

[organization name]

List of UDI-DI

Document information

Version:	
Created by:	
Approved by:	
Date of version:	

Commented [13A1]: This is mandatory section and cannot be deleted, each change in the List of UDI-DI, person who prepared and approved the list, date and version must be recorded.

Change history

Date	Version	Created by	Description of change

Commented [13A2]: This is mandatory section and cannot be deleted, each change in the list must be recorded.

[organization name]

UDI-DI	UDI-PI	Device Name	Device Description

Commented [13A3]: Write an
[blurred text]

Commented [13A4]: [blurred text]

Commented [13A5]: [blurred text]
device.

Commented [13A6]: If the medical device does not have
[blurred text]