

# PRESCRIPTION FOR A CUSTOM-MADE DEVICE

This prescription template can be used for documenting the need for a custom-made medical device.

- REGULATION (EU) 2017/745 OF THE EUROPEAN PARLIAMENT AND OF THE COUNCIL of 5 April 2017 on medical devices, amending Directive 2001/83/EC, Regulation (EC) No 178/2002 and Regulation (EC) No 1223/2009 and repealing Council Directives 90/385/EEC and 93/42/EEC, ANNEX XIII, PROCEDURE FOR CUSTOM-MADE DEVICES.

Description of product type		
Type of product:	<i>Power wheelchair</i>	Name of Product:
Producer:	<i>Permobil</i>	
This prescription is individually made for		
Name, acronym, numerical code:		Date of birth:
Address:		
Country:	E-mail address:	
Description of individual need for the custom-made device:		
Description of characteristics needed in/from the custom-made device:		
Attachments:		

Prescriber- authorised by national law by virtue of their professional qualifications		
Name:		Profession:
Health institution:		
Address:		
Phone:	E-mail:	
Date:	Signature:	

Manufacturer data					
Quote nr:		Order nr:		Serial no:	

## Disclaimer

The prescriber is responsible for ensuring that this document is valid and correct at all times. Downloading, using, and signing the document is the responsibility of the prescriber.