULL NCAR PARTICIPANTS.

[] The NCAR Secretariat for further distribution to ALL NCAR PARTICIPANTS.

[X] EEA states, EC, and EFTA

[] The following targeted NCAs:

[X] The manufacturer / authorized rep.: Paradigm Spine GmbH /