Patient Implant Card

Print information

Print true to size (100% scale) with minimal margins

Step 1

Cut along solid line

Step 2

Fold paper vertically

Step 3

Fold paper horizontally

P31-PIC-3001 Rev A

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① Outside ② Inside

Outside (upside-down text):

www.paragon28.com/patients/patient-information.

Attention: This is an MR conditional device. This person has the medical device(s) listed above and can safely undergo an MR exam only under very specific conditions. Scanning under different conditions may result in severe injury or device malfunction. Full MRI safety information is available in the MRI safety information section of the product IFU, which can be obtained at www.paragon28.com/ifus. See also the Patient Information Leaflet obtained at

Patient Medical Device Card

Phantom® Hindfoot TTC Nail System

Paragon 28, Inc.
+1 (855) 786-2828
14445 Grasslands Dr.
Englewood, CO 80112 USA
www.paragon28.com

Inside:

Paragon 28

Phantom® Hindfoot TTC Nail System

P31-PIC-3001 Rev A

REF	Part number		Patient name
LOT	Lot number		Name and address of health institution or provider
MR	MR conditional symbol		Date of implantation
	Patient information website	MD	Device name
	Place patient label on the back of the implant card		Name and address of the manufacturer