10th November 2026

Field Action Response Form

MDS-26-06177

Return to **BDFieldactions@bd.com** for this action to be considered closed for your organisation.

NOTE: *If you were forwarded this Notice via a distributor/3rd party, return your completed form to that organisation for reconciliation purposes.*

By signing below, you confirm this Notice has been read, understood and all recommended actions have been implemented as required.

Select one check box below

☐	No affected devices are available for destruction. Affected devices have been used. *All product that is not available for destruction will be considered as dispositioned at your location and therefore physically unavailable unless otherwise specified*

OR

☐	Affected devices have been destroyed. *Enter the lot number and number of units destroyed.*	REF:	Lot Number:	Quantity in units:
		REF:	Lot Number:	Quantity in units:
		REF:	Lot Number:	Quantity in units:

Organisation Name:			
Department *(Optional)*:			
Address:			
City:		**Postcode:**	
Country:			
Name:			
Email address:		**Telephone number:**	
Name of your supplier for this product *(if not direct from BD)*:			
Signature:		**Date:**	
Additional information *(Optional)*:			