

NEW MEDICAL TECHNOLOGY & DEVICE REQUEST FORM



A medical device is defined by the FDA as an instrument, apparatus, implement, machine, contrivance, implant, in vitro reagent, or other similar or related article, including any component, part, or accessory, which is intended for use in the diagnosis of disease or other conditions, or in the cure, mitigation, treatment, or prevention of disease; or is intended to affect the structure or any function of the body; and does not achieve its primary intended purposes through chemical action within or on the body; and is not dependent upon being metabolized for the achievement of this primary intended propose(s).

Note: Computer software may fall under this definition of device.

Please Check the Technology/Equipment/Device Request Type	
Evaluation: Start Date: _____ End Date: _____	Technology/Equipment/Device For Patient Research
Intended purchase/Loan of new technology/equipment/device	Intended to reprocess a supply labeled for single use

Complete the applicable sections of the form, obtain approval (electronic or hardcopy) and route with accompanying literature to:

- Health Plan of San Joaquin UM Department
- Your request will be routed for internal processing.
- You will be notified by e-mail, fax or letter once the request has been registered.

Section A: Request Information

Date of Request:		Requestor Name:	
Department:		Date use of technology/equipment/device to begin:	
		Estimated End Date:	
Box #:	Phone #:	Fax #:	Email:

Section B: Technology/Equipment/Device Information

Proposed use of the technology/equipment/device (choose one):		Clinical	Research
Product Name:		Model/Catalog #: _____ Not Applicable, Investigational Device	
Manufacturer:			
Vendor/Sponsor:		Vendor/Sponsor Phone #:	

