INTERFACE REVISION NOTICE

1. AFFECTED ICD NO. AND REV.:	2. PIRN NO.:	3. IRN NO.:	4. SHEET 1 OF
5. PROGRAM:	6. PCN:		7. PANEL AFFECTED:
8. TITLE:	9. EFFECTIVITY:		
10. REASON FOR CHANGE:			

CHANGE ICD EFFECTIVITY	11. TO:	12. FROM:
13. IRN NO.:	14. NEW IRN EFFECTIVITY:	15. PREVIOUS IRN EFFECTIVITY:

16. DESCRIPTION OF CHANGE:

17. PREPARED BY:	18. ORGANIZATION:	19. DATE:	20. CONCURRENCE:

21. **CONCURRENCE**

SIGNATURE & ORGANIZATION	DATE	SIGNATURE & ORGANIZATION	DATE	SIGNATURE & ORGANIZATION	DATE

22. **APPROVALS**

	APPROVAL & ACTIVITY	DATE	APPROVAL & ACTIVITY	DATE	APPROVAL & ACTIVITY	DATE
ORG.						
CBD NO.						