



**5. Physical Description**

Form: \_\_\_\_\_ Flavor: \_\_\_\_\_ Color: \_\_\_\_\_  
Odor: \_\_\_\_\_ pH: \_\_\_\_\_  
Regulatory Type (i.e., EPA, PCP): \_\_\_\_\_ Number: \_\_\_\_\_  
Product/Formula Identification Codes (i.e., Formula Number, MSDS Number, UPC) (please be specific)  
\_\_\_\_\_

**6. Availability**

Container Sizes and Type (i.e., 8-ounce can): \_\_\_\_\_

**7. Company Information**

Contact Company: \_\_\_\_\_  
Labeler (Company name as it appears on label): \_\_\_\_\_  
Manufacturer: \_\_\_\_\_

**8. Formulary Dates**

Released: \_\_\_\_\_  
Changed/Updated: \_\_\_\_\_  
Discontinued: \_\_\_\_\_

**9.** Name of person filling out this form: \_\_\_\_\_

**10.** Title of person filling out this form: \_\_\_\_\_

**11.** Company of person filling out this form: \_\_\_\_\_

**If you need assistance completing this form, please call Product Information at +1.800.642.6339.**

Click submit to send completed form.



Or, contact us at:

Truven Health Analytics  
ATTN: Product Information — POISINDEX  
6200 S. Syracuse Way, Suite 300  
Greenwood Village, CO 80111-4740 U.S.A.  
E-mail: [Poisindex\\_data@us.ibm.com](mailto:Poisindex_data@us.ibm.com)

+ 1.303.486.6432  
+ 1.800.642.6339  
+ 1.303.486.6464 FAX