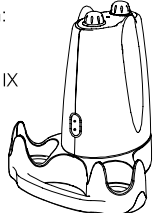



# Test sheet for mamivac® SENSITIVE-CFH

## For use in hospitals

Serial number of breast pump: ..... Serial number of test unit: .....

Purchasing date of breast pump: .....

<b>mamivac® Sensitive-CFH:</b> REF 286000	Device classification: Classified acc. to 93/42/EEC Article 9, Appendix IX		<b>mamivac® TEST UNIT</b> REF 2899120
Nominal voltage: 100-240 V/AC 12 V DC	CE 0124		
Power consumption: max. 0.62 A/AC max. 1.25 A/DC	Weight: 1.3 kg		
H x W x D (mm): 24 cm x 21 cm x 22 cm	Vacuum: -5 to -33 kPa (±15%)		
Mean vacuum: Device for intermittent sucking without continuous vacuum	Power cable: 2 cores 2 x 0.75 mm; length 3.0 m with Euro plug (REF 283003)		
H05VVH2-F	Protection class: II		

Date	Vacuum -33 kPa (±15%)		OK	Not OK	Comment	Next test	Tester
	-15%	+15%					
	-28 kPa	-38 kPa	<input type="checkbox"/>	<input type="checkbox"/>		Year: ..... Month: ..... ..... 1 2 3 4 5 6 7 8 9 10 11 12	
	-28 kPa	-38 kPa	<input type="checkbox"/>	<input type="checkbox"/>		Year: ..... Month: ..... ..... 1 2 3 4 5 6 7 8 9 10 11 12	
	-28 kPa	-38 kPa	<input type="checkbox"/>	<input type="checkbox"/>		Year: ..... Month: ..... ..... 1 2 3 4 5 6 7 8 9 10 11 12	
	-28 kPa	-38 kPa	<input type="checkbox"/>	<input type="checkbox"/>		Year: ..... Month: ..... ..... 1 2 3 4 5 6 7 8 9 10 11 12	
	-28 kPa	-38 kPa	<input type="checkbox"/>	<input type="checkbox"/>		Year: ..... Month: ..... ..... 1 2 3 4 5 6 7 8 9 10 11 12	
	-28 kPa	-38 kPa	<input type="checkbox"/>	<input type="checkbox"/>		Year: ..... Month: ..... ..... 1 2 3 4 5 6 7 8 9 10 11 12	
	-28 kPa	-38 kPa	<input type="checkbox"/>	<input type="checkbox"/>		Year: ..... Month: ..... ..... 1 2 3 4 5 6 7 8 9 10 11 12	

When preparing electric mamivac® breast pumps, the manufacturer's guidelines shall be observed.  
Additional important technical information and copies of this form can be obtained at [www.kaweco.de](http://www.kaweco.de).  
**Please contact the manufacturer immediately, if the required values are not reached.**



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