



PRODUCT/MACHINE COMPLAINT FORM

CRF Rev.001 Pg. 1-2

Name of Company/Center:

Date:

Address:

Email Address:

Phone No.:

PRODUCT/MACHINE IDENTIFICATION

Product:

Expiry date:

Lot number:

Machine:

Serial no.:

Date acquired:

No. of affected kits:

No. of kits in stock:

DEFECTS IN CONDITIONING MATERIAL (PRODUCT)

☐ Outer box damaged

☐ Spillage of one/several components

☐ Components missing

☐ Fewer amounts of one/several components

Defects in:

☐ Labels

☐ Inserts

☐ Bottles, vials, caps, etc.

☐ Others (*Please Specify*):

FUNCTIONAL DEFECTS

PRODUCT(S):

☐ Inaccuracy

☐ Imprecise results

☐ Low/High results

☐ Stability problem

☐ Low/High absorbance

☐ Others (*Please Specify*):

Remarks:

MACHINE:

☐ Electronically defects

☐ Others (*Please Specify*):

☐ Defective parts

☐ Functional defects

Remarks:



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ADDITIONAL INFORMATION

(Kindly provide as necessary)

- ☐ Programming protocol
- ☐ Results of precision test
- ☐ Results of internal control
- ☐ Calibration factor
- ☐ Calibration curve
- ☐ Printing of results

DESCRIPTION OF THE PROBLEM AND PROCEDURE DETAILS

REPORTED BY (Client):

Signature over printed name

Position

ACKNOWLEDGED BY:

Signature over printed name

Position