Docsie Free Template | Medical Devices

UDI Labeling Review

Use this template to review checklist for UDI and device labeling 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]

Review Scope

Identify device, model, packaging levels, markets, label versions, and review trigger.

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 Identification

Record device identifier, production identifiers, Basic UDI-DI where applicable, and issuing agency.

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.]

Label Content

Verify name, intended use cues, manufacturer, symbols, sterile status, lot or serial number, expiry, and warnings.

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.]

UDI Carrier

Assess barcode format, human-readable text, placement, print quality, scanner verification, and packaging hierarchy.

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.]

Database Submission

Confirm GUDID, EUDAMED, or other database fields, submission status, and responsible owner.

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.]

Market Requirements

List region-specific labeling, language, importer, authorized representative, and regulatory symbol requirements.

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

Item	Details	Owner	Status
[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.]

Approval Decision

State approval, required corrections, implementation controls, and approvers. Use labeling-review language with concise check tables.

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.]