

May 10, 2025

--- Covered List Software Incapability¹ ---

Device (model name):	Smart ECG ring
Grantee:	Shenzhen Xiangmingda Technology Co., Ltd
FCC ID:	2AX6R-Q520

Device features:

Operating System (as applicable):	N/A	
Storage Capacity (hard drive or other permanent memory storage):	N/A	
Is installation of third-party software possible?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
Does the device have an internet connection?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
Can the device connect to a PC?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO

Chipset/module information:


Chipset / module part number:	Memory size (MB)
NRF5283	N/A

Minimum system requirements Kaspersky as of December 3, 2024

Android	Memory: 120 MB	Disc space: unknown	Processor speed: unknown
MacOS	Memory: 2000 MB	Disc space: 2200 MB	Processor speed: unknown
Windows	Memory: 1000 MB	Disc space: 1000 MB	Processor speed: 1 GHz
Linux	Memory: 1000 MB	Disc space: 1000 MB	Processor speed: 1 GHz

Based on the review of the above factsheet(s) and device features, the device

- ☒ cannot support installation of any cybersecurity or anti-virus software on the covered list.
☐ potentially can operate with any cybersecurity or anti-virus software on the covered list – additional 3rd party proof is provided to demonstrate compliance with requirements as of 2.911(d)5(i),(ii) – page 2 of this document applies.

Signature:	
Name:	jack xiao

¹ List of minimum requirements to implement covered list software – if the EUT does not have capability to install Kaspersky under the given configuration. Page 2 must also be handed in.

Note: If the device is capable of running Kaspersky software, at least one document must be provided from a third party showing that the Kaspersky software is not present on the device. This could include the results of a software scan, a screen capture of the device software register or other objective evidence that proves the Kaspersky software is not on the device. Please follow options listed on page 2.

Title/Position:	Manager
------------------------	----------------

- Options to provide of compliance with covered list software requirements -

Please fill in as applicable and provide additional proof as requested:

1	Has the client signed an attestation stating the device is incapable of running the Kaspersky software (page 1)? * YES – no more proof needed – 2-5 do not apply > N/A ** NO – more proof must be provided (item 2-5 must be answered)	<input checked="" type="checkbox"/> YES*	<input type="checkbox"/> NO**		
2	Did the test lab or other 3rd party other than the certification body and applicant provide a list of software installed on the device and is there no evidence of Kaspersky software being installed? ***YES – please: Insert File Name: Insert 3 rd Party Name:	<input type="checkbox"/> YES***	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> N/A	
3	Have the results of a software scan been provided showing that Kaspersky software is not installed on the device? ***YES – please: Insert File Name: Insert 3 rd Party Name:	<input type="checkbox"/> YES***	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> N/A	
4	Has any other objective evidence that Kaspersky software is not installed on the device been provided? ***YES – please: Insert File Name: Insert 3 rd Party Name:	<input type="checkbox"/> YES***	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> N/A	
5	Has at least one of the above items been shown as a YES? **** NO – applicant failed to provide sufficient proof – application filing is rejected.	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO****		

Note:

Files containing confidential operational details can be kept long-term confidential on applicant's request.