

Patient Acknowledgement Form

Oticon Medical Medical Device Recall and Implant Hazard Alert

of EVO and CLA Implants

TGA Recall Reference Number: RC-2021-RN-02092-1

Product Name: Neuro Zti Evo and Cla Implants

Neuro Zti Evo - ARTG 284150 - Catalogue number - M80185; SN from and above NZB04074, and

Neuro Zti Cla - ARTG 284148 - Catalogue number - M80184; SN from and above NZA02454

I acknowledge receipt of the 'Oticon Medical Medical Device Recall and Implant Hazard Alert_Patient Letter' with notice date 22/10/2021 relating to the above products.

Please acknowledge you have read and understood the contents of the letter:

FROM:

Name:	
Email:	
Phone:	
Date:	

Signature:_____

Return completed form by email or post to:

Name: Tracey King

Position: Business Unit Manager

Organisation: Oticon Medical

Address: Suite 4, Level 4, Building B, 11 Talavera Road, North Ryde NSW 2113

Email: info@oticonmedical.com.au

Subject of email: Oticon Medical Medical Device Recall and Implant Hazard

Alert_Patient Letter

Phone: 1800 721 027