



## PRODUCT/PROCESS CHANGE NOTICE (PCN)

PCN Number: **PCN 19011A (Addendum)**

Date Issued: **12/05/2020**

Product(s) Affected:

XRP6658ISTR-F

**SP6669AEK-L/TRR3**

Manufacturing Location Affected: N/A

Date Effective (90 day window): 02/19/2020

Date Issued +90 days: 05/19/2020

Means of Distinguishing Changed Devices:

Product Mark:

Back Mark

Date Code

Lot number

Contact: Your local MaxLinear Marketing Representative or  
 or contact our Customer Support team by creating a Support Ticket at  
<http://www.maxlinear.com/support/createcase>

Phone: 1-760-692-0711

Attachment:  Yes  No

Samples: Request from MaxLinear Marketing Representatives

Description and Purpose of Change:

Due to the obsolescence of an old process, both XRP6658 and SP6669 have been migrated to a later process technology. With these changes, key specifications have been greatly improved:

Improvements	XRP6658	SP6669
<b>Old (PMOS/NMOS)</b>	0.240hm / 0.210hm	0.240hm / 0.240hm
<b>New (PMOS/NMOS)</b>	0.220hm / 0.170hm	<No change>
<b>Operating Current (Old -&gt; New)</b>	N/A	800mA -> <No change>

Due to the change in process, there are minor changes to the following specifications:

Changes	XRP6658 (Old → New)	SP6669 (Old → New)
<b>Quiescent Current</b>	15uA -> 30uA	18uA -> <No change>
<b>UVLO Threshold</b>	1.8V -> 2V	
<b>Feedback Current</b>		± 30nA -> <No change>

Graphs and waveforms in the datasheet have been improved to show the key performance characteristics.

**ADDENDUM:**

Changes originally planned for SP6669 have been cancelled at this time.

- Die Technology
- Wafer Fabrication
- Assembly Process
- Equipment
- Material
- Testing
- Manufacturing Sites
- Data Sheet
- Yield Enhancement
- Other:

Reliability/Qualification Summary: Reliability reports available upon request.



Customer Acknowledgement of Receipt within 30 days of issue. Lack of acknowledgement within 30 days constitutes acceptance of change.

Please fax or email this form to the contact above after completing the following information:

Customer: \_\_\_\_\_

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

Approval for shipments prior to effective date

Customer Comments (Optional):