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DOCUMENT NUMBER:

DOCUMENT TITLE:

DOCUMENT NOTES:

### Document Information

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### Date Information

Effective Date:

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### Control Information


Author:

Previous Number:

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All dates and times are in

	<b>MasterControl, Inc.:</b> <b>Policy and Procedure Template</b>		<b>Pg. 1 of 3</b>
	<b>Doc Number: MD-SOP-0039</b>	<b>Rev: 02</b>	<b>Release</b> <b>Date: 23 Feb 2016</b>

## POLICY AND PROCEDURE TEMPLATE

### APPROVALS

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<i>All approvals are maintained and controlled in the MasterControl™ system.</i>
<i>Please refer to the MasterControl™ system for the current controlled revision and approval records.</i>

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### REVISION HISTORY


<i>AUTHOR</i>	<i>REVISED SECTION/PARAGRAPH</i>	<i>REV</i>	<i>RELEASED</i>
D Ade	Initial Release	01	See MasterControl

***Draft and Archived/Obsolete revisions are not to be used.***  
***Access MasterControl™ system to verify revision.***

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## 1. PURPOSE

*Briefly describe the reasoning or purpose of the document.*

## 2. SCOPE

*Briefly describe the coverage or scope of what is covered and/or exempted from this process.  
Please refrain from adding policy or procedure detail in this section.*

## 3. DEFINITIONS

- Word – Definition
- Word – Definition

## 4. RESPONSIBILITIES

- Responsible Party – Describe the responsible party responsibilities

## 5. PROCEDURE/POLICY/WORK INSTRUCTION (REMOVE TITLE THAT DOES NOT APPLY)

### 5.1 Process Flow

If applicable insert simple process flow chart or picture here. Keep the flowchart descriptions simple putting the detail in the next subsection. If there is not a flow chart or picture write “Not Applicable”.

### 5.2 Procedure/Policy/Work Instruction (remove title that does not apply)

#### 5.2.1 Overview

#### 5.2.2 Details

## 6. APPLICABLE REFERENCES

*List of applicable reference documents.*

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## Signature Manifest

**Document Number:** MD-SOP-0039

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**Title:** Chlorhexidine MSDS

All dates and times are in Mountain Time Zone.

### SOP Approval

#### Collaboration

Name/Signature	Title	Date	Meaning/Reason
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Matt Smith (MATT)		23 Feb 2016, 12:14:58 PM	Complete

#### Approval

Name/Signature	Title	Date	Meaning/Reason
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**\*\*This document has been electronically signed\*\***