

RED BOOK New Product Information

Important: Please include a Package Insert (PI) and Product Label along with all New Products or NDC changes with this form.

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

Submitted by _____ Date _____
 Phone _____ Email _____ Fax _____

Send all information to Truven Health Analytics, RED BOOK® Database Administration, 6200 S. Syracuse Way, Suite 300, Greenwood Village, CO 80111-4740, or fax to +1.303.486.9297.

If you have any questions, please call the RED BOOK support group at +1.800.724.9937 (M-TH 8:00 AM-5:00 PM MST, F 8:00 AM-2:30 PM MST) or email mdx.Red_Book_data@truvenhealth.com.

