## MANUFACTURER'S DECLARATION OF CONFORMITY

AUSTRALIAN THERAPEUTIC GOODS (MEDICAL DEVICES) REGULATIONS 2002

## DECLARATION OF CONFORMITY ASSURANCE PROCEDURES

This is a declaration of conformity made under clause 6.6 of Schedule 3 of the Australian *Therapeutic Goods (Medical Devices) Regulations 2002*.

Manufacturer's Name:

Restorative Therapies, Inc.

**Business Address:** 

8098 Sandpiper Circle

Suite M

Nottingham, MD 21236

USA

Medical Device(s):

**Xcite Functional Electrical Stimulation System** 

Classification:

Class IIa

**GMDN Code and Term:** 

46571 Physical therapy electrical stimulation system, line-

powered

Scope of Application:

All devices

Each kind of medical device to which the declaration of conformity procedures applies, the production quality assurance procedures have also been applied to the device. Each kind of medical device to which the technical documentation applies complies with the applicable provisions of the essential principles, the classification rules, and these procedures.

**Product Quality Management System Certificate:** 

SGS United Kingdom Ltd Certificate US15/842321

Standards Applied:

ISO 13485:2016

EN ISO 13485:2016

Authorised Signatory:

Edward Burkot, QA&R manager

Name, Position

07 DEC 2022

Date