



# EG-ZERTIFIKAT

(Vollständiges Qualitätssicherungssystem)



Hiermit wird bescheinigt, dass das Unternehmen

## Bernhard Förster GmbH

Westliche Karl-Friedrich-Straße 151  
75172 Pforzheim  
Deutschland

ein vollständiges Qualitätssicherungssystem für jede Phase von der Auslegung bis zur Endkontrolle der Produkte eingeführt hat und anwendet.

Durch ein Audit, dokumentiert in einem Bericht, durchgeführt von DQS Medizinprodukte GmbH, wurde der Nachweis erbracht, dass dieses Qualitätssicherungssystem die Forderungen gemäß

## Anhang II – ohne Abschnitt 4 der Richtlinie 93/42/EWG des Rates über Medizinprodukte

bezüglich folgender Medizinprodukte erfüllt:

Kieferorthopädische und orthodontische Produkte gemäß Anhang.

Der Hersteller unterliegt der Überwachung nach Anhang II, Abschnitt 5. Die CE-Kennzeichnung mit der Kennnummer der Benannten Stelle (0297) darf an den auf dem Zertifikat gelisteten Produkten angebracht werden. Für das Inverkehrbringen von Klasse III Produkten ist eine EG Produktauslegungsprüfung nach Anhang II, Abschnitt 4 notwendig. Das Zertifikat beschränkt sich für Produkte der Klasse I(s) (I(s) = Produkte der Klasse I die in sterilem Zustand in Verkehr gebracht werden) ausschließlich auf die Herstellung im Zusammenhang mit der Sterilisation und der Aufrechterhaltung der Sterilität. Das Zertifikat beschränkt sich für Produkte der Klasse I(m) (I(m) = Produkte der Klasse I mit Messfunktion) ausschließlich auf die Herstellung im Zusammenhang mit der Konformität der Produkte mit den messtechnischen Anforderungen.

Zertifikat-Registrier-Nr.	055387 MR2
Zertifikat-ID	170774634
Gültig ab	2021-03-12
Gültig bis	2023-12-12
Frankfurt am Main, den	2021-03-12

## DQS Medizinprodukte GmbH

Sigrid Uhlemann  
Geschäftsführerin

Dr. Thomas Feldmann  
Leiter der Zertifizierungsstelle

August-Schanz-Straße 21, 60433 Frankfurt am Main,  
Tel. +49 (0) 69 95427-300, [medical.devices@dqs-med.de](mailto:medical.devices@dqs-med.de)

Die DQS Medizinprodukte GmbH ist Benannte Stelle gemäß der Richtlinie 93/42/EWG des Rates über Medizinprodukte mit der Kennnummer 0297.



**Anhang zum Zertifikat**  
**Zertifikat-Registrier-Nr.: 055387 MR2**  
**Zertifikat-ID: 170774634**  
**Gültig ab: 2021-03-12**

## **Bernhard Förster GmbH**

Westliche Karl-Friedrich-Straße 151  
75172 Pforzheim  
Deutschland

<b>Produktfamilie</b>	<b>Produkt</b>	<b>Klasse</b>
Schrauben	Dehn- und Palatinalsplitschrauben und Zubehör	Ila
Drähte	Drähte, Drahtbögen und vorgeformte Drähte	Ila
Drähte mit Krafteinwirkung	Vorgeformte Drähte und Drahtteile auch mit Federfunktion	Ila
Attachments	Brackets und Bukkalröhrchen und deren Zubehör	Ila
Bänder	Molarenbänder mit und ohne aufgeschweißte Attachments	Ila
Zubehör	Elasticartikel zum Ligieren, Rotieren und Ausüben von Kräften auf Zähne	Ila
Implantate	Kieferorthopädische Verankerungsschrauben	Ilb
Kieferorthopädische Kunststoffe und Zubehör	Kieferorthopädische Kunststoffmaterialien und Zubehör	Ila
	Kunststoffapparaturen zur kieferorthopädischen Behandlung	Ila

## Manufacturer's Declaration

in relation to Regulation (EU) 2023/607 amending Regulations (EU) 2017/745 and (EU) 2017/746 as regards the transitional provisions for certain medical devices and in vitro diagnostic medical devices, in particular with respect to

- the validity of certificates issued under Council Directive 90/385/EEC on Active Implantable Medical Devices (AIMDD) or Council Directive 93/42/EEC on Medical Devices (MDD) (Directive Certificates) *and/or*<sup>1</sup>
- the compliance of the devices and us as their manufacturer with the conditions for the continued placing on the market and putting into service

Manufacturer name	Bernhard Förster GmbH
Manufacturer address and contact details	Westliche Karl-Friedrich-Straße 151, 75172 Pforzheim (Tel: +49 7231 459-0, Fax: +49 7231 459-102)
Single Registration Number (SRN) (if available)	DE-MF-000006256

Authorised Representative name (if applicable)	-
Authorised Representative address and contact details	-
Single Registration Number (SRN) (if available)	-

Notified body name (if applicable)	<input checked="" type="checkbox"/> See attached schedule
Notified body number (if applicable)	<input checked="" type="checkbox"/> See attached schedule
Directive Certificate number(s) to which this confirmation is made (if applicable)	<input checked="" type="checkbox"/> See attached schedule

<sup>1</sup> The first condition is not applicable in case of devices for which the conformity assessment procedure pursuant to MDD did not require the involvement of a notified body, for which the declaration of conformity was drawn up prior to 26 May 2021 and for which the conformity assessment procedure pursuant to this Regulation requires the involvement of a notified body.

Original expiry date as indicated on the Directive Certificate prior to the extension of the validity (if applicable)	<input checked="" type="checkbox"/> See attached schedule
End date of extended validity/transition period	<input checked="" type="checkbox"/> See attached schedule

We, as the manufacturer declare under our sole responsibility:

- for the above listed **Directive Certificate** (or see attached schedule, if multiple certificates) the conditions for the legal extension of validity as required in Article 120.2 of the MDR are met *and/or*<sup>2</sup>
- the listed **device(s)** in the attached schedule and we as their manufacturer are in compliance with the conditions listed in Article 120.3c of the MDR for continued placing on the market and putting into service,

namely by fulfilling the following conditions:

➤ **Directive Certificate(s)** as listed above or in the attached schedule

- Directive Certificate(s) covering the listed device(s) was/were issued after 25 May 2017, was/were valid on 26 May 2021 and have not been withdrawn afterwards.

*Choose applicable statements:*

Expired *before* 20 March 2023:

- Before the original date of expiry as indicated on the Directive Certificate(s), we and the notified body have signed written agreement(s) in accordance with Section 4.3, second subparagraph of Annex VII to this Regulation for the conformity assessment(s) in respect of the device(s) covered by the expired certificate(s) or in respect of a device(s) intended to substitute that/those device(s), or
- A Competent Authority has granted a derogation from the applicable conformity assessment procedure in accordance with Article 59(1) MDR (may be provided upon request), or
- A Competent Authority has required the manufacturer, in accordance with Article 97(1) MDR, to carry out the applicable conformity assessment procedure (may be provided upon request)

*Choose one of the following statements only if a derogation per Article 59(1) or a requirement per Article 97(1) has been granted by a Competent Authority:*

- Formal application(s) to the notified body in accordance with Section 4.3, first subparagraph of Annex VII MDR for conformity assessment has/have been made or will be made/submitted by us to a notified body no later than 26 May 2024 for the device(s) listed in the attached schedule or its/their substitute(s) and signed written agreement(s) is/will be

<sup>2</sup> The first condition is not applicable in case of devices for which the conformity assessment procedure pursuant to MDD did not require the involvement of a notified body, for which the declaration of conformity was drawn up prior to 26 May 2021 and for which the conformity assessment procedure pursuant to this Regulation requires the involvement of a notified body

in place in accordance with Section 4.3, second subparagraph of Annex VII MDR before 26 September 2024.

- We do not intent to lodge an application for conformity assessment by 26 May 2024, therefore the transition period will end on 26 May 2024.



- Expired/expires *after* 20 March 2023:

*Choose one applicable statement:*

- Formal application(s) to the notified body in accordance with Section 4.3, first subparagraph of Annex VII MDR for conformity assessment has/have been made or will be made/submitted by us to a notified body no later than 26 May 2024 for the device(s) listed in the attached schedule or its/their substitute(s) and signed written agreement(s) is/will be in place in accordance with Section 4.3, second subparagraph of Annex VII MDR before 26 September 2024.
- We do not intent to lodge an application for conformity assessment by 26 May 2024, therefore the transition period will end on 26 May 2024.

➤ **Upclassified devices**

In case of devices for which the conformity assessment procedure pursuant to MDD did not require the involvement of a notified body, for which the declaration of conformity was drawn up prior to 26 May 2021 and for which the conformity assessment procedure pursuant to this Regulation requires the involvement of a notified body:

*Choose one applicable statement:*

- Formal application(s) to the notified body in accordance with Section 4.3, first subparagraph of Annex VII MDR for conformity assessment has/have been made or will be made/submitted by us to a notified body no later than 26 May 2024 for the device(s) listed in the attached schedule or its/their substitutes and signed written agreement(s) is/will be in place in accordance with Section 4.3, second subparagraph of Annex VII MDR before 26 September 2024.
- We do not intent to lodge an application for conformity assessment by 26 May 2024, therefore the transition period will end on 26 May 2024.

➤ **Quality Management System (QMS)**

*Choose one applicable statement:*

- A QMS in accordance with Article 10(9) MDR will be put in place by no later than 26 May 2024.
- A QMS in accordance with Article 10(9) MDR is in place.
- A notified body has issued the attached certificate for the MDR-compliant QMS.

➤ **Device(s) as listed in the attached schedule**

- The device(s) continue to comply with the AIMDD or MDD.
- There are no significant changes in the design and intended purpose.
- The device(s) do not present an unacceptable risk to health or safety of patients, users or other persons, or to other aspects of the protection of public health.



**Schedule of Devices**

The above Manufacturer's Declaration is valid for the following devices:

Identification of the device(s) <sup>3</sup> (e.g., device name, family/group name, device model or catalogue number)	Directive Certificate number(s) to which this confirmation is made (if applicable)	Original expiry date as indicated on the Directive Certificate (s) prior to the extension of the validity (if applicable)	Notified Body name and number that issued the Directive Certificate (if applicable)	Notified Body name and number where the MDR application was lodged/contract signed (if applicable)	End date of extended validity / transition period	Substitute Device(s) (if applicable)
<b>Headgears &amp; Traction Bands</b>	<b>Cert. Reg. No. 055387 MR2/ Cert. Unique ID 170774634</b>	<b>2023-12-12</b>	<b>DQS Med GmbH (CE0297)</b>	<b>DQS Med GmbH (CE0297)</b>	<b>2028</b>	-
<b>Bands and Molar Bands with Prewelded Attachment</b>						-
<b>Brackets, Buccal Tubes and Accessories</b>						-
<b>Expansion Screws</b>						-
<b>Wires and Arches</b>						-
<b>Intra-Extra Oral</b>						-
<b>Coldpolymerizing Plastics</b>						-
<b>OrthoEasy Pin &amp; Pal</b>						-
<b>Palatal Split Screw</b>						-
<b>Track Thermoforming Foils</b>						-

<sup>3</sup> for devices with AIMDD/MDD certificate(s) the identification should be as in the certificate, and only if the certificate has a generic scope it should be as defined above)



<b>Preformed Wires &amp; Springs</b>						-
--	--	--	--	--	--	---