



Encore Medical, L.P.
9800 Metric Blvd.
Austin, TX 78758

0400-0034 Rev. ZC 2022-02

A printable copy of the IFU for this device can be located at: www.djosurgicalifus.com. A paper copy can be requested via phone at +1-800-520-8976.

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1. Product Handling

Implants are provided sterile and should always be stored unopened in their respective protective containers. Prior to use, inspect package for damage that may compromise sterility. If packaging has been opened or damaged upon receipt, contact the manufacturer's representative. Also inspect the labeling to verify that the expiration date has not passed. If the product is expired, contact Customer Service and do not use the implant. When unpacking the implant, verify the labeling for correct Reference No. and size. When removing the implant from its packaging, the relevant aseptic instructions must be observed. Protect prosthesis from contact with objects that may damage the surface finish. Inspect each implant prior to use for visual damage. This implant is part of a system and should be used only in combination with other original DJO Surgical® product belonging to the same knee system, unless otherwise specified.

2. Product Description and Implant Materials

Component	Fixation Method	Material	Applicable ASTM Standard	Applicable ISO Standard
Foundation® Knee System				
FOUNDATION® Femur (Primary ¹ , Posterior Stabilized ² , Revision Posterior Stabilized ²)	Cemented	CoCrMo	ASTM F75	ISO 5832-4
FOUNDATION® Porous Coated Femur ¹	Cemented	CoCrMo CoCrMo Porous Coating	ASTM F75 ASTM F75	ISO 5832-4
FOUNDATION® Femur with TiNbN Coating (Primary ¹ , Posterior Stabilized ²)	Cemented	CoCrMo TiNbN	ASTM F75	ISO 5832-4
FOUNDATION® Tibia Stemmed, Nonporous, Primary FK/3DKNEE™ Downsize Tibial Baseplate	Cemented	CoCrMo	ASTM F75	ISO 5832-4
FOUNDATION® Tibia Stemmed, Nonporous, Revision with Tibial Stem Plug	Cemented	CoCrMo Ti6Al4V alloy	ASTM F75 ASTM F136 / ASTM F1472	ISO 5832-4 ISO 5832-3
FOUNDATION® Porous Coated Tibia Stemmed FOUNDATION® Porous Coated Tibia Stemmed-no Holes FK/3DKNEE™ Porous Coated Downsize Tibia	Cemented	Ti6Al4V alloy CP Ti Porous Coating	ASTM F136 / ASTM F1472 ASTM F67	ISO 5832-3 ISO 5832-2
FOUNDATION® Tibial Inserts (Primary ¹ , Ultra-congruent ¹ , Posterior Stabilized ² , Constrained PS ²) with Attachment Screw	Cementless	Medical grade UltraHigh Molecular Weight Polyethylene Ti6Al4V alloy	ASTM F648 ASTM F136 / ASTM F1472	ISO 5834-1 / ISO 5834-2 ISO 5832-3
FOUNDATION® Stem Extensions ³	Cemented	Ti6Al4V alloy	ASTM F136 / ASTM F1472	ISO 5832-3
FOUNDATION® Modular Spacer Blocks (Femoral ⁴ , Tibial)	Cemented	Ti6Al4V alloy	ASTM F136 / ASTM F1472	ISO 5832-3
1. Size interchangeability between the FOUNDATION® Primary or Porous femur and Ultra-congruent tibial inserts is limited to one size larger and one size smaller. Primary inserts to be used with Primary or Porous femur. 2. Size interchangeability between the FOUNDATION® Posterior-Stabilized or Revision PS femur and Posterior-Stabilized or Constrained PS tibial insert is limited to one size larger and one size smaller. 3. FOUNDATION® stem extensions are compatible with Revision femurs and Revision tibias and are available in various lengths and diameters. 4. FOUNDATION® femoral modular spacer blocks are available in corresponding distal and posterior sizes.				

3DKnee™ System				
3DKNEE™ Femur	Cemented	CoCrMo	ASTM F75	ISO 5832-4
3DKNEE™ Femur with TiNbN Coating	Cemented	CoCrMo TiNbN	ASTM F75	ISO 5832-4
3DKNEE™ Porous Coated Femur	Cementless	CoCrMo CoCrMo Porous Coating	ASTM F75 ASTM F75	ISO 5832-4
3DKNEE™ Tibial Baseplate FK/3DKNEE™ Downsize Tibial Baseplate	Cemented	CoCrMo	ASTM F75	ISO 5832-4
3DKNEE™ Porous Coated Tibial Baseplate FK/3DKNEE™ Porous Coated Downsize Tibial Baseplate	Cemented	Ti6Al4V alloy CP Ti Porous Coating	ASTM F136 / ASTM F1472 ASTM F67	ISO 5832-3 ISO 5832-2
3DKNEE™ Insert (Standard, DCM) with Attachment Screw	Cementless	Medical grade UltraHigh Molecular Weight Polyethylene Ti6Al4V alloy	ASTM F648 ASTM F136 / ASTM F1472	ISO 5834-1 / ISO 5834-2 ISO 5832-3
3DKNEE™ Insert, e+™ with Attachment Screw	Cementless	Medical grade UltraHigh Molecular Weight Polyethylene (Moderately Cross-Linked) Vitamin E UHMWPE (a-tocopheral) Ti6Al4V alloy	ASTM F648 / ASTM F2565 ASTM F2695 ASTM F136 / ASTM F1472	ISO 5834-1 / ISO 5834-2 ISO 5832-3
<p>1. 3DKNEE™ femurs are to be used with 3DKNEE™ tibial inserts and FK/3DKNEE™, FOUNDATION® or 3DKNEE™ tibial baseplates. If using FK/3DKNEE™ or FOUNDATION® tibial baseplates with 3DKNEE™ femurs, use baseplates that are one size smaller.</p> <p>2. Size 3, 5, and 7 3DKNEE™ femurs and inserts are to be used with 3DKNEE™ Tibial Components that are one size larger or FOUNDATION® or FK/3DKNEE™ downsize components that are one size smaller.</p> <p>3. The 3DKNEE™ femur and the 3DKNEE™ insert (Standard, DCM or e+™) size must match. The insert will mate with the same size 3DKNEE™ baseplate or one size smaller FOUNDATION® or FK/3DKNEE™ baseplate.</p>				
DJO EMPOWR KNEE System®				
EMPOWR 3D™ Femur ^{1,4} EMPOWR PS™ Femur ^{2,3}	Cemented	CoCrMo	ASTM F75	ISO 5832-4
EMPOWR Porous® Femur ^{1,4}	Cementless	CoCrMo CoCrMo Porous Coating	ASTM F75 ASTM F75	ISO 5832-4
EMPOWR Porous Femur with HA ^{nano} Surface™ ¹	Cementless	CoCrMo CoCrMo Porous Coating	ASTM F75 ASTM F75	ISO 5832-4 ISO 13779-1
EMPOWR Porous® Tibial Baseplate	Cementless	Ti6Al4V alloy CP Ti Porous Coating	ASTM F620 / ASTM F1472 ASTM F67	ISO 5832-3 ISO 5832-2
EMPOWR™ Tibial Baseplate	Cemented	CoCrMo	ASTM F75	ISO 5832-4
EMPOWR™ Universal Tibial Baseplate with Stem Plug	Cemented	CoCrMo	ASTM F75 ASTM F1537	ISO 5832-4
EMPOWR™ Universal Cemented Stem Extension	Cemented	CoCrMo	ASTM F1537	ISO 5832-4
EMPOWR™ Universal Tibial Augment ⁵ - Half Block, 5mm (with 5mm screw) EMPOWR™ Universal Tibial Augment Screw, (5mm, 10mm, 15mm) ⁵	Cemented	Ti6Al4V alloy	ASTM F136 / ASTM F1472	ISO 5832-3
EMPOWR™ Tibial Insert: - EMPOWR 3D™ Tibial Insert - e+™, ¹ - EMPOWR PS™ Tibial Insert - e+™, ² - EMPOWR CR® Tibial Insert - e+™, ⁴ - EMPOWR VVC® Tibial Insert - e+™, ³ (10mm through 19mm) ³	Cementless	Medical grade UltraHigh Molecular Weight Polyethylene (Moderately Cross-Linked) Vitamin E UHMWPE (a-tocopheral)	ASTM F648 / ASTM F2565 ASTM F2695	ISO 5834-1 / ISO 5834-2
EMPOWR™ Tibial Insert: - EMPOWR VVC® Tibial Insert - e+™, ³ (22mm and 25mm) ^{3,6} with Reinforcement Pin	Cementless	Medical grade UltraHigh Molecular Weight Polyethylene (Moderately Cross-Linked) Vitamin E UHMWPE (a-tocopheral) CoCrMo	ASTM F648 / ASTM F2565 ASTM F2695 ASTM F1537	ISO 5834-1 / ISO 5834-2 ISO 5832-4
EMPOWR VVC® Reinforcement Pin	Cementless	CoCrMo	ASTM F1537	ISO 5832-4
<p>1. Size interchangeability between the EMPOWR 3D™ femur and EMPOWR Porous® Femur to EMPOWR 3D™ tibial inserts are compatible with the same size component, or one size smaller femur on a larger insert.</p> <p>2. Size interchangeability between the EMPOWR PS™ femur and EMPOWR PS™ tibial inserts are compatible with the same size component, one size smaller femur on a larger insert, or one size larger femur on a smaller insert.</p> <p>3. Size interchangeability between the EMPOWR PS™ femur and EMPOWR VVC® tibial inserts are compatible with the same size component, one size smaller femur on a larger insert, or one size larger femur on a smaller insert.</p>				

4. Size interchangeability between the EMPOWR 3D™ femur and EMPOWR Porous® Femur to EMPOWR CR® tibial inserts is compatible with the same size component, up to two sizes smaller femur on a larger insert, or up to two sizes larger femur on a smaller insert.
5. Tibial augmentation blocks for the EMPOWR KNEE SYSTEM® are available in 5mm thickness, configured to the lateral compartment for a given size. Additionally, these tibial augments can be stacked up to 15mm using the appropriate length assembly screw.
6. EMPOWR VVC® Insert, 22 & 25mm to be used only with Universal Tibial Baseplate

EXPRT™ Knee System				
EXPRT® Revision Knee Femur	Cemented	CoCrMo	ASTM F75	ISO 5832-4
EXPRT® Revision Knee Tibial Baseplate	Cemented	CoCrMo	ASTM F75	ISO 5832-4
EXPRT® Revision Knee Insert e+™	Cementless	Medical grade UltraHigh Molecular Weight Polyethylene (Moderately Cross-Linked) Vitamin E UHMWPE (a-tocopheral)	ASTM F648 / ASTM F2565 ASTM F2695	ISO 5834-1 / ISO 5834-2
EXPRT® Revision Knee Stem Extension	Cemented	CoCrMo	ASTM 1537	ISO 5832-4
EXPRT® Revision Tibial Augment	Cemented	CoCrMo	ASTM F75	ISO 5832-4
EXPRT® Revision Femoral Augment	Cemented	Ti6Al4V alloy	ASTM F136 / ASTM F1472	ISO 5832-3
EXPRT® Patella – All Poly e+™, Domed	Cemented	Medical grade UltraHigh Molecular Weight Polyethylene (Moderately Cross-Linked) Vitamin E UHMWPE (a-tocopheral)	ASTM F648 / ASTM F2565 ASTM F2695	ISO 5834-1 / ISO 5834-2
EMPOWR Partial KNEE™ System				
EMPOWR Partial KNEE™ Femur	Cemented	CoCrMo	ASTM F75	ISO 5832-4
EMPOWR Partial KNEE™ Tibial Baseplate	Cemented	Ti6Al4V alloy	AMS4965™	
EMPOWR Partial KNEE™ Tibial Insert e+™	Cementless	Medical grade UltraHigh Molecular Weight Polyethylene (Moderately Cross-Linked) Vitamin E UHMWPE (a-tocopheral)	ASTM F648 / ASTM F2565 ASTM F2695	ISO 5834-1 / ISO 5834-2
EPIK® Uni Knee				
EPIK® Uni Femur	Cemented	CoCrMo	ASTM F75	ISO 5832-4
EPIK® Uni Tibial Baseplate	Cemented	CoCrMo	ASTM F75	ISO 5832-4
EPIK® Uni Tibial Insert	Cementless	Medical grade UltraHigh Molecular Weight Polyethylene	ASTM F648	ISO 5834-1 / ISO 5834-2
Patella, Screws, Plugs				
Patella – All Poly, Domed & Sombrero	Cemented	Medical grade UltraHigh Molecular Weight Polyethylene	ASTM F648	ISO 5834-1 / ISO 5834-2
Patella – All Poly e+™, Domed ¹ & Sombrero	Cemented	Medical grade UltraHigh Molecular Weight Polyethylene (Moderately Cross-Linked) Vitamin E UHMWPE (a-tocopheral)	ASTM F648 / ASTM F2565 ASTM F2695	ISO 5834-1 / ISO 5834-2
Patella – Metal Backed	Cemented	Medical grade UltraHigh Molecular Weight Polyethylene Ti6Al4V alloy CP Ti Porous Coating	ASTM F648 ASTM F136 / ASTM F1472 ASTM F67	ISO 5834-1 / ISO 5834-2 ISO 5832-3 ISO 5832-2
Porous Patella e+™	Cementless Cemented	Medical grade UltraHigh Molecular Weight Polyethylene (Moderately Cross-Linked)	ASTM F648 / ASTM F2565	ISO 5834-1 / ISO 5834-2
		Vitamin E UHMWPE (a-tocopheral)	ASTM F2695	
		Additive Ti6Al4V alloy	ASTM F2924	ISO 5832-3
Cancellous Bone Screws ²	Cementless	Ti6Al4V alloy	ASTM F136 / ASTM F1472	ISO 5832-3
Baseplate Plugs	Cementless	Medical grade UltraHigh Molecular Weight Polyethylene	ASTM F648	ISO 5834-1 / ISO 5834-2
<p>1. The EMPOWR Knee System® is intended for use with the e+™ Domed Patella and the Porous Patella e+™ only.</p> <p>2. Cancellous Bone Screws are to be used with FOUNDATION® Porous Coated Tibia Stemmed, FK/3DKNEE™ Porous Coated Downsize Tibia and 3DKNEE™ Porous Coated Tibia</p>				

Depending on the DJO Surgical® Knee System, femoral prostheses may be available in left and right configurations. Depending on the DJO Surgical® Knee System, the stemmed baseplate is available in left and right configurations.

3. Indications

Joint replacement is indicated for patients suffering from disability due to:

- degenerative, post-traumatic or rheumatoid arthritis;
- avascular necrosis of the femoral condyle;

- post-traumatic loss of joint configuration, particularly when there is patellofemoral erosion, dysfunction or prior patellectomy;
- moderate valgus, varus or flexion deformities;
- treatment of fractures that are unmanageable using other techniques.

This device may also be indicated in the salvage of previously failed surgical attempts. All devices are intended for cemented applications except for FK/3DKNEE™ Porous Coated Downsize Tibia, 3DKNEE™ Porous Coated Femur, EMPOWR Porous® Knee Femur, and EMPOWR Porous® Knee Tibia and Patella – Metal Backed which are intended for cementless applications.

While knee replacements are not intended to withstand activity levels and loads of normal healthy bone, they are a means of restoring mobility and reducing pain for many patients.

Indications for EPIK® Uni Knee

Intended for partial replacement of the articulating surfaces of the knee when only one side of the joint is affected due to compartmental primary degenerative or post-traumatic degenerative disease, previous tibial condyle or plateau fractures, deformity or revision of previous arthroplasty. The device is a single use implant intended for implantation with bone cement.

Indications for EMPOWR Partial Knee™

- Painful and/or disabling knee joints due to osteoarthritis or traumatic arthritis.
- Previous tibial condyle or plateau fractures with loss of anatomy or function.
- Varus or valgus deformities.
- Revision procedures where other treatments or devices have failed.
- These devices are indicated for cemented use only.

4. Intended Use

DJO Surgical® knee devices are intended for treatment of patients who are candidates for knee arthroplasty per the Indication for use. While total knee replacements are not intended to withstand activity levels and loads of normal healthy bone, they are a means of restoring mobility and reducing pain for many patients.

5. Contraindications

Joint replacement is contraindicated where there is:

- infection (or a history of infection), acute or chronic, local or systemic;
- insufficient bone quality which may affect the stability of the implant;
- muscular, neurological or vascular deficiencies, which compromise the affected extremity;
- obesity;
- alcoholism or other addictions;
- materials sensitivity;
- loss of ligamentous structures;
- high levels of physical activity (e.g. competitive sports, heavy physical labor).
- The EMPOWR 3D KNEE® and EMPOWR CR® KNEE® are also contraindicated for patients without sufficient soft tissue integrity to provide adequate stability.

6. Precautions and Warnings

An implant should never be reused. Although the implant may appear undamaged, previous stresses could create imperfections that may lead to mechanical failure. It is advised to utilize new prostheses of current design.

Familiarity with, and attention to the surgical technique recommended for this device is imperative for best results. The correct selection as well as the correct seating/placement of the prosthetic implant is extremely important. Malposition may predispose the device to excess wear and early failure. Only DJO Surgical® Knee System implants, instruments and trial prostheses should be used.

Care must be taken to protect mating surfaces (i.e. tapers) and polished bearing surfaces from nicks and scratches which could become the focal point for failure. Contouring or bending of the implant may reduce its service life and may cause immediate or eventual failure under load. An implant must not be tampered with, as tampering will adversely affect the performance of the implant.

CAUTION: Federal Law (USA) restricts this device to sale by or on the order of a physician.

7. Preoperative Planning and Postoperative Care

Preoperative planning provides essential information regarding the appropriate prosthesis and likely combinations of components. Use instrument trial components for fit verification (where applicable) and extra implant components for backup. X-ray templates for all sizes of the DJO Surgical® Knee systems are available upon request.

Accepted surgical practices should be followed for postoperative care. The patient should be made aware of the limitation of total joint reconstruction. Excessive physical activity and trauma affecting the replaced joint have been implicated in premature failure by loosening, fracture, and/or wear of the prosthetic implants. The patient should be cautioned to govern his activities accordingly as the risk of implant failure increases with weight and activity levels of the patient.

8. MRI Compatibility

United States and EU:

DJO Surgical knee systems listed in Section 2 of this document have not been evaluated for safety and compatibility in the Magnetic resonance environment. These devices have not been tested for heating, migration, or image artifact in the MR environment. The safety of these DJO Surgical components in the MR environment is unknown. Scanning a patient who has this device may result in patient injury.

ROW:

Non-clinical testing has demonstrated that the Foundation Knee, 3DKnee, and EPIK Knee systems contained in Section 2 listed above are MR Conditional. Patients can be scanned safely under the following conditions:

- Static magnetic field of 1.5-Tesla (1.5T) or 3.0-Tesla (3.0T).
- Spatial gradient field of up to:
 - 3,930 G/cm (39.3 T/m) for 1.5T systems.
 - 1,960 G/cm (19.6 T/m) for 3.0T systems.
- Maximum whole body averaged specific absorption rate (SAR) of:
 - 1.0 W/kg for 15 minutes of scanning in Normal Operating Mode at 1.5T.
 - 2.0 W/kg for 15 minutes of scanning in Normal Operating Mode at 3.0T.

3.0T RF heating

In non-clinical testing with body coil excitation, representative devices produced a temperature rise of less than 2.0°C at a maximum whole body averaged specific absorption rate (SAR) of 2.0 W/kg, as assessed by calorimetry for 15 minutes of scanning in a 3.0T Siemens Trio (MRC20587) MR scanner with SYNGO MR A30 4VA30A software.

1.5T RF heating

In non-clinical testing with body coil excitation, representative devices produced a temperature rise of less than 5.0°C at a maximum whole body averaged specific absorption rate (SAR) of 1.0 W/kg, as assessed by calorimetry for 15 minutes of scanning in a 1.5T Siemens Espree (MRC30732) MR scanner with SYNGO MR B17 software.

Caution: The RF heating behavior does not scale with static field strength. Devices which do not exhibit detectable heating at one field strength may exhibit high values of localized heating at another field strength.

MR Artifact

In testing using a 3.0T system with gradient-echo sequencing, the shape of the image artifact follows the approximate contour of the device and extends radially up to 7.7 cm from the implant

Note: The **EXPRT Knee System** and **EMPOWR Knee System** have not been evaluated for safety within the MR environment. The **EXPRT Knee System** and **EMPOWR Knee System** are currently considered as MRI Unsafe.

Note: Patients receiving MRI should be made aware of risks associated with this procedure. This could include the following:

- "The strong, static magnetic field of the MRI scanner will pull on magnetic materials and may cause unwanted movement of the medical device."
- "The radiofrequency energy and magnetic fields that change with time may cause heating of the implanted medical device and the surrounding tissue, which could lead to burns."
- "The presence of the medical device will degrade the quality of the MR image, which may make the MRI scan uninformative or may lead to an inaccurate clinical diagnosis, potentially resulting in inappropriate medical treatment."

9. Adverse Effects

Some of the adverse effects that could occur related to total knee arthroplasty are:

- fracture of the tibia or femur;
- transient peroneal palsy secondary to surgical manipulation;
- patellar subluxation or dislocation;
- patella femoral impingement;
- instability, changes in position, or loosening of components;
- ligamentous laxity;
- dissociation of components;
- infection;
- poor range of motion;
- shortening of limbs;
- lengthening of limbs if severe deformity is present;
- metal sensitivity reactions.

10. Sterilization

Unless opened or damaged, DJO Surgical® implants are supplied sterile in multiple pouches or barrier blister trays. Upon receipt, check all packaging for punctures or other damage. If during inspection, packaging is found opened or damaged, contact manufacturer or manufacturer's representative for instructions.

Sterilization of implants other than Tibial Inserts and Patellae manufactured from Moderately Cross-Linked Polyethylene with Vitamin E (e+™) is performed by gamma radiation at the minimum dose of 25 kGy to achieve a Sterility Assurance Level (SAL) of 10⁻⁶.

Sterilization of the Tibial Inserts and Patellae manufactured from Moderately Cross-Linked Polyethylene with Vitamin E (e+™) is performed by hydrogen peroxide gas plasma to achieve a Sterility Assurance Level (SAL) of 10⁻⁶.

Implants are single-use devices. Trials and other instruments are used to determine sizing before the sterile package needs to be opened. Should the integrity of the original sterile package be lost by being opened, punctured, or torn before implantation in the surgical field, contact manufacturer or manufacturer's representative for instructions. These inserts are single-use devices and CANNOT be resterilized by a healthcare facility. Contact manufacturer or manufacturer's representative for instructions.

Do not resterilize an implant or component that has been opened outside of the surgical field or in contact with or contaminated by blood or other substances. Do not try to clean an implant since standard procedures cannot be relied upon to remove contamination from the implant or component and storage of the opened implant or component should be avoided.

Instruments are provided nonsterile and should be stored in their original packaging until cleaned and sterilized according to the recommended guidelines found in the DJO Surgical® Instrumentation Instructions for Use.

WARNING: DO NOT resterilize any knee prosthesis distributed by DJO Surgical® (Encore Medical, L.P.) if sterile packaging is opened or damaged upon receipt. Return the implant with respective packaging to DJO Surgical® for inspection and disposition.

WARNING: Protect all porous coated and polished surfaces. Standard cleaning procedures cannot be relied upon to remove contamination from porous coating.

WARNING: DO NOT resterilize UHMWPE (ultra-high molecular weight polyethylene) and Moderately Cross-Linked Polyethylene Vitamin E (e+™) implants.

DJO Surgical® has validated sterilization cycle data on file.

NOTE: DJO Surgical® does not recommend Flash or Chemical Sterilization.

For further information regarding the use of the DJO Surgical® Knee Systems, contact your DJO Surgical® representative or distributor.



DJO Surgical® Knee Systems are manufactured by ENCORE MEDICAL, L.P.
9800 Metric Blvd., Austin, TX 78758 USA (Made in the USA)












11. Trademarks and patents







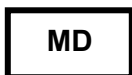

FOUNDATION®, FK/3DKNEE™, 3DKNEE™, EMPOWR Knee System™, EMPOWR 3D™, EMPOWR 3D KNEE®, EMPOWR Porous®, EMPOWR PS™, EMPOWR PS KNEE®, DJO EMPOWR KNEE®, EMPOWR CR®, EMPOWR VVC®, EMPOWR Partial Knee™ EXPRT®, EPIK®, e+™ are trademarks of DJO Surgical®.

U.S. patents: 5,413,604

Symbol Glossary:

 ISO 15223-1 5.4.2	Single use – do not reuse
 ISO 15223-1 5.1.4	Expiration Date

 <p>ISO 15223-1 5.3.4</p>	<p><i>Keep Dry</i></p>
 <p>ISO 15223-1 5.1.5</p>	<p><i>Lot number/Batch Code</i></p>
 <p>ISO 15223-1 5.2.1</p>	<p><i>Sterile</i></p>
 <p>ISO 15223-1 5.2.4</p>	<p><i>Sterility symbol: R: Sterile Using Irradiation</i></p>
	<p><i>Sterile symbol: H2O2: Sterilized Using Hydrogen Peroxide Gas Plasma</i></p>
 <p>ISO 15223-1 5.2.7</p>	<p><i>Non-sterile</i></p>
 <p>ISO 15223-1 5.4.3</p>	<p><i>See "Instructions for Use"</i></p>
 <p>ISO 15223-1 5.1.1</p>	<p><i>Manufacturer</i></p>
	<p><i>Quantity of items in package</i></p>
 <p>ISO 15223-1 5.1.2</p>	<p><i>Authorized Representative in European Community</i></p>
 <p>ISO 15223-1 5.1.6</p>	<p><i>Catalog Number</i></p>

 ISO 15223-1 5.2.6	<i>Do not resterilize</i>
 ISO 15223-1 5.2.8	<i>Do not use if package is damaged</i>
 ASTM F2503:2013	<i>MR Safe</i>
 ASTM F2503:2013	<i>MR Conditional</i>
 ASTM F2503:2013	<i>MRI Unsafe</i>
Rx 21 CFR 801.109	<i>Federal Law (USA) restricts this device to sale by or on the order of a physician.</i>
	<i>Importer</i>
	<i>Medical Device</i>
	<i>Country Code of Manufacturer - US</i>

Bone Cement Usage – The following legends are displayed on the product labeling to indicate bone cement usage:

Usage	Legend
Implants intended to be used with bone cement	CEMENTED
Implants intended to be used without bone cement	CEMENTLESS
Implants intended to be used optionally	NO LEGEND