

Instructions for Use

Use this template to patient or clinician IFU for [device_name].

Template Metadata

Field	Details
Category	Medical Devices
Owner	[Team or owner]
Version	[Version number]
Effective Date	[Date]
Review Cycle	[Monthly / Quarterly / Annual / Event-based]
Status	[Draft / In Review / Approved]

Intended Use

State who uses the device, clinical purpose, patient population, and use environment.

Item	Details	Owner	Status
[Item or requirement]	[Describe the relevant detail, evidence, or decision]	[Owner]	[Open / Complete]
[Item or requirement]	[Describe the relevant detail, evidence, or decision]	[Owner]	[Open / Complete]

Notes

[Add context, assumptions, exceptions, evidence links, screenshots, calculations, or reviewer comments.]

Device Description

Describe device components, accessories, indicators, packaging contents, and required compatible products.

Item	Details	Owner	Status
[Item or requirement]	[Describe the relevant detail, evidence, or decision]	[Owner]	[Open / Complete]
[Item or requirement]	[Describe the relevant detail, evidence, or decision]	[Owner]	[Open / Complete]

Notes

[Add context, assumptions, exceptions, evidence links, screenshots, calculations, or reviewer comments.]

Warnings and Precautions

List safety warnings, contraindications, precautions, and conditions requiring clinician contact.

Item	Details	Owner	Status
[Item or requirement]	[Describe the relevant detail, evidence, or decision]	[Owner]	[Open / Complete]
[Item or requirement]	[Describe the relevant detail, evidence, or decision]	[Owner]	[Open / Complete]

Notes

[Add context, assumptions, exceptions, evidence links, screenshots, calculations, or reviewer comments.]

Before Use

Provide inspection, preparation, setup, charging, sterile barrier, or expiration checks as applicable.

Item	Details	Owner	Status
[Item or requirement]	[Describe the relevant detail, evidence, or decision]	[Owner]	[Open / Complete]
[Item or requirement]	[Describe the relevant detail, evidence, or decision]	[Owner]	[Open / Complete]

Notes

[Add context, assumptions, exceptions, evidence links, screenshots, calculations, or reviewer comments.]

Use Instructions

Give clear numbered steps for correct use, monitoring, and completion.

Item	Details	Owner	Status
[Item or requirement]	[Describe the relevant detail, evidence, or decision]	[Owner]	[Open / Complete]
[Item or requirement]	[Describe the relevant detail, evidence, or decision]	[Owner]	[Open / Complete]

Notes

[Add context, assumptions, exceptions, evidence links, screenshots, calculations, or reviewer comments.]

After Use and Disposal

Describe removal, cleaning, disposal, return, storage, and biohazard handling.

Item	Details	Owner	Status
[Item or requirement]	[Describe the relevant detail, evidence, or decision]	[Owner]	[Open / Complete]
[Item or requirement]	[Describe the relevant detail, evidence, or decision]	[Owner]	[Open / Complete]

Notes

[Add context, assumptions, exceptions, evidence links, screenshots, calculations, or reviewer comments.]

Troubleshooting

List user-recognizable problems, likely causes, corrective actions, and when to stop use. Use plain device-labeling language and avoid unsupported clinical claims.

Item	Details	Owner	Status
[Item or requirement]	[Describe the relevant detail, evidence, or decision]	[Owner]	[Open / Complete]
[Item or requirement]	[Describe the relevant detail, evidence, or decision]	[Owner]	[Open / Complete]

Notes

[Add context, assumptions, exceptions, evidence links, screenshots, calculations, or reviewer comments.]

Review and Signoff

Document review conclusions, approvals, unresolved items, and next review date.

Role	Name	Date	Notes
Preparer	[Name]	[Date]	[Notes]
Reviewer	[Name]	[Date]	[Notes]
Approver	[Name]	[Date]	[Notes]