



MTRAC PRODUCT REQUEST SHEET

A. Product Information

Trade name / generic name:

Manufacturer:

Current marketing status (e.g. launched in UK, EMA approved, in clinical trials):

Launch Date:

Licensed Indications:

Dose:

Cost:

B. Commissioning issue for consideration e.g.

- Identification of patient cohort most likely to benefit
- Cost impact versus benefit gained
- Service implications e.g. impact on care pathway (lab tests, other healthcare service activity etc.), secondary care attendance, capacity in primary care
- QIPP – opportunity?
- CCG budget/resource management
- Other NHS requirements e.g. local healthwatch, NHS operational framework

C. Does the SPC assign responsibility for the prescribing of this product?

D. National or other Guidance in existence?

- Is the product on the NICE programme and if so when is the guidance expected?
- Is national guidance ambiguous e.g. “can be considered as an option”?
- Would more specific guidance be of value e.g. in a NICE Clinical Guideline?

E. Details of requestor:

- Name:
- Email:
- Telephone number:
- Address:
.....
.....
- Date:

Please complete the form and return

by email to: mtrac@keele.ac.uk

by fax to: 01782 733326

by post to: MTRAC
Keele University Centre for Medicines Optimisation
Keele Pharmacy School
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