

Micromedex® RED BOOK® New Product Information

Important: Please include a package insert (PI) or product label for all new products or NDC changes.

Product Name _____

Manufacturer Name _____

Distributor Name _____

Original Manufacturer _____

Original Manufacturer NDC _____

Check the product type

Trade Branded/Generic Generic Repackaged Surgical/Device Chemical for Compounding

Check DEA class

RX OTC C-II C-III C-IV C-V

Dosage Form _____ Route of Administration _____

Product Packaging (e.g., Box, Vial, Bottle) _____

Effective Date _____ OB Rating _____ NDA# _____ ANDA# _____

(Include documentation if NDA or ANDA applicable)

Additional Description _____

Check Identifier										
<input type="radio"/> NDC	<input type="radio"/> UPC	<input type="radio"/> HRI	Unit Dose	Strength	Size	Qty	AWP/SWP	Direct	WAC	SRP
			<input type="radio"/> Yes <input type="radio"/> No							
			<input type="radio"/> Yes <input type="radio"/> No							
			<input type="radio"/> Yes <input type="radio"/> No							
			<input type="radio"/> Yes <input type="radio"/> No							

Submitted by _____ Date _____

Phone _____ Email _____ Fax _____

Send completed form to Redbook@merative.com

If you have any questions, please call the RED BOOK support group at +1.800.724.9937 or email Redbook@merative.com.