DECLARATION OF BLOOD PRESSURE MEASURING DEVICE EQUIVALENCE

A SIGNED COPY WILL BE POSTED ON THE www.dableducational.org WEBSITE

SECTION A - Please complete all items.

I Ken Zhai,a Director of Guangdong Transtek Medical Electronics Co.,Ltd ,
Name of a Company Director — Company name

hereby state that there are no differences that will affect blood pressure measuring accuracy between the

Maker[a]	Kinetik Medical Devices Limited	*Address*	Unit 3, Perrywood Business Park, Honeycrock Lane, Salfords, Surrey RH15DZ
Manufacturer[b]	Harvard Medical Devices Ltd. HK	*Address*	1002, Railway Plaza, TST, HK
Brand[c]	Kinetik Wellbeing	Model[d]	WBP1

Blood pressure measuring device for which validation is claimed. If alternative model names are used, include all.

blood pressure measuring device and the validated blood pressure measuring device

Maker[a]	Guangdong Transtek Medical Electronics Co.,Ltd	*Address*	Zone A, No.105 ,Dongli Road, Torch Development District, Zhongshan,528437,Guangdong,China
Manufacturer[b]	Guangdong Transtek Medical Electronics Co.,Ltd	*Address*	Zone A, No.105 ,Dongli Road, Torch Development District, Zhongshan,528437,Guangdong,China
Brand[c]	TRANSTEK	Model[d]	TMB-1491

Existing validated blood pressure measuring device.

which has previously passed the ESH2010 protocol, the results of which were published as follows:

Tian H., Zeng S., Zhong X., Gong W. and Liu W. Validation of Transtek blood pressure monitor TMB-1491 for self-measurement according to the European Society of Hypertension International Protocol revision 2010. Blood Pressure Monitor. 2015 May

Full reference

The only differences between the devices involve the following components:

Tick one box for each item 1–18.

Part I	1	Algorithm for Oscillometric Measurements	Yes ☐	No ☒	N/A[e] ☐
	2	Algorithm for Auscultatory Measurements	Yes ☐	No ☐	N/A[f] ☒
	3	Artefact/Error Detection	Yes ☐	No ☒	
	4	Microphone(s)	Yes ☐	No ☐	N/A[f] ☒
	5	Pressure Transducer	Yes ☐	No ☒	
	6	Cuffs or Bladders	Yes ☐	No ☒	
	7	Inflation Mechanism	Yes ☐	No ☒	
	8	Deflation Mechanism	Yes ☐	No ☒	
Part II	9	Model Name or Number	Yes ☒	No ☐	
	10	Casing	Yes ☒	No ☐	
	11	Display	Yes ☒	No ☐	
	12	Carrying/Mounting Facilities	Yes ☐	No ☒	
	13	Software other than Algorithm	Yes ☒	No ☐	
	14	Memory Capacity/Number of stored measurements	Yes ☒	No ☐	
	15	Printing Facilities	Yes ☐	No ☐	N/A[g] ☒
	16	Communication Facilities	Yes ☐	No ☐	N/A[g] ☒
	17	Power Supply	Yes ☐	No ☒	
	18	Other Facilities	Yes ☐	No ☐	N/A[g] ☒

An explanation of each item ticked "Yes" must be included in *Section B* or on a separate sheet.

Notes:
a Provide the name and address of the actual maker of the device.
b Provide the name and address of the legal manufacturer of the device, even if it is the same as that of the maker.
c Provide the name of the brand under which it is sold, even if it is the same as that of the manufacturer or maker.
d Provide the model name. If alternative or internal model names are used, include all. Each device must be uniquely identifiable.
e Only tick N/A (Not Applicable) if neither device measures blood pressure using the oscillometric method.
f Only tick N/A (Not Applicable) if neither device measures blood pressure using the auscultatory method.

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g Only tick N/A (Not Applicable) if neither device provides printing, communication or other facilities, as appropriate.

SECTION B An explanation for each item, 1 to 18, ticked "Yes" in Section A must be provided here or in an attached document. All differences between the devices must be described.

See attached document

SECTION C Please check that the following are included with the application

A manual for the validated device	☒
A manual for the device for which equivalence is being sought	☒
An image of the validated device	☒
An image of the device for which equivalence is being sought	☒
An image of the screen layout of validated device*	☒
An image of the screen layout of the device for which equivalence is being sought*	☒

* Screen layouts shown complete, and without obscuring labels or lines, in manuals need not be included separately.

SECTION D Complete all items, bar signatures and seal, online and print. Sign and seal it then send the original to our address below. Please email a signed copy of this form, together with the manuals and images for both devices, to info@dableducational.org.

Signature of Director  Company Stamp/Seal 

Name Ken Zhai

Date August 21st 2019,

Signature of Witness 

Name Elly He

Address Zone A, No.105 ,Dongli Road, Torch Development District,

Zhongshan,528437,Guangdong,China