**Investigational Medical Device Accountability Log**

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| Receipt of Device | Use of Device | Disposition (Return/Repair/Destruction) | |
| \*Status  RET = Returned  DES = Destroyed  REP = Repaired  LOS = Lost  OTH = Other(must comment) | \*\* Reasons  1 = Subject completed study  2 = Subject Withdrew  3 = Lost to follow-up  4 = Expired  5 = Device damaged. not functioning or recalled |

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| Date Rec’d | Initials of receiver | Lot/serial or Model Number | Device Type/Batch | Date Used | Initials of device  dispenser | Subject ID | Status\* | Date | Initials | Number  of units | Reason\*\* | Comments |
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