



## **Equipment Materials Composition Declaration Form** **Instructions**

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**Purpose:** This document contains instructions for both Carestream Health personnel requesting declarations from suppliers and Suppliers who are responding to a solicited or unsolicited request for a declaration. See the appropriately titled sections for applicable directions.

Carestream Health has adopted IPC-1752 as the Materials Composition Declaration Form supporting MCD-1752. Adobe Reader® 7.0.5 is required as minimum to open forms IPC-1752.

### **Instructions for Carestream Health Personnel Requesting IPC-1752 be sent to a Supplier**

#### **1. Fill out the Requester Information section on Page 1 of IPC-1752**

- Some fields have been pre-populated, please leave the data in these fields as is.
- Use the drop down date box provided in the *Request Date* field
- Use the drop down date box provided in the *Respond by Date* field
- Fill in the *Contact Name, Title, Phone* and *Email* information in the appropriate fields
- Fill out *Requester comments or URL for additional information* field with specific notes to provide to the supplier
- Provide the Carestream Health part number in the *Item Number* field, and Supplier part number in *Mfg Item Number* field
  - Usually the request is for one item, however, multiple items may be requested provided that they are all identical in material properties, shape, size, identification scheme and weight.
  - **Use a semicolon (;) to delineate multiple item numbers.**
- Fill in remaining optional fields in *Requester Information* section as desired.
- Once the requester information is complete the *Requester Information* portion of the form can be locked to prevent tampering. Once locked the information in these fields **cannot** be changed: thus it is important to check that all data is correct and as intended.
  - Before locking the fields save the file locally (File -> Save As) so future modifications can be made if necessary without starting from a blank form. Indicate that the file is unlocked in the file name (ex, “suppliername\_partnum\_unlock.pdf”).

- Click the Lock Requester Fields button.
- Once the *Requester Information* fields are locked, save the PDF form locally using a different name (File - > Save As – ex, “suppliername\_partnum\_locked.pdf”).
- Send the locked PDF file to the Supplier, requesting the completed form be returned to the email address supplied in the *Destination – URL or Email Address* (HG-SupplierDeclaration@Carestreamhealth.com) with a (cc) to the *Contact Email* specified in the *Requester Information* section. A copy of EKMD-1752 and the IPC-1752 instructions or a reference to the website, <http://www.carestreamhealth.com/ehs-supplier.html>, should be attached to the request. A cover letter template for the purpose of this correspondence is available in Appendix A.

### **Instructions for Suppliers**

There are three sections in IPC-1752 that suppliers are expected to fill out to the best of their ability before returning to Carestream Health: 1) Supplier Information, 2) RoHS Material Composition Declaration, and 3) Joint Industry Guide (JIG) Material Composition Declaration for Electronic Products. The following are basic instructions for filling out this form. See Appendix B for a Glossary of Terms. For more detailed information go to the IPC website ([http://members.ipc.org/committee/drafts/2-18\\_d\\_MaterialsDeclarationRequest.asp](http://members.ipc.org/committee/drafts/2-18_d_MaterialsDeclarationRequest.asp)).

#### **1. Fill out the Supplier information requested on Page 1 of IPC-1752.**

- All fields marked with an asterisk (\*) are required.
  - For definitions see the “Glossary of Terms”.
- First complete the *Company Name* and information.
- Use the drop down date box to provide a date in the Response Date field.
- Complete the contact information.
- If the Authorized Representative is the same as the *Contact Name*, click the
  - “Duplicate Contact -> Authorized Representative” button to duplicate the information. Do not write “same as above” in those fields.
- Complete *Supplier Comments or URL For Additional Information* field if there is a website that Carestream Health can use to obtain additional Supplier information.
- The *Requester Item Number, Mfg Item Number and Name, Version* and *Manufacturing Site* fields have all been pre-populated by Carestream Health. If the information is not accurate, the supplier shall identify discrepancies in the *Supplier Comment* field, select “Item(s) is unknown, no information is available” as the *RoHS Declaration*, and return to Carestream Health. Carestream Health will update the form with the correct information and resubmit to the Supplier.
- A suggested part number can be provided in the *Alternate Recommendation* fields. This can be used for a corrected part number or to suggest a RoHS compliant part number. If the part number has changed, if there is an equivalent alternate, or if the information request is for an item or part that is obsolete or unknown.

#### **2. Fill out the RoHS Material Composition Declaration on Page 2 of IPC-1752.**

- Use the drop down box in the RoHS Declaration field to select one of six categories that the declaration supports.
- If exemptions apply choose the applicable exemptions by selecting the


box to the left of the listed exemption.

- Use the pull down menu in the Supplier Acceptance field to **Accept** the Custom RoHS Declaration.

### **3. Fill out the Joint Industry Guide (JIG) Material Composition Declaration For Electronic Products on Page 3 of IPC-1752-1.**

- Declare whether the item substances exceed the threshold levels shown in the table and report accordingly. Where threshold levels include the words "intentionally added", substances must be declared if they are added intentionally, regardless of threshold level.
- For each RoHS substance, identified with dual asterisks (\*\*), report the worst case PPM at the homogeneous material level and optionally the total weight of the substance in the item. For examples of reporting at the homogeneous level see IPC-1752-3 pg 43.
- For all remaining (non-RoHS) JIG A & B substances, and "Other" substances, Report the total weight and optionally the PPM at the part level for each item.
- The top of the form has three buttons which permit the automatic filling of all the fields with a No declaration.

### **4. Digitally sign the form**

- An authorized representative of the company must use the digital signature feature to sign the form.
  - Before signing the document make sure the required information is accurate and complete.
- Once the information is complete the Supplier Information portion of the form can be locked to prevent alterations. Once locked the information in these fields **cannot** be changed: thus it is important to check that all data is correct and as intended.
  - Before locking the fields the supplier may want to save the file locally (File -> Save As) so that future modifications can be made if necessary.
  - *Optional*: Export the file to XML using the "Export" button on page 2
    - Click the Lock Supplier Fields button at the top of page 2.
    - Click the hand tool icon in the *Supplier Digital Signature* field at the bottom of page 2 to select which digital signature to use. If no digital signature is available click Add Digital ID and follow the instructions to set-up a digital ID.
  - Apply the digital signature.
  - If all steps have been executed properly the digital signature will appear.  Not completing the required fields will disallow signing the document.
- Once the supplier has filled the required fields and has digitally signed the form, save the locked version of the form locally (File - > Save As ex. "suppliername\_partnum\_date.pdf").

### **5. Email the form to Carestream Health**

- Send an email to HG-SupplierDeclaration@carestreamhealth.com (as identified in the *Destination– URL or Email Address* field) and provide a (cc) to the address located in the *Email Contact* field in the *Requester Information* section.
- **Note**: attach the signed PDF form to the email before sending.

## **Appendix A – Supplier Letter Template**

**Download Supplier Letter Template (ms word)**

## Appendix B - Glossary of Terms

**Company Name** The official name of the company (required field).

**Company Unique ID** As listed in an official register.

**Unique ID Authority** A recognized company registration agency, *e.g.*, Dunn and Bradstreet.

**Response Date** Date that the form was completed, pull down feature provided.

**Response Document ID** A unique form identification.

**Contact Name** Name of the person at the company to contact in case of questions.

**Title – Contact** Official title of the contact person. **Phone – Contact** Phone number where the contact person can be reached during business hours.

**Email – Contact** Business email address of the contact.

**Authorized Representative** Name of the person at the company responsible for the integrity of the information provided.

**Title – Representative** Official title of the representative.

**Phone – Representative** Phone number where the representative can be reached during business hours.

**Email – Representative** Business email address of the representative.

**Requester Item Number** Carestream Health item number, pre-populated by Carestream Health.

**Mfr Item Number** Pre-populated at Carestream Health – if this number is not correct propose an alternative and return the form to Carestream Health without completing any other fields.

**Mfr Item Name** Pre-populated Carestream Health.

**Effective Date** Effective date the item number in reference was made generally available.

**Version** The revision level or version designation of the item referenced in this declaration. If it is left blank it will be assumed that the part has not changed since its origination – you may add “original”.

**Manufacturing site** Location where part is manufactured. It should match the requester field value if present. If the part is no longer made in the stated location, provide Carestream Health with the new facility location using the comment field.

**Item weight** Weight of the item in milligrams, grams, or kilograms. Use the pull down menu to activate the field. The Unit field allows the selection and identification of length, area, or volume from a pull down menu that includes Each, Meter, Centimeter, Liter and their square or cubic equivalents (M<sup>2</sup>, M<sup>3</sup> cm<sup>2</sup>, and cm<sup>3</sup>).