DEPARTMENT OF HEA	LTH AND HUMAN SI UG ADMINISTRATION	ERVICES	
DISTRICT ADDRESS AND PHONE NUMBER		DATE(S) OF INSPECTION	
300 River Place, Suite 5900		12/03/2013 - 12/10/2013*	
Detroit, MI 48207		FEI NUMBER	
(313) 393-8100 Fax: (313) 393-8139		3005718816	
Industry Information: www.fda.gov/oc/industry			
NAME AND TITLE OF INDIVIDUAL TO WHOM REPORT ISSUED			
TO: Bryan L. Crutchfield, Managing Dire	ctor		
FIRM NAME	STREET ADDRESS		
Materialise USA LLC	44650 Helm (	Ct	
CITY, STATE, ZIP CODE, COUNTRY	TYPE ESTABLISHMENT INSPECTED		
Plymouth, MI 48170-6061	Manufacturer		

This document lists observations made by the FDA representative(s) during the inspection of your facility. They are inspectional observations, and do not represent a final Agency determination regarding your compliance. If you have an objection regarding an observation, or have implemented, or plan to implement, corrective action in response to an observation, you may discuss the objection or action with the FDA representative(s) during the inspection or submit this information to FDA at the address above. If you have any questions, please contact FDA at the phone number and address above.

The observations noted in this Form FDA-483 are not an exhaustive listing of objectionable conditions. Under the law, your firm is responsible for conducting internal self-audits to identify and correct any and all violations of the quality system requirements.

## **DURING AN INSPECTION OF YOUR FIRM I OBSERVED:**

## **OBSERVATION 1**

Process validation activities and results have not been adequately documented.

Specifically, process validation activities and results were not adequately documented on your firm's selective laser sintering (SLS) machines used to manufacture your firm's Class II orthopedic and cranial maxillofacial patient specific surgical guides. For example:

- (A) The temperature setting (i.e., parameter) used during the following installation qualifications (IQ) performed was not documented:
  - IQ dated 9/17/10 for SLS Machine #(b) (4)
  - IQ dated 9/21/10 for SLS Machine # (b) (4)
- (B) Your firms management stated the scan spacing hatching, scan speed hatching, and laser power hatching parameters were not able to be retrieved for the process qualification (PQ) dated 6/1/10 for SLS Machine # (b) (4)
- (C) Your firm's management stated worst case operating parameters are established during IQ. However, the requirement established for the calculated laser energy density parameter (J/mm²), which is based on scan spacing hatching, scan speed hatching, and laser power hatching, includes only a minimum value but no maximum.

## **OBSERVATION 2**

There is no documentation of the review and evaluation of a process and revalidation of a process performed in response to changes or process deviations.

Specifically, there is no documentation of the review/evaluation and revalidation (where appropriate) of your firm's selective laser sintering (SLS) machines when changes were made to the process parameters originally established during the installation (IQ) and/or performance qualifications (PQ). For example, as recently as 12/9/13 (Build # (b) (4), the scan

EMPLOYEE(S) SIGNATURE

Sargum C Sood, Investigator

DATE ISSUED

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12/10/2013

	DEPARTMENT OF HEAD FOOD AND DRU	TH AND HUMAN	SERVICES	
Detroit, MI (313) 393-810	ce, Suite 5900 48207 0 Fax:(313) 393-8139 rmation: www.fda.gov/oc/indu	stry	DATE(S) OF INSPECTION 12/03/2013 - 12/10 FEI NUMBER 3005718816	/2013*
	Crutchfield, Managing Direc	tor   STREET ADDRESS		
Materialise U		44650 Helm Ct Type establishment inspected		
Plymouth, MI	48170-6061	Manufacturer		
IQ dated 9/17/10. As another example (b) (4) °C. However, (b) (4) °C, which is a Your firm's procedu 2/22/12, 4/9/13, 9/2 (section 3.1.6) refer for revalidation to be	ad laser power hatching parameters for SL Also, as of 12/9/13 (Build #(b) (4) the sc were set above what was validated during to the temperature settings established during builds from 9/4/13 to 11/6/13 (5) total bubove what was established during IQ.  The settiled "Process Validation Medical Process Validation Medical Process to revalidation as a possibility when proceed documented.  The setting parameters for SL Also, as of 12/9/13 (5) total bubove what was established during IQ.  The settiled "Process Validation Medical Process Validation as a possibility when proceed documented.	an spacing hatching the IQ dated 9/2 and the IQ dated 9/2 and 11/24/1 and 11/24/1 and 11/24/1 and "Processess changes occur	21/10.  2/15/11 for SLS # total builds) value	were (5)(3)°C to were run at  ev.1-3; Effective: 1; Rev.1; 1/9/09) s the evaluation
surgical guides.				
Specifically, section	a 3.1 of the procedure titled "Maintenance uch, P-MPROD-016 requires "(b) (4)  . However the ware not performed within +/- 7 days of	" (P-MPROD-010	5; Rev.4; Effective: 11/23/12	preventive
the Januar earlier that (b) (4) calibration	eventive maintenance schedule titled "PM y 2013 scan calibration for your Optical So in the original due date of 1/31/13. Similar was performed on 2/15/13, 13 days eas were not within the +/- 7 day time frame ented on F-MPROD-021.	canner #(b) (4) ly, the February 2 rlier than the orig	was performed on 1/4/2013 scan calibration for Optimal due date of 2/28/13. The	13, 27 days ical Scanner # e dates of these
IR calibrated documented Further, the	eventive maintenance schedule titled "Macion for your selective laser sintering (SLS) and on F-MPROD-021 for not performing the results of the IR calibration were not recy P-MPROD-016:	) machine # (b) (4 ne calibration.		No reasoning was
SEE REVERSE OF THIS PAGE	EMPLOYEE(S) SIGNATURE  Sargum C Sood, Investigator	Sara	C. Sood	12/10/2013
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DISTRICT ADDRESS A		RUG ADMINISTRATION  DATE(S) OF INSPECTION	
300 River Place, Suite 5900		12/03/2013 - 12/10/2013	
Detroit,	MI 48207	FEINUMBER	
	-8100 Fax: (313) 393-8139	3005718816	
	Information: www.fda.gov/oc/ind	lustry	
TO: Brya	n L. Crutchfield, Managing Dire	ector	
FIRM NAME	in it or deconization , managing bire	STREET ADDRESS	
	se USA LLC	44650 Helm Ct	
CITY, STATE, ZIP COD		TYPE ESTABLISHMENT INSPECTED	
Plymouth,	MI 48170-6061	Manufacturer	
_	01/05/12		
	01/25/13		
	05/03/13		
	10/04/13		
	10/18/13		
	11/01/13		
	11/15/13		
	11/29/13		

Specifically, on 12/1/11 your firm performed a replacement of a label (lot # 5652131) with a new label (lot # 56524885) for your Class II patient specific CR-Flex Pin Guides (Item # 00-5970-000-1) which were originally shipped from your firm to your partner on 11/30/11. However, your firm's management stated there was no record with documented justification for not reporting this correction to the FDA.

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Sargum C Sood, Investigator Sangua C. Sood 12/10/2013

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DEPARTMENT OF HEALTH AND HUMAN SERVICES FOOD AND DRUG ADMINISTRATION DISTRICT ADDRESS AND PHONE NUMBER 12/03/2013 - 12/10/2013\* FEINUMBER 300 River Place, Suite 5900 Detroit, MI 48207
(313) 393-8100 Fax:(313) 393-8139
Industry Information: www.fda.gov/oc/industry
NAME AND TITLE OF INDIVIDUAL TO WHOM REPORT ISSUED 3005718816 Bryan L. Crutchfield, Managing Director STREET ADDRESS Materialise USA LLC 44650 Helm Ct TYPE ESTABLISHMENT INSPECTED Plymouth, MI 48170-6061 Manufacturer **Observation Annotations** Observation 1: Promised to correct. Observation 2: Promised to correct. Observation 3: Promised to correct. Observation 4: Reported corrected, not verified. \* DATES OF INSPECTION: 12/03/2013(Tue), 12/04/2013(Wed), 12/05/2013(Thu), 12/06/2013(Fri), 12/10/2013(Tue) EMPLOYEE(S) SIGNATURE DATE ISSUED Sargum C Sood, Investigator SEE REVERSE 12/10/2013 OF THIS PAGE FORM FDA 483 (09/08) INSPECTIONAL OBSERVATIONS PAGE 4 OF 4 PAGES