IMPLANTS
For Total Knee Replacement

IMPORTANT PATIENT LEAFLET

anatomic

READ CAREFULLY THIS LEAFLET BEFORE SURGERY.
IT CONTAINS IMPORTANT INFORMATION FOR YOU.

WHAT IS IN THIS LEAFLET

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Keep this leaflet

You may need to read it again. If you have any further questions, ask your surgeon.
If you experience any side effect, including **possible side effects not listed** in this leaflet, talk to your doctor or pharmacist. See page 4.
This leaflet has been written assuming the person receiving the implants is reading it .

Intended Use

The Total Knee system is intended to replace the natural knee joint (knee arthroplasty) through an artificial system.
Patients with a mature skeleton may be implanted with a total knee prosthesis in cases of severe joint pathology (cartilage wear, inflammation like arthritis or after an injury such as a bone fracture after a fall) and where other devices or treatments have failed.
Please ask your surgeon for details. The decision to implant a total knee prosthesis is left to the surgeon after evaluation of the risk/benefit balance and after discussion with you.

Warning and Precautions

You must be informed the factors that could compromise the success of the surgery and post operative results :

- Overweight;
- Case history detailing infections and/or falls;
- Metabolic disorders that reduce your resistance or induce progressive bone deterioration;
- Local bone tumours;
- Severe bone deformities;
- Severe osteoporosis;
- Playing sports intensively;
- Playing risky sports or engaging in risky activities;
- Addictive behaviour.

Specific warnings & MRI information

The materials used in your implant may trigger security gates/scanners.
PLEASE INFORM PERSONNEL ABOUT YOUR IMPLANTED DEVICE.

Non-clinical testing demonstrated that the implants are **MR Conditional**. A patient with one of these devices can be scanned safely in a MR system under the following conditions:

- Static magnetic field of 1.5T or 3T for a 15min-procedure;
- Maximum spatial gradient field of 1,500 Gauss/cm;
- Normal operation mode only;
- The image artefact caused by the implants extends approximately 99mm from these implants. MR images may be blurred next to the implants.

Maximum measured temperature rise with 1.5T MRI, for a 15min procedure	8.6°C (calorimetry WB-SAR of 3.27W/kg)
Maximum measured temperature rise with 3T MRI, for a 15min procedure	9.9°C (calorimetry WB-SAR of 2.39W/kg)

Reporting Adverse Events

Any incident in relation to the device shall be reported to your surgeon, healthcare facilities or family doctor.

YOU HAVE BEEN IMPLANTED WITH :

The surgeon needs to tick boxes corresponding to the devices you have been implanted with.

Associations with other devices have to be validated by Amplitude.

FEMORAL COMPONENTS

- ☐ **ANATOMIC® Femoral component - cementless**
- ☐ **ANATOMIC® Femoral component - cemented**

TIBIAL COMPONENTS

- ☐ **ANATOMIC® Tibial baseplate - cementless**
- ☐ **ANATOMIC® Tibial baseplate - cemented**

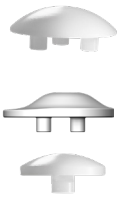
- ☐ **ANATOMIC® Tibial fixed bearing insert**

- ☐ **ANATOMIC® Tibial augment - cemented**
- ☐ **Tibial augment for Total Knee Prosthesis - cemented**

- ☐ **Extension stem for Total Knee Prosthesis - cemented**

PATELLAR COMPONENTS

- ☐ **Resurfacing patellar implant - cemented**
- ☐ **Resurfacing patellar implant NM - cemented**
- ☐ **Asymmetric congruent resurfacing patellar implant - cemented**
- ☐ **Inset patellar implant - cemented**



MATERIALS

Cobalt-Chromium alloy Co: 58.65% - 69% / Cr: 26.50% - 30.00% / Mo: 4.50% - 7.00% / Ni: ≤1.00% / Fe: ≤1.00% / Mn: ≤1.00% / Si: ≤1.00% / C: ≤0.35%	**ANATOMIC® Femoral component - cemented** **ANATOMIC® Tibial baseplate - cemented**
Cobalt-Chromium alloy Co: 58.65% - 69% / Cr: 26.50% - 30.00% / Mo: 4.50% - 7.00% / Ni: ≤1.00% / Fe: ≤1.00% / Mn: ≤1.00% / Si: ≤1.00% / C: ≤0.35% **Hydroxyapatite coating** (Ca5(PO4)3OH: 100%) **& titanium undercoating** (Ti: >15.90% / O: ≤ 10.00% / N: ≤ 5.00% / Fe: ≤ 0.60% / H: ≤ 0.20% / C: ≤ 0.10%)	**ANATOMIC® Femoral component - cementless** **ANATOMIC® Tibial baseplate - cementless**
Polyethylene PE: 100%. Possible traces of Ti, Al, Ca, Cl.	**ANATOMIC® Tibial fixed bearing insert** **Patellar components**
Stainless steel Fe: 57.34% - 67.00% / Cr: 19.50% - 22.00% / Ni: 9.00% - 11.00% / Mn: 2.00% - 4.25% / Mo: 2.00% - 3.00% / Nb: 0.25% - 0.80% / Si: ≤0.75% / N: 0.25% - 0.50% / Cu: ≤0.25% / C: ≤ 0.08% / P: ≤0.03% / S ≤0.01%	**Standard keel (provided with tibial baseplates - cemented or cementless)** **ANATOMIC® Tibial augment - cemented** **Tibial augment for Total Knee Prosthesis - cemented** **Extension stem for Total Knee Prosthesis - cemented**

DEVICES EXPECTED LIFETIME

The ANATOMIC® total knee prosthesis expected survivorship is at least 95% at 10 years. This can be reduced or increased depending on your activity level or events that could compromise implants integrity (falls, accidents…).
Please attend regular check-ups according to your surgeon's advice.

Contraindications

At the time of the surgery, these conditions are not recommended :

- Pregnancy and breastfeeding;
- Allergy to the implant materials;
- Infections;
- Severe mental, muscular, neurological or vascular deficiencies affecting the limb in question;
- Destruction of bone or poor bone quality which may affect stability of the implant;
- Highly localized arthrosis requiring osteotomy or unicompartmental arthroplasty;
- Anatomic disorder requiring a constrained or hinge prosthesis.

These conditions should be discussed with your surgeon. Any pathology (even if not listed above) must be mentioned to your surgeon beforehand as well.

Possible side effects

You must be informed about the side effects in relation with the device that might occur. Those recorded by Amplitude are all rare (lower than 1 per 1000 cases). **Please consult your surgeon if any doubt.**

- Heavy surgery, difficult recovery;
- Wounding of an important artery or a nerve in the lower limb;
- Disruption or rupture of the thigh tendons;
- Rupture of a thigh muscle;
- Clunk syndrome;
- Infection;
- Prolonged stiffness;
- Knee instability;
- Pain;
- Allergy to implants materials;
- Osteolysis;
- Wear of the prosthesis with the presence of debris, sometimes poorly tolerated by the surrounding muscles and tendons;
- Fracture of the bones;
- Dislocation, displacement or loosening of the prosthesis;
- Premature wear of joint surfaces;
- Breakage of the prosthesis material;
- Conflict between the components of the prosthesis during movement;
- Poor tolerance of muscles and tendons in contact with the prosthesis (conflicts, friction).

Other events linked to the surgery can also occur:

- Phlebitis, fat or pulmonary embolism;
- Hematoma;
- Algoneurodystrophy;
- Abnormal ossification;
- Poor healing of the bones.

You must also be aware of the risks and possible side effects of surgery - please ask your surgeon for further information.

After a joint replacement, you should pay attention during your daily life: any blow, fall or accident may **jeopardise your recovery or your implant lifetime .** Please ask your surgeon for further information.