

INSTRUCTIONS FOR USE OF THE IMPLANT CARD

To be filled by the healthcare institution/provider:

Fill the following four items in the place indicated on the external side of the implant card and stick the labels (see page 2) in the corresponding space on the internal side of the implant card.

1. Name of the patient or patient ID.
2. Date of implantation.
3. Name and address of the healthcare institution/provider.
4. Lower limb Right or Left.

Symbols and Instructions for completion

	Patient Name or patient ID. To be filled by the healthcare institution/provider
	Name and Address of the implanting healthcare institution. To be filled by the healthcare institution/provider.
	Date of implantation. To be filled by the healthcare institution/provider
	Device Name
	Manufacturer
	Information website for patients

FEMORAL STEM

Place product label here (see packaging)



TDIGUI3000000 Rev.03


en Femoral implant / bg бедрен имплант / cs femorální implantát / da lårbensimplantat / de Oberschenkelimplantat / el μηριαίο εμφύτευμα / es Implante femoral / et reieluu implantaat / fi reisiluun implantti / fr Implant fémoral / hr Femoralni implantat / hu Comb implantátum / it Impianto femorale / is Ígræðsla í lærlegg / lt Šlaunikaulio implantas / lv Ciskas kaula implants / nl Femoraal implantaat / no Femoral implantat / pl Implant udowy / pt Implante femoral / ro Implant femural / sk Femorálny implantát / sl Femoralni implantat / sv Femoral implantat / tr femoral implant

SPACER

Place product label here (see packaging)




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INTERNATIONAL
IMPLANT CARD



 **KEEP WALKING FEMORAL IMPLANT**

 <https://www.tequir.com/keep-walking/>

4 LOWER LIMB Right Left

WASHER-SCREW ASSEMBLY

Place product label here (see packaging)

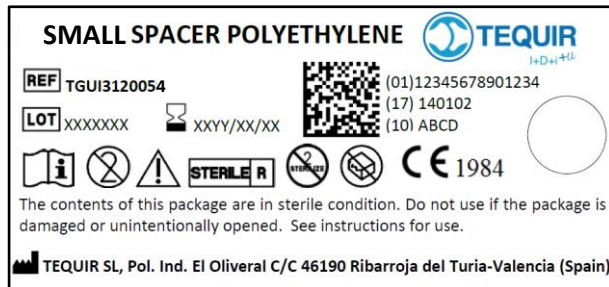
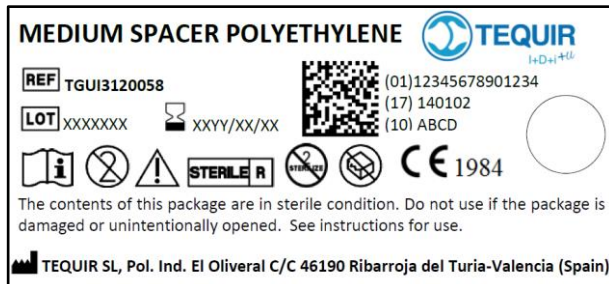
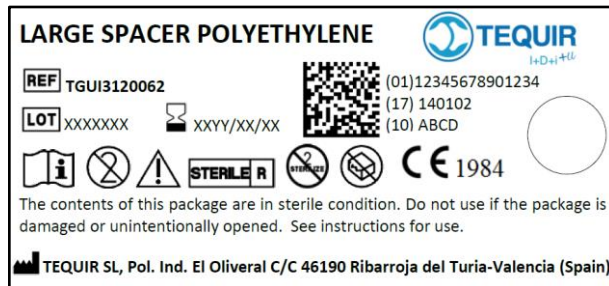


Model of internal labels provided with the Keep Walking implant:

- Femoral stem label model:




















- Spacer label models for the three available sizes: large/medium/small



- Washer-screw assembly label model:



Explanation of symbols and numbers

	Patient Name or patient ID
	Name and Address of the implanting healthcare institution/provider
	Date of Implantation
	Device Name
	Manufacturer
	Information website for patients
	LOT number
	HRI (Human Readable Interpretation) UDI (Unique device identifier)*
	Catalogue number
	Use-by-date
	Date of manufacture
	Consult instructions for use or consult electronic instructions for use
	Do not re-use
	Caution
	Sterilized using irradiation
	Do not re-sterilise
	Do not use if package is damaged and consult instructions for use

* There is also the Automatic Identification and Data Capture (AIDC) format of the UDI.

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